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# Sheffield Support Grid Exemplification (SSGe)



#### Introduction

This document contains the Early Years Sheffield Support Grid Exemplification Document, the Sheffield Support Grid Exemplification document for school age Children and Young People (CYP) and for post 16 Preparation for Adulthood considerations.

The support grid uses the official categories of need set out by the Special Educational Needs & Disability (SEND) Code of Practice: 0-25 years (2014) and illustrates the Teaching and Learning Strategies suitable for each. It also indicates the expected support levels to be provided, some suggested interventions for each area of need, the identification and assessment tools that may be in place and which other services may be able to help.

The Sheffield Support Grid Exemplification document is built on the original Sheffield Support Grid, which used the idea of Quality First Teaching outlined in the Removing Barriers to Achievement (2004) paper and the National Strategies three waves of intervention model, and provides guidance and strategies sourced from the above and practitioners to support pupils within primary and secondary settings.

This 2025 updated document includes an Ordinarily Available Toolkit for each area of need. This replaces level 1/2 of the original Sheffield Support Grid Exemplification document. The Ordinarily Available Toolkit details the support and resources that mainstream schools and settings are expected to provide for CYP with special educational needs and disabilities. Ordinarily Available provision should be provided from within the institution's own resources, without the need for extra or specialised support.

The 2025 updated document includes levelling grids for Speech and Language needs and Cognition and Learning needs. These grids are to help practitioners consider the range of factors that can contribute to a CYP presentation and so help identify the level of need and what type of support would most be effective to meet these needs.

In the updated 2025 document, we have collapsed 2a General Learning Needs and 2b Specific Learning Needs and made one section - Cognition and Learning.

We have also collapsed 3a Emotional Regulation and 3b Mental Health and made one section - Social Emotional and Mental Health.

We have added in a Sensory section 4e, to help practitioners consider the support needed to meet this need.

In addition, the 2025 updated Sheffield Support Grid Exemplification includes Preparation for Adulthood considerations for each area of need. These should be reflected on when considering next steps for a CYP.

As well as the support outlined in this document it is expected that the needs of a CYP will also be addressed through using the range of support detailed in the <u>Sheffield</u> <u>Local Offer</u>.

Through the document acronyms are used. Please consult the SEND glossary for clarification.

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# 1A Communication and Interaction – Speech and Language Levelling Grid



Sheffield S To identify	Levelling Grid Sheffield Support Grid: 1A Communication and Interaction – Language To identify a CYP's overall level, consider the level of impairment (provided by Speech and Language Therapy) alongside the other areas of presentation. Use a best fit judgment to derive the level of need.					
Level	Impairment (level identified by formal assessments carried out by Speech and Language Therapy)	Activity (level identified by teaching staff / parent/carer)	Participation (level identified by teaching staff / parent/carer)	Wellbeing and emotional regulation (level identified by teaching staff / parent/carer)		
1	<ul> <li>Mild language difficulties:</li> <li>Mild problems in either, or both, understanding and expression.</li> <li>Language following normal patterns of development.</li> <li>Scores on standardised assessments falling below 16<sup>th</sup> centile</li> </ul>	Some difficulty communicating verbally with unfamiliar people or in unfamiliar contexts	Occasional difficulties in participating in unfamiliar educational and social activities. Needs encouragement to achieve potential	Occasionally displays mild: distress/ upset/ concern/ frustration/ anger/ distress/ embarrassment/withdrawal		
2	<ul> <li>Mild to Moderate language difficulties:</li> <li>Moderate problems in either, or both, understanding and expression.</li> <li>Standardised scores on formal assessments fall below 9<sup>th</sup> centile in at least one area.</li> </ul>	<ul> <li>Some difficulty communicating verbally</li> <li>Needs some cues and adult assistance or extra time when conveying information beyond basic needs</li> </ul>	Occasional difficulties in participating in unfamiliar educational and social activities. Needs support to achieve potential	<ul> <li>Frequently displays mild Distress/ upset/ concern/ frustration/ anger/ embarrassment/withdrawal</li> <li>Occasionally needs external support to assist emotional control.</li> </ul>		
3	<ul> <li>Moderate to severe language difficulties:</li> <li>Severe/moderate problems in either, or both, understanding and expression.</li> <li>Standardised scores on formal assessments fall below 5th centile in at least one area.</li> </ul>	Frequent difficulty communicating verbally beyond basic needs. Frequently relies on a trained listener or family members for expressing themselves out of context.	Frequent difficulties participating in social activities in unfamiliar contexts or with unfamiliar people. Frequent difficulties participating independently in unfamiliar educational activities	Occasionally shows moderate Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal • Emotional encouragement and support required		

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## 1A Communication and Interaction – Speech and Language Levelling Grid



	Impairment	Activity	Participation	Wellbeing and
Level	(level identified by formal	(level identified by teaching staff /	(level identified by teaching staff /	emotional regulation
	assessments carried out by	parent/carer)	parent/carer)	(level identified by teaching staff / parent/carer)
	Speech and Language Therapy) Severe language difficulties:	Constant difficulty	Frequent difficulties	Frequently displays moderate
4	<ul> <li>Severe hanguage unificatives.</li> <li>Severe problems usually involving both understanding and expression, although one area may be more profoundly affected.</li> <li>Standardised scores will fall below the 1<sup>st</sup> centile in at least one area of expression or understanding.</li> <li>CYP may be unable to engage with formal assessments.</li> </ul>	communicating verbally beyond basic needs. Occasional difficulties communicating basic needs. Frequently relies on a trained listener or family members for expressing themselves in any context.	participating in social activities, even with familiar people and contexts. Frequent difficulties participating independently in educational activities.	<ul> <li>Inderate levels of distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal</li> <li>A structured approach to emotional support from others is required.</li> </ul>
5	<ul> <li>Profound language difficulties:</li> <li>Profound problems are evident in both understanding and expressive language, although one area may be more profoundly affected.</li> <li>Standardised test scores fall below the first centile in all areas of language assessment.</li> <li>CYP may be unable to engage with formal assessments.</li> </ul>	<ul> <li>Minimal functional communication limited to expressing basic needs, usually requiring tailored use of AAC.</li> <li>Constant dependence on trained / familiar communication partner.</li> </ul>	Profound difficulties participating in educational and social activities.	<ul> <li>Frequently displays high levels of distress/ upset/ concern/ frustration/anger/ distress/ embarrassment/ withdrawal Unable to express or control emotions appropriately.</li> <li>Difficulties responding to external support to control emotions.</li> <li>A tailored and structured approach to emotional support is required.</li> </ul>

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#### 1A Communication and Interaction – Speech and Language Ordinarily Available Provision for 1A Speech and Language & 1C Speech and Fluency



	A Classroom Support Guide for Pupils Presenting with Speech, Language and Fluency Differences Universal Support - Classroom Strategies				
Positive and effective relationships	<ul> <li>Adult support for learning as required.</li> <li>Awareness that speech and language difficulties may impact confidence.</li> <li>Some support to be available for communication and emotional regulation. Eg CYP's frustration leads to anger, and the CYP is unable to quickly give an account to the teacher due to unintelligible speech. More information can be found <u>here</u></li> </ul>	<ul> <li>CYP are explicitly taught how to listen and work together in groups</li> <li>Opportunities are built in throughout the day for pupils to communicate verbally.</li> <li>Consideration of time needed to process language More information can be found <u>here</u></li> </ul>			
Enabling environments	<ul> <li>Visual support (signs, symbols, photographs, written word) is consistently used to label the classroom / support routines/ timetable daily activities, so pupils know what to expect and when: More information can be found <u>here</u></li> <li>Noise levels are conducive to learning and unnecessary noise is minimised</li> <li>Consideration is given to seating position in order to maximise CYP's attention levels</li> <li>Offer individual programmes of work (based on targets set by speech and language therapy staff for blocks of intervention (generally 6-8 weeks per block on input) with reinforcement in whole class activities to aid transfer of skills. Seek support from the SALT service where required to enable staff to deliver programmes.</li> </ul>	<ul> <li>Be aware of the possible impact on vocabulary acquisition and word finding difficulties and use the following adjustments:         <ul> <li>Pre and post tutoring is used to enable the pupil to engage with learning in the classroom.</li> <li>Vocabulary teaching and visual word mats used in lessons: More information can be found <u>here</u></li> <li>Support CYP to develop an increased awareness of phonemic structure eg syllable clapping, initial sounds, rhyme, and semantic structure eg category, function etc</li> <li>See SLT wave 2 training on <u>vocabulary</u></li> </ul> </li> <li>Seek support from the SALT service to enable staff to deliver speech programmes or fluency strategies in the school context.</li> </ul>			

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**1A** Communication and Interaction – Speech and Language **Ordinarily Available Provision for 1A Speech and Language & 1C Speech** and Fluency continued



Access to Learning	<ul> <li>Word mats available to support vocabulary and spelling</li> <li>Use of visual, auditory and kinaesthetic approaches</li> <li>Resources and displays that support independence</li> <li>Pre-learning of language combined with visuals to support this learning in classrooms</li> <li>Alternative forms of recording used for some pieces of work, especially pieces of longer length</li> <li>Consistent use of gestural system of sound representations (e.g. Cued Articulation, Jolly Phonics) where a gesture is used to represent a phoneme/speech sound, be aware of any sounds the CYP is struggling with and ensure this is a focus: More information can be found <u>here</u></li> <li>Pupil accesses appropriate wave 2 language intervention e.g. LEAP, NIP, VIP, Stories for Talking , or appropriate small groups or sets: Training can be accessed <u>here</u></li> </ul>	•	CYP accesses group for ac this is identified as a weak Rhythm and Rhyme. Teacher is aware of the lea group, and this feeds back fluency language is support activities show consideration Advice from Speech and La in the planning Reduce language demands o <u>Early strategies</u> o <u>Higher level strategi</u> Consult the <u>Speech and La</u>
Communication	<ul> <li>Adults adapt their language levels to the level of the CYP.</li> <li>Adults use language strategies to enhance CYP's expressive language development More information can be found <u>here</u></li> <li>Adult modelling of correct speech sounds used in context and with the visual support of the gestural system: More information can be found <u>here</u></li> </ul>		

- additional phonological interventions where kness and / or speech intervention e.g.
- arning taking place in the intervention k into their planning e.g. speech and orted back in class, literacy objectives and ion.
- Language Therapy (if involved) is included
- ds for CYP with language difficulties.
  - gies
- anguage Library of Support where needed

## 1A Communication and Interaction – Speech and Language Level 3



The CYP shows moderate to severe difficulties with expressive and/or receptive language that affects access to the curriculum. The CYP's needs are met using a combination of approaches (Including small group interventions and 1:1 individualised support in and out of the classroom) following support and advice from other professionals as appropriate.

At secondary this student may be following a different curriculum pathway.

<b>Provision:</b> Some targeted and individ	ual interventions over the week	Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
Impairment (to be identified by SALT)Moderate to severe language difficulties: Severe/moderate problems in either, or both, understanding and expression.Standardised scores on formal assessments fall below 5th centile in at least one area.In addition, one or more of the 	Observation Data tracking Teacher assessments CYP Progress meetings CYP/Young Person voice One Page Profile/Learner Profile Parent/Carer voice An <u>Extended Support Plan</u> may be in place to draw together information, advice, aspirations and planned outcomes Screening tools and / or assessment tools as identified <b>Continued on next page</b>	<ul> <li>Ordinarily Available provision whilst also including –</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate:</li> <li>Teaching staff should have knowledge of the CYP's language profile and impact on learning, behaviour and social interaction.</li> <li>The class/subject teacher is accountable for the progress of the CYPs within the mainstream class. Curriculum tasks should be modified as required.</li> <li>Enhanced use of visual support for language and learning e.g. Shape Coding, Makaton, Cued Articulation, vocabulary mats.</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Additional advice and support is available from: Educational Psychology Service Speech and Language Therapy Fusion SEND Hub/Learning Support
Continued on next page			

### 1A Communication and Interaction – Speech and Language Level 3 continued



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
ParticipationFrequent difficulties participating in social activities in unfamiliar contexts or with unfamiliar people.Frequent difficulties participating independently in unfamiliar educational activities.Wellbeing Occasionally shows moderate Distress/ upset/ concern/ frustration/ 	Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Grouping The CYP will access a variety of support over the week: <ul> <li>whole class teaching, incorporating wave 1/ Ordinarily Available strategies.</li> <li>small group support, including access to wave 2 language interventions where appropriate</li> <li>individualised 1:1 support working on personalised targets as advised by the Speech and Language Therapy team. Where specific language targets have been set, 1:1 time needs to be allocated for 20 minutes, 2 to 3 times weekly.</li> <li>Class/ subject teacher is aware of the learning taking place in the intervention group and this feeds back into their planning e.g. literacy-based objectives and activities show consideration of language needs. </li> </ul></li></ul>	

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## 1A Communication and Interaction – Speech and Language Level 3 continued



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Resources:</li> <li>Access to Speech and Language Therapy to set appropriate targets, and coach teaching staff where required, in line with an episode of care model.</li> <li>An appropriate level of adult support to work towards specific targets</li> <li>Adult support in class to transfer and generalise language skills learnt in 1:1 environment</li> <li>Strategies and resources to develop of independence.</li> <li>Resources may include shape coding sentence makers.</li> <li>Identification of any specific training needs for staff</li> </ul>	



## 1A Communication and Interaction – Speech and Language Level 4



The CYP shows severe difficulties with expressive and/or receptive language that affects access to the curriculum. The CYP's needs are met by working on an individual, bespoke curriculum and so has a highly personalised timetable that includes time spent away from the mainstream class. The CYP is able to access the classroom for limited periods where they are able to experience success supported by a member of staff. Planned opportunities are provided for the CYP to be included with peers where the CYP is able to experience success.

Provision: Frequent, specific specialised input		Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
Impairment (to be identified by SALT)	Observation	As level 3 whilst also including -	May make use of Locality Panels – Stage 1 or 2 (if Applicable)
Severe language difficulties: Severe problems usually involving both understanding and expression,	Data tracking Teacher assessments	Adjustments to Teaching Methods Staff should consider and implement as appropriate:	Additional advice and support is available from:
although one area may be more profoundly affected.	CYP Progress meetings	<ul> <li>Adapted or bespoke curriculum</li> <li>Teaching of independent life skills</li> </ul>	Educational Psychology Service
Standardised scores will fall below the 1st centile in the area of expression or understanding.	CYP/Young Person voice One Page Profile/Learner Profile	Focus on functional communication skills where appropriate	Speech and Language Therapy Fusion SEND Hub/Learning Support
CYP may be unable to engage with formal assessments.	Parent/Carer voice An Extended Support Plan / EHCP	Emphasis on language, communication and interaction being the focus of an adapted	
Continued on next page	may be in place to draw together information, advice, aspirations and planned outcomes.	<ul> <li>curriculum and integrated into all learning and social opportunities</li> <li>Extensive use of individual visual support in all areas of the</li> </ul>	
	Screening tools and / or assessment tools as identified to unpick need and measure impact of support	curriculum e.g. signing, timetables, vocabulary dictionaries, workstations, resources and rewards to	
	Continued on next page	enhance learning and develop independence <b>Continued on next page</b>	

## 1A Communication and Interaction – Speech and Language Level 4 continued

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Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
In addition, one or more of the following (identified by teaching staff/parents) also applies: <u>Activity</u> Constant difficulty communicating verbally beyond basic needs. Occasional difficulties communicating basic needs. Frequently relies on a trained listener or family members for expressing themselves in any context. <u>Participation</u> Frequent difficulties participating in social activities, even with familiar people and contexts. Frequent difficulties participating independently in educational activities. <u>Wellbeing</u> Frequently displays moderate distress/upset/concern/frustration/an ger/embarrassment/withdrawal.	Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Daily access to staff who are skilled in supporting emotional regulation through the use of visual support, AAC, resources and motivators</li> <li>A structured approach to emotional support from others is required</li> <li>Grouping</li> <li>An alternative curriculum may be appropriate (due to difficulties with either language and/ or communication, social skills, and sensory needs) delivered in an adapted educational setting as recommended by appropriate specialist services</li> <li>The CYP accesses small group and/or individualised support, to work on targets as advised by Speech and Language Therapy</li> </ul>	
		Continued on next page	

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# 1A Communication and Interaction – Speech and Language Level 4 continued

Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Access to regular support to develop social skills and support emotional regulation</li> <li>Planned time for small group and individual working with some light touch adult support, to support independent learning</li> <li>Planned time for small group and individual working with intensive adult support, to work on curriculum and additional language / communication skills eg. vocabulary, comprehension, inference, grammar or tailored AAC (and possibly speech – see speech / phonology grid) guided by external professionals e.g. Speech and Language Therapists</li> <li>Access to daily group and individual support to extend social skills, social interaction and social use of language</li> </ul>	



## 1A Communication and Interaction – Speech and Language Level 4 continued

Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Resources</li> <li>Additional adults support the CYP individually under the direction of the teacher to:         <ul> <li>Work on modified curriculum tasks (additional time needed to prepare resources including visual support to enhance access to learning)</li> <li>Embed language learning and generalise new skills into functional and curriculum activities</li> </ul> </li> <li>Access for teaching staff to appropriate resources, guidance and support from specialist staff, in order to carry out specific interventions</li> </ul>	

## 1A Communication and Interaction – Speech and Language Level 5



The CYP shows profound difficulties with expressive and/or receptive language that affects access to the curriculum. The CYP's needs are met by working on a completely individual, bespoke curriculum and so they have a highly personalised timetable that necessitates 1:1 support to work towards specific, Outside Agency practitioner set targets. The CYP is able to access the classroom for limited periods where they are able to experience success supported by a member of staff. Planned opportunities are provided for the CYP to be included with peers where the CYP is able to experience success. Provision: Daily, specific specialised input at all times across all aspects of **Reviews:** 3 per year minimum **Documents:** Usually have an EHC the curriculum Plan **Bespoke Descriptor** Identification and Assessment Teaching and Learning Additional advice and support Level 5 Strategies and Interventions May make use of Locality Panels -Impairment (to be identified by Observation There is agreement between • professionals (Educational Stage 1 or 2 (if Applicable) SALT) Data tracking • **Psychology Service, Locality** • Teacher assessments Profound language difficulties: **SENCO, Local Authority SEND** Additional advice and support is CYP Progress meetings • Profound problems are evident in Manager etc.) that the CYP's available from: CYP/Young Person voice ٠ both understanding and expressive needs and provision in place • One Page Profile/Learner Profile language, although one area may be constitute a Level 5. Educational Psychology Service Parent/Carer voice • more profoundly affected. Staff should have considered and Speech and Language Therapy An EHCP is likely to be in place to implemented effective and Standardised test scores fall below draw together information, advice, appropriate strategies from previous Fusion SEND Hub/Learning Support the first centile in all areas of aspirations and planned outcomes. levels, especially level 4. language assessment. In addition, the following will be in Screening tools and / or assessment place: CYP may be unable to engage with tools as identified where and when formal assessments. they can be used to help unpick **Adjustments to Teaching Methods** need and measure impact of support Staff should consider and implement Continued on next page as appropriate Multi agency planning, Outside Adapted and bespoke curriculum • Agency advice and Teaching of independent life • recommendations are followed. skills Pre teaching and over learning of Access arrangements considered. vocabulary Continued on next page

## 1a Communication and Interaction – Speech and Language Level 5 continued



Bespoke Descriptor	Identification and Assessment	Teaching and Learning	Additional advice and support
Level 5		Strategies and Interventions	
In addition, one or more of the		Adjustments to Teaching Methods	
following (identified by teaching		(continued)	
staff/parents) also applies:		Focus on functional	
		communication skills and early	
Activity		communication skills where	
Minimal functional		appropriate i.e. attention and	
communication limited to		listening, turn taking, etc.	
expressing basic needs, usually		Emphasis on communication,	
requiring tailored use of AAC.		language and interaction being	
Constant dependence on trained /		the focus of an adapted	
familiar communication partner.		curriculum and integrated into all	
Participation		learning and social opportunities	
Profound difficulties participating		Extensive use of multisensory	
in educational and social activities.		support to access learning e.g. objects of reference, tactile cues,	
		auditory cues, olfactory cues and	
Wellbeing		visual cues	
Frequently displays high distress/		<ul> <li>All verbal communication used</li> </ul>	
upset/ concern/ frustration/ anger/		by staff, to be supported visually	
embarrassment/ withdrawal		using gesture, sign, modelling,	
Unable to express or control		objects, photos and/or symbols.	
emotions appropriately.		Teaching delivered at a simple	
		level and slower pace, with	
Difficulties responding to external		frequent repetition and over	
support to control emotions. A		learning	
tailored and structured approach to		Curriculum delivered through	
emotional support is required.		structured practical experiential	
		learning opportunities	
		<ul> <li>Availability of alternative</li> </ul>	
		methods of recording written	
		learning e.g. symbols, videos,	
		photos Continued on next page	



## 1A Communication and Interaction – Speech and Language Level 5 continued

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Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Requires a Total Communication approach which values any effective means of communication e.g. facial expression, body language, eye pointing, sign, pointing, objects, gesture, photos, etc.</li> <li>Alternative communication systems to support expressive communication (low or high tech). This may include object- based systems, photos or symbols. This may include alternative methods to participate in education or social tasks i.e. switches, eye gaze, etc</li> <li>Provision to meet additional sensory and / or motor needs as appropriate</li> <li>Emphasis on social communication and social skills development (with specialist advice)</li> <li>Support in unstructured learning environments and break / lunchtimes</li> <li>Continued on next page</li> </ul>	

## 1A Communication and Interaction – Speech and Language Level 5 continued



Adjustments to Teaching Methods (continued)         • Daily access to staff who are skilled in supporting emotional regulation through the use of visual support, AC, resources and motivators         Grouping         • An alternative curriculum is appropriate (due to diffucities with either language and/ or communication, social skills, and sensory needs) delivered in an adapted educational setting as recommended by appropriate specialist services         • The CYP accesses small group and individualised support, with Speech and Language targets integrated into their daily routine         • Access to regular support to develop social skills and support emotional regulation         • Planned time for small group and individual working with some light touch adult support, to support independent learning	Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>An alternative curriculum is appropriate (due to difficulties with either language and/ or communication, social skills, and sensory needs) delivered in an adapted educational setting as recommended by appropriate specialist services</li> <li>The CYP accesses small group and individualised support, with Speech and Language targets integrated into their daily routine</li> <li>Access to regular support to develop social skills and support emotional regulation</li> <li>Planned time for small group and individual working with some light touch adult support, to</li> </ul>			<ul> <li>(continued)</li> <li>Daily access to staff who are skilled in supporting emotional regulation through the use of visual support, AAC, resources</li> </ul>	
Continued on next page			<ul> <li>An alternative curriculum is appropriate (due to difficulties with either language and/ or communication, social skills, and sensory needs) delivered in an adapted educational setting as recommended by appropriate specialist services</li> <li>The CYP accesses small group and individualised support, with Speech and Language targets integrated into their daily routine</li> <li>Access to regular support to develop social skills and support emotional regulation</li> <li>Planned time for small group and individual working with some light touch adult support, to support independent learning</li> </ul>	

## 1A Communication and Interaction – Speech and Language Level 5 continued

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Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Planned time for small group and individual working with intensive adult support, to work on communication and interaction e.g. Intensive Interaction, PECS, Attention Autism, use of AAC, guided by external professionals e.g. Speech and Language Therapists</li> <li>Resources</li> <li>Additional adults support the CYP individually under the direction of the teacher to:</li> <li>Work on modified curriculum tasks (additional time needed to prepare resources including visual support to enhance access to learning)</li> <li>Resources (continued)</li> <li>Embed language learning and communication into functional and curriculum activities</li> <li>Encourage independence</li> <li>Access for teaching staff to appropriate resources, training, guidance and support from specialist staff, in order to carry out specific interventions.</li> </ul>	

## 1A Communication and Interaction – Speech and Language Screening and Assessment Tools



#### **Screening tools**

- Updated SALT Screening Tool and Online Referral can be found through Speech and Language homepage
- Wave 2 Screening Assessments (LEAP, VIP, NIP)
- Language checklist links:
  - Speech and Language UK ages and stages

#### **Assessment tools**

The standardised assessments listed below are Qualification Level A, so can be administered by teachers.

- <u>RENFREW Action Picture Test</u> An assessment of Expressive Language
  - British Picture Vocabulary Scale An assessment of Receptive Language skills at Vocabulary Level
  - Levels of Questioning Information sheet Blank
- Speech and Language Therapy Assessments (Referral)

### 1A Communication and Interaction – Speech and Language Interventions and Support





#### Interventions

- Vocabulary Improvement Programme (VIP), Narrative Improvement Programme (NIP) and Language Enrichment Activity Programme (LEAP) available through signing in to this link
- <u>Black Sheep Press</u> Resources to support a range of language interventions
- <u>NELI</u> A language assessment and intervention for 4-5 yrs olds

#### **Resources and further support**

- Sheffield Speech and Language Therapy (SLT) Resource Library Directory
- An Introduction to Speech, Language and Communication (free e-learning course via The Communication Trust
- <u>Communication Trust Resources</u>

#### Specialist Training available from Speech and Language:

- DLD training modules
- SLT Wave 1 Modules
- Wave 2 Interventions

#### **EAL** considerations

- For EAL pupils Use The Bell Foundation to track Language development to help ascertain if the CYP has a SEND need
- Try completing home language assessments where available The EAL team can do these for you

#### **1B** Communication and Interaction – Social Communication



1B Communication and Interaction covers the following areas:

- 1) Communication and Social Concepts Differences in understanding and expressing forms of communication and language, with skills ranging from individuals who are highly articulate (but comprehension may vary) to others who may be non-speaking. We also need to consider differences in understanding social behaviours and the actions and feelings of others, which inform the development of friendships and relationships.
- 2) Sensory Processing (please note this area is covered further in Section 4E) Differences in perceiving sensory information. Hypo (low sensitivity), hyper (high sensitivity) to sensory stimuli such as touch, hearing, smell, taste, balance (vestibular), body awareness (proprioceptive) and also an internal sense called Interoception (this manages emotions and bodily functions).
- 3) Flexibility, Information Processing and Organisational Skills Differences in perception, planning, understanding concepts, generalising, predicting, managing transitions, passions for interests and ability to absorb auditory or spoken information.

#### **Ordinarily Available**

This is Universal Support – as part of the Graduated Response. See <u>assessment tools</u>, <u>interventions and further support</u> that supports your teaching practice.

Ordinarily Available provision and teaching approaches for all learners with a recognition that some learners may require very time-limited support to secure effective application of skills and increase their engagement and access to all areas of school life. School will lead in this approach.

The table on the following pages references 4 key areas within social communication differences that would constitute reasonable adjustments if embedded within the classroom/school. <u>Autism Social Communication Education and Training Service</u> (ASCETS) offer centralised training that supports with many strategies recommended.

## **1B** Communication and Interaction – Social Communication Ordinarily Available continued



	A Classroom Support Guide for Pupils Presentir Universal Support - Clas (SEN Guide to Reasona	ssroom Strategies
Positive and Effective Relationship	<ul> <li>Value pupil voice, pupils will feel safer and happier when they feel listened to.</li> <li>Learn about the pupil prior to arrival, effective communication with pupil, parents/carers, previous teachers, is key to building mutual respect.</li> <li>If concerned about a presenting need, observe the pupil in various context, structured and un-structured. This will allow you to gain valuable information in likes/dislikes, areas/activities a pupil is drawn to and avoids.</li> <li>Support pupil in developing a strong sense of belonging, to ensure pupils feel safe and secure i.e. greet all pupils at the door saying their name (don't expect a response).</li> <li>Make use of roles/responsibilities. A sense of purpose is a great way to build in structure and routine</li> <li>The arrival routine should be clear and consistent, everyone should have a plan as to what is happening next and when.</li> <li>On arrival, offer activities that are motivating - ensure the start of the day is welcoming, engaging and purposeful.</li> <li>Clear structure, rules and routines will provide a sense of safety – do not presume understanding, rules will need to be revisited regularly in all environments (displayed visually)</li> <li>Encourage discussion about the pupils' interests – this could make a huge difference in escalating stress levels.</li> <li>Provide an emotionally available adult or peer to 'check-in' with pupil. Provide morning, lunchtime and after school clubs linked to interests.</li> <li>Agree a signal (age/stage appropriate) that pupil can use indicate if they are becoming overwhelmed in class i.e. Help Card.</li> </ul>	<ul> <li>Be willing to prioritise well-being over completion of an academic task i.e. offer movement breaks/fresh air before the end of session.</li> <li>Model and practice de-escalation techniques with all pupils – rehearsed techniques will be drawn upon easier in times of crisis</li> <li>Notice and react to a pupil's 'signature' behaviour change, prior to hitting crisis – have a plan!</li> <li>Make use of outdoor environment, a great space for emotional regulation.</li> <li>Pupil to be offered additional warning to prepare for unexplained changes.</li> <li>Low Arousal approaches should be 'the norm' in all classrooms</li> <li>Ensure micro and mini transitions are managed effectively. i.e. structure movement around school/verbal countdown to completion of task.</li> <li>Consider developing a network of pupil neurodiverse champions in settings.</li> <li>Consider how your pupil spends break and lunch times and what support might be needed with this (remember to value their choice if they choose to be alone)</li> <li>Use visuals to reinforce verbal instructions.</li> <li>Allow pupils time to process information</li> <li>Using a graduated response, relevant ways of recording a child's required support, are used effectively. This is shared with all relevant staff to encourage consistent approaches.</li> <li>Avoid putting children on the spot to answer questions (unless you know that they are comfortable with this).</li> <li>Use visuals and structured tasks, incorporating the student's own interests wherever possible.</li> </ul>
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# **1B** Communication and Interaction – Social Communication Ordinarily Available continued



- Provide visual supports to ensure that upcoming activities are predictable and understandable.
- Visual timetables unfussy and understandable with consistent size and font across school.
- Task board checklists
- Timers

Enabling Environment

- Now and Next boards, flexible whiteboards
- Choice boards
- Key communication symbols on lanyards
- Object cues and objects of reference
- Transitions are supported with appropriate visuals/approaches.
- Classroom environment e.g. surfaces need to be uncluttered and organised.
- Learning areas are clearly defined throughout the classroom.
- The whiteboard is free of visual clutter for 1m around the perimeter.
- Schedule structured time throughout the day for time engaging in or discussing their hobbies/interests.
- Seating considerations based on a sensory checklist.
- Ensure the timetable encourages regular sensory and movement breaks.
- All resources are organised in labelled drawers/cupboards to encourage independence.
- Pupils own work is displayed and labelled appropriately.
- Noise levels are well managed so that pupils and adults can hear one another.
- Transition times work effectively and are structured to reduce noise and movement levels.

#### Continued on next page

- Offer a range of sensory equipment wobble cushion, stress ball and fiddle ball.
- Use the environment to engage your pupil including aspects of their special interests? e.g. shiny, dangling items near carpet to hold attention whilst sitting with peers.
- Environmental considerations are made to meet the known needs the pupil e.g. seating position, noise, personal space and classroom layouts, displays and signage.

#### 1B Communication and Interaction – Social Communication Ordinarily Available continued



Access to Learning	<ul> <li>Flexibility will be used with children's individual timetables, to acknowledge children who 'mask' will have varying energy levels throughout the day.</li> <li>Visual support will be used alongside verbal lesson content to support memory and the retention of information i.e. written accounts, list, picture, or task boards.</li> <li>Consistency of approach amongst staff – rewards, routines and language.</li> <li>Provide a non-speaking strategy for children to request help i.e. a red dot on the end of a ruler.</li> <li>Provide a non-speaking strategy for children to request a break i.e. a break card.</li> <li>Provide time to apply learnt skills in different environments/contexts.</li> </ul>	<ul> <li>Visual cues and prompt cards to support the understanding of school expectations.</li> <li>Opportunities to develop collaborative group / paired working, allocate roles as required.</li> <li>Use a range of tools to support learning and independence e.g. knowledge organiser, dictation tools.</li> <li>Where appropriate, choices are given within tasks.</li> <li>Visual supports used to break down tasks into manageable chunks</li> <li>Expectations of the amount of work will vary to match the child's stress levels.</li> <li>Children will not be expected to exceed the agreed expectation of an individual task to maintain trust.</li> </ul>
Social Communication	<ul> <li>Understand that all behaviour is a form of communication</li> <li>Make the pupil's day as predictable as possible i.e. Visual board which includes tasks, sensory information, special interest time.</li> <li>Ensure clarity in verbal instructions.</li> <li>Understand pupil's communication skills may differ depending on their stress levels.</li> <li>Remember the use of language and the understanding of language are 2 different processes.</li> <li>Value non – verbal communication.</li> <li>Use a total communication approach across school.</li> <li>Say pupils' name first to gain attention.</li> <li>Give the pupil time to process information.</li> <li>Say things in the order they will happen.</li> </ul>	<ul> <li>Use clear, reduced, and consistent language.</li> <li>Use positive and directive language e.g. Tom feet on the floor – rather than Tom stop kicking.</li> <li>Explain the meaning of any idioms / jokes used</li> <li>Support pupils with understanding social concepts (don't teach them explicit social skills)</li> <li>Use of Visual tools will benefit all pupils with the following: <ol> <li>increase self- help and independence skills</li> <li>'see' the task and identify the stages of what they need to do</li> <li>where they will do it and who with</li> <li>how long they will do the task for</li> <li>what happens when they have finished</li> <li>when can they do their favoured activity</li> </ol> </li> </ul>

# **1B** Communication and Interaction – Social Communication Level 3



#### **CYP Presentations:**

The CYP shows social, communication and interaction differences in a range of situations which may affect access to academic learning and heighten stress levels in unstructured/social time. Longer term, these barriers may impact CYP social, emotional and mental health if not well supported.

<b>Provision:</b> Some targeted and individ		Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Consider if the following statements describe how the CYP presents in school:</li> <li>Communication and Social Concepts: <ul> <li>Receptive and expressive communication is likely to differ</li> <li>Words and phrases may be taken literally.</li> <li>Processing time may differ.</li> <li>Body language may be misinterpreted.</li> <li>Thoughts may be spoken out loud (if appropriate or not).</li> <li>Immediate and delayed echolalic language may be used (repeating/ mimicking phrases previously heard).</li> <li>CYP may present with fleeting attention to verbal instruction (appearing not to hear).</li> </ul> </li> <li>Continued on next page</li> </ul>	In depth assessments and observations that help unpick and inform individualised next steps and outcomes for the young person (see assessment toolkit). This may include a sensory profile of needs. Outside agencies' advice and recommendations used to further inform next steps for the young person, if involved. Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory-differences and processing needs. Consider access arrangements. Multi Agency Planning where appropriate. Progress is closely monitored using AET resources and/or school tracking systems and shared with family. <b>Continued on next page</b>	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate <ul> <li>Identify CYP interests and use to gain attention to task.</li> <li>Individual support working on, building and developing key skills in learning, life skills and social skills.</li> <li>Consider adaptations to the school day e.g. soft start, finish times, time in a safe place for the CYP to 're-set' throughout the day etc.</li> <li>Allow access to an emotionally available adult as the CYP requires.</li> <li>Planned time to access tasks of their own preferred choice.</li> </ul> </li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Discuss concerns with: • Autism Social Communication Education and Training Service (ASCETS) Link Teacher (contact details) Educational Psychology Service. Speech and Language Therapy

#### 1B Communication and Interaction – Social Communication Level 3 continued



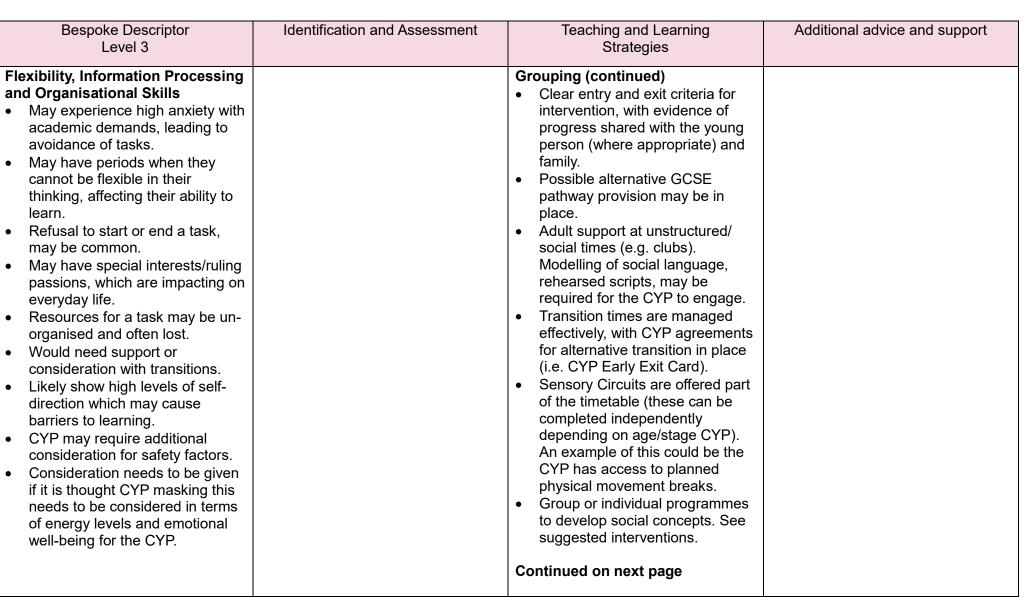
Communication and Social Concepts (continued):An Extended Support Plan may be in place to draw together information, advice, aspirations and planned	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Access to a range of learning materials to support a sense of predictability (i.e. a total</li> </ul>	
<ul> <li>frequently.</li> <li>There may be an insistence for sameness and routines.</li> <li>There may be an insistence to play games on their terms/by their rules.</li> <li>Conversation 'rules' may not be followed e.g. jumping into twoway conversation/only speaking about topic of interest.</li> <li>CYP may choose to spend time alone.</li> <li>Isolation and social vulnerability may result from experiencing social situations differently.</li> <li>Initiating and successfully responding to interactions from others may need additional support.</li> <li>Understanding social spaces (e.g. stand and sit too closely to others) and other unwritten social 'rules' may need additional and repeated support.</li> <li>Continued on next page</li> <li>outcomes.</li> <li>The voice of the young person and their family needs to be heard to form a holistic view of the young person and used to help when planning next steps.</li> <li>Use of appropriate assessment materials – refer to assessment toolkit.</li> <li>Where needed, risk assessments may be in place.</li> </ul>	<ul> <li>communication response). This may include some of the following: <ul> <li>objects of reference as appropriate (e.g. symbols, photographs)</li> <li>visual timetables</li> <li>communication mats</li> <li>flexible whiteboard approach</li> <li>first/then</li> <li>writing frames</li> <li>visual prompts</li> </ul> </li> <li>Visual cues to support auditory information at all stages of delivery. This may include preparation for any changes and the need for a clear and consistent routine.</li> <li>Reduce complex language when giving instructions and asking questions.</li> <li>Refer to behaviours of concern as 'stressed behaviours' ensuring a focus is on the environment and adult</li> </ul>	

#### **1B** Communication and Interaction – Social Communication Level 3 continued



<ul> <li>CYPs may become stressed at dealing with unfamiliar social situations (may apply effective avoidance techniques).</li> <li>May require support to develop friendships and relationships with adults and peers.</li> <li>May display unexpected behaviours (frustration/anger) in social situations.</li> <li>Social camouflaging (possibly referred to as masking) to 'survive' may be common.</li> <li>CYP may display behaviours thought of as 'attention seeking' – however more likely the CYP is</li> </ul>	<ul> <li>Offer distraction free quiet area within the classroom if required.</li> <li>Support to recognise own emotions and those of others.</li> <li>Support to problem solve specific social situations. e.g. Negotiation skills, Comic-strip conversations, Talkabout series.</li> <li>Modelling of social language, rehearsed scripts, may be required for the CYP to engage.</li> <li>Physical sensory consideration such as uniform alterations, seating plan and sensory support tools.</li> </ul>
wanting to interact and not knowing how to initiate an interaction.	<ul> <li>Grouping</li> <li>The CYP will access a variety of support over the week may</li> </ul>
<ul> <li>Sensory Processing (See Section 4E for further information)</li> <li>May require sensory adaptations in the learning space such as consideration to where they sit e.g. fiddle toys, regular movement breaks, standing desk etc.</li> <li>May seek to leave the classroom frequently.</li> <li>Continued on next page</li> </ul>	<ul> <li>support over the week may include whole class teaching, small group support and daily individualised support working on personalised targets matched to their social communication profile e.g. working on individual outcomes that are repeated and reinforced.</li> <li>Additional adults work under the direction of the teacher.</li> </ul>

# **1B** Communication and Interaction – Social Communication Level 3 continued



# **1B** Communication and Interaction – Social Communication Level 3 continued



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>The CYP can access evidence- based social, emotional and academic intervention time, either in small groups or 1:1, with the class teacher and other staff members.</li> <li>Use Lego Therapy/Jewellery Therapy to support social interaction.</li> <li>Use 'Autism Identity and Me' to support CYPs self-identity.</li> <li>Support to develop interoception e.g. linking bodily changes to emotions i.e. I am feeling angry, so my heart is beating faster.</li> </ul>	
		<ul> <li>Resources</li> <li>Emotional vocabulary support, e.g. emotional thermometers / charts, linking physical feelings to emotions.</li> <li>Comic strip conversations e.g. a visual breakdown of playtime (what went wrong and why).</li> <li>Social scripts (to support them in unfamiliar or tricky situations).</li> <li>Sensory supports/Movement breaks.</li> <li>Personalised sensory plan if needed.</li> </ul>	

# **1B** Communication and Interaction – Social Communication Level 4



CYP's needs are met through a timetable, environmental adjustments and communication approaches that contains bespoke support for the parts of the school day that are needed.

It is felt the staff providing support would have the relevant, skill, expertise and training in order to understand the functions of the child's presentations of need.

Provision: Frequent, specific speciali		Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Consider if the following statements describe how the CYP presents in school:</li> <li>Communication and Social Concepts:</li> <li>Will have significant differences with language acquisition and comprehension.</li> <li>Will have significant differences in social understanding, which impact on relationships with adults and peers daily.</li> <li>May acquire language through a recognised 'Gestalt' style.</li> <li>May focus on intense interests in conversation, if the topic is of interest to them.</li> <li>May display high anxiety manifested in avoidance, dysregulation or shutdown.</li> <li>The frequent distress shown in school will likely impact emotional states such as resilience and energy levels.</li> <li>Continued on next page</li> </ul>	As for level 3 whilst including: In depth assessments and observations that help unpick and inform highly individualised next steps and outcomes for the CYP (see assessment toolkit). This should include assessment of sensory needs as well as life skills. The voice of the CYP and their family needs to be heard to form a holistic view of the CYP and used to help when planning next steps. Outside agencies' advice and recommendations used to further inform next steps for the young person, linking with multi agency planning and with a strong focus on Preparation for Adulthood discussions that will be captured in the <u>Extended Support Plan</u> . Continued on next page	<ul> <li>As level 3 whilst also including –</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate: <ul> <li>Implement Low Arousal approaches – (Managing Signs of Stressed Behaviour).</li> <li>Low Arousal Spaces/Regulating Spaces available.</li> <li>Consistent approaches agreed with all to manage escalations in presentation.</li> </ul> </li> <li>Groupings Specific interventions may be utilised: <ul> <li>Use Intensive Interaction to support joint attention.</li> <li>Use Curiosity to support play preferences, joint attention/interaction.</li> <li>Use Attention Autism to support focus and attention.</li> </ul> </li> <li>Continued on next page</li> </ul>	Additional specialist support should be sought from: Targeted support from Outside SEND Agencies Locality Panels – Stage 1 or 2 <u>ASCETS - Targeted Support</u> <u>Educational Psychology Service.</u> <u>Speech and Language Therapy</u> Health Services if involved



### 1B Communication and Interaction – Social Communication Level 4 continued

Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Communication and Social Concepts (continued):</li> <li>The CYP will need support to advocate for themselves, which would include socially accepted way of expressing wants and needs.</li> <li>CYP would be extremely vulnerable without adult support during unstructured times.</li> <li>CYP may be unable to self- manage personal care without adult support.</li> <li>An unpredictable emotional profile may be present, for example the CYP could display emotional dysregulation frequently.</li> <li>Presentation of need may impact other learners and steps will need to be taken to ensure peer understanding of CYP need.</li> <li>Continued on next page</li> </ul>	Access arrangements organised. Progress is closely monitored using school tracking systems and shared with family, where needed, risk assessments likely to be in place.	<ul> <li>Resources</li> <li>Alternative communication systems in place across school (i.e. personalised visual aids, possible use of technology to aid understanding).</li> <li>Stress Support Plan. This is to ensure all staff offer a safe, consistent approach to deescalation.</li> <li>A rehearsed and clear exit strategy for CYP available at all times.</li> <li>Effective use of personalised resources based on the CYP's interests</li> <li>Effective use of individual visual timetable per session or activity, e.g. start / finish, now / then which does require support to implement.</li> </ul>	

## **1B** Communication and Interaction – Social Communication Level 4 continued



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Sensory Processing (See 4E)</li> <li>Will be often overloaded by external environmental stimuli.</li> <li>Sensory differences will be present to an extent that they have a significant impact on daily life, e.g. sensory avoidance/seeking within environmental settings causing visible distress and/or avoidance.</li> <li>Flexibility, Information Processing and Organisational Skills</li> <li>Transitions may be a significant difficulty.</li> <li>CYPs will be driven by specialist interests/ruling passions to such an extent that engagement in activities not of their choosing will likely be fleeting.</li> <li>Will be significantly self-directed and reluctant to follow adult direction to a level where personalised risk assessments may be required to keep CYP safe.</li> </ul>			

# **1B** Communication and Interaction – Social Communication Level 5



The CYP shows severe and persistent communication and interaction differences which will significantly impact their educational access into adulthood.

The CYPs holistic needs will be met through a robust multi-agency plan which would include personalised curriculum and an equal focus on academic, social communication, social emotional support and independence/life skills. Consistent adult support to attend to most tasks with a total communication environment/AAC, access to a flexible, personalised sensory lifestyle and responsive timetable planned to meet specific outcomes will be available – likely devised by a multi-disciplinary team including school staff, Local Authority SEND agencies and CYP/family (where appropriate).

<b>Provision:</b> Daily, specific specialised the curriculum	input at all times across all aspects of	Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Consider if the following statements describe how the CYP presents in school:</li> <li>Communication and Social Concepts:</li> <li>Will have severe and complex language needs and require a total communication approach from highly trained experienced staff.</li> <li>May be non-speaking or minimally speaking.</li> <li>Vocalisations maybe be used and decipherable to known people.</li> <li>Will need high levels of multisensory support in an adapted environment.</li> <li>Continued on next page</li> </ul>	<ul> <li>As for Levels 3 and 4 assessment of needs, progress and setting of next steps will be collaborative in nature with school staff working alongside the family and child/young person Outside Agency professionals (including Health and Care colleagues where appropriate)</li> <li>At Level 5, it is expected a EHCP will normally be in place to recognise the CYPs' needs and provision required to meet them.</li> <li>Support MUST include:</li> <li>Outside agency advice and recommendations.</li> <li>Multi agency planning.</li> </ul>	There is agreement between professionals (Educational Psychology Service, ASCETS Teacher, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5. Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4. In addition, the following will be in place: Adjustments to Teaching Methods Staff should consider and implement as appropriate • Robust planning to meet objectives defined in EHC plan. Continued on next page	Additional specialist support should be sought from:Targeted support from Outside SEND AgenciesSpecialist Training e.g. Studio 3Locality Panels – Stage 1 or 2ASCETS – Targeted SupportEducational Psychology Service.Speech and Language Therapy.Health Services if involved.

#### 1B Communication and Interaction – Social Communication Level 5 continued



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Communication and Social Concepts (continued):</li> <li>Will need bespoke, personalised support from highly skilled, trained staff – guided by outside agencies.</li> <li>May display or experience significant distress, high anxiety manifested in avoidance, dysregulation or self - harm on a regular basis in a range of settings.</li> <li>Will need a high level of personalised support to play or work alongside others successfully.</li> <li>Sensory Processing (See 4E for further information)</li> <li>Will experience severe sensory needs that have a very significant impact on everyday life, e.g. avoidance of environment or activity, significant distress or inability to attend and focus in a classroom situation.</li> <li>Continued on next page</li> </ul>		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Access to a quiet area within the classroom must be available when needed to offer opportunities for distraction free learning.</li> <li>Alternative communication systems in place across the setting i.e. bespoke visual aids plus possible use of technology to aid understanding.</li> <li>Grouping</li> <li>The CYP will access a bespoke curriculum at all times throughout the school day, to access school life. A variety of groupings must be used to ensure learning, including time in a quiet, distraction free environment.</li> <li>A continuum of support will be needed throughout the school day.</li> <li>Resources</li> <li>Environmental consideration based on CYP Sensory Preferences (bespoke Sensory Lifestyle devised).</li> </ul>	

#### **1B** Communication and Interaction – Social Communication Level 5 continued



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Flexibility, Information Processing and Organisational Skills;</li> <li>Will need very high level of additional prompts and supports to carry out any adult led activities.</li> <li>Will be driven by specific interests (these may be sensory) which impact on everyday life, to the extent where staff will need to use these to positively engage, appreciate and monitor.</li> <li>Will need bespoke, personalised, skilled adult support to follow all activities and keep self and others safe</li> </ul>			

#### **1B** Communication and Interaction – Social Communication Screening Tools and Assessment Tools



#### **Screening tools**

- <u>AET Sensory Differences Map</u> Speak to your ASCETS link teacher about these resources
- <u>AET Sensory Checklist</u> Speak to your ASCETS link teacher about these resources
- <u>Coventry grid</u>
- ASD Screening tool EP toolkit

#### **Assessment tools**

- <u>AET Primary Field Guide Assessment</u> Speak to your ASCETS link teacher about these resources
- AET Secondary Field Guide Assessment Speak to your ASCETS link teacher about these resources
- The field guide provides an overview of sensory processing differences that some pupils may experience. It includes regulation strategies that can be implemented based on the results of the sensory processing checklists completed by the pupils.



# **1B** Communication and Interaction – Social Communication Interventions and Support

#### Interventions

- <u>Attention Autism</u>
- Social stories
- Lego-based therapy
- Interoception curriculum
- <u>AET Progression Framework</u>\*
- Talking Mats
- <u>Commenting</u>
- <u>Curiosity Programme</u>

- Flexible Whiteboard
- Intensive Interaction
- Objects of Reference
- Sensory Circuit
- <u>Start/Finish Boxes</u>
- <u>Turn-Taking</u>
- <u>Visual Timetable</u>
- Skills Builder could be considered alongside academic curriculum. Skills Builder helps to unlock essential life skills in and outside the classroom, boosting academic outcomes, perseverance and self- belief.
- **NEST** (**NE**urodivergent peer **S**upport **T**oolkit) is a suite of materials to facilitate peer support for neurodivergent young people in mainstream secondary schools. The toolkit has been co-created by researchers at the University of Edinburgh, neurodivergent young people and a neurodiverse group of adults who work with neurodivergent young people.

Download NEST | Salvesen Mindroom Research Centre FREE RESOURCE

#### **NEST** guides

- <u>AET Transition documentation\*</u> support for transitions
- Setting Trigger Action Result Chart
- Low Arousal Approach (Managing Signs of Stressed Behaviour) approaches (Studio 3) Discuss with your ASCETS link teacher. They can help with a Dynamic Stress support plan reviewed on a regular basis or a similar personal plan and risk assessment agreed with parent/carers as part of this approach.

\*For all AET documents and training – speak with your ASCETS link teacher.

Continued on next page



#### **1B** Communication and Interaction – Social Communication Interventions and Support continued

#### **Further Support (continued)**

- Autism Level Up offers free downloadable resources and information on how to use them.
- <u>AET Good Autism Practice Guidance</u>
- <u>SCERTS</u> SCERTS<sup>®</sup> focuses on building competence in Social Communication, Emotional Regulation and Transactional Support it is applicable for individuals with a wide range of abilities and ages across home, school and community settings.
- 'The Saturation Model' (G.Moorwood)- Offers ideas on supportive, inclusive approaches for all CYPs (using whole school approaches)
- Use <u>Neuro-affirmative language</u>
- Access Studio3 free webinars on topics such as Sensory/Lived Experiences/Managing Stress/Low Arousal Approaches/Restraint Reduction
- AET 10 Reasonable Adjustments for the Classroom
- Visiting 'Neuro-Affirmative' Social Media Sites (Lived Experiences) Good examples are:
  - o Blue Hair Autistic Girl | TikTok
  - o Jumping Into the Chaos of Things David Pitonyak (youtube.com)

#### **Useful Links & Supporting Information**

Autism and Social Communication Education and Training Service (Use this link to view the training offer (ASCETS)



• Autism Education Trust

ASCETS are recognised training partners of AET.

Autism Education Trust – The AET Progression Framework (<u>Progression Framework Training | Autism Education Trust</u>). This a new, comprehensive, flexible tool designed to support education professionals in identifying learning priorities and measuring progress in areas which relate closely to autism differences: Social Understanding and Communication; Sensory Processing and Integration; Flexibility, Information Processing and Understanding.

Autism Training and Development | Autism Education Trust Terminology Guide

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# **1B** Communication and Interaction – Social Communication Interventions and Support continued



**Useful Links & Supporting Information (continued)** 



• <u>Studio3</u>

ASCETS are training partners of Studio3 Studio 3 are the originators of The Low Arousal Approach which is a non-confrontational, child-centred approach to managing stressed behaviours. Training and Coaching Available for Schools, via Link ASCETS Teacher.

**Glossary for Neuro-affirmative Understanding/Approaches;** Inclusive information, advice and guidance on the following:

- Double Empathy
- Executive Function
- Interoception
- Low Arousal
- Masking
- Monotropism
- <u>Rejection Sensitivity</u>
- Special Interests/Ruling Passions
- Strengths Based Language Use
- Strengths Based Language neuro-affirmative language





To identify	Grid Support Grid: 1C Communication and a CYP's overall level, consider the le t fit judgment to derive the level of ne	evel of impairment (provided by Spee	· · ·	le the other areas of presentation.
Level	Impairment (level identified by formal assessments carried out by Speech and Language Therapy)	Activity (level identified by teaching staff / parent/carer)	Participation (level identified by teaching staff / parent/carer)	Wellbeing and emotional regulation (level identified by teaching staff / parent/carer)
1	<ul> <li>Mild speech difficulties:</li> <li>Occasional errors in speech</li> <li>May be articulatory difficulties (mis pronunciation of certain sounds eg slushy 's')</li> <li>May be phonemic errors eg substitutes 't' for 's'</li> <li>May be delayed speech eg uses 'w' for 'r' at age 8 years</li> <li>Does not usually impact on intelligibility.</li> <li>Mild stammer / dysfluency</li> </ul>	Some difficulty communicating verbally with unfamiliar people or in unfamiliar contexts	Occasional difficulties in participating in unfamiliar educational and social activities. Needs encouragement to achieve potential	Occasionally displays mild: distress / upset / concern / frustration /anger / distress / Embarrassment / withdrawal

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Level	Impairment (level identified by formal assessments carried out by Speech and Language Therapy)	Activity (level identified by teaching staff / parent/carer)	Participation (level identified by teaching staff / parent/carer)	Wellbeing and emotional regulation (level identified by teaching staff / parent/carer)
2	<ul> <li>Mild to Moderate speech difficulties:</li> <li>Significant range of articulatory difficulties affecting intelligibility</li> <li>Or</li> <li>Many speech sounds substituted due to a range of typical phonological processes used, persisting beyond age expected norms. May involve difficulties with some aspects of phonological awareness and literacy development.</li> <li>May involve one atypical process or non English sound.</li> <li>Intelligibility is affected especially with non familiar listeners</li> <li>Moderate dysfluency</li> </ul>	Some difficulty communicating verbally <ul> <li>Needs some cues and adult assistance or extra time when conveying information beyond basic needs</li> </ul>	<ul> <li>Occasional difficulties in participating in unfamiliar educational and social activities.</li> <li>Needs support to achieve potential</li> </ul>	<ul> <li>Frequently displays mild Distress/ upset/ concern/ frustration/ anger/ embarrassment/Withdrawal</li> <li>Occasionally needs external support to assist emotional control.</li> </ul>

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Level       assessments carried out by Speech and Language Therapy)       parent/carer)       parent/carer)       (level identified by teaching signature)         Severe speech disorder – phonological disorder       Frequent difficulty communicating verbally beyond basic needs. Frequently relies on a trained listener or number of atypical processes       Frequent difficulties participating in social activities in unfamiliar people. Frequent difficulties participating independently in unfamiliar       Occasionally shows moders Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal         Vowels and consonants affected       Structure of words also affected ge deleted syllables       Frequent difficulties in unfamiliar listeners, difficulties independently in unfamiliar       • Emotional encouragemen and support required         3       Significant difficulties with intelligibility – usually reliant on familiar listeners, difficult to understand out of context.       Significant phonological		Impairment	Activity	Participation	Wellbeing and
assessments carried out by Speech and Language Therapy)       parent/carer)       (level identified by teaching s parent/carer)         Severe speech disorder - phonological disorder       Frequent difficulty communicating verbally beyond basic needs. Frequently relies on a trained listener or number of atypical processes       Frequent difficulties parent/carer)       Occasionally shows modera Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal         0       Deviant sound production and non-English sounds       Frequent difficulties parent/carer)       Occasionally shows modera Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal         1       Oversesses Deviant sound production and non-English sounds       Frequent difficulties sound consonants affected Some articulatory difficulties       Frequent difficulties some articulatory difficulties       Occasionally shows modera Distress/upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal         3       Significant difficulties Some articulatory difficulties Significant difficulties with intelligibility – usually reliant on familiar listeners, difficult to understand out of context.       Significant phonological       Significant phonological		(level identified by formal	(level identified by teaching staff /	(level identified by teaching staff /	emotional regulation
Severe speech disorder - phonological disorderFrequent difficulty communicating verbally beyond basic needs. Frequently relies on a trained listener or family members for expressing themselves out of context.Frequent difficulties participating in social activities inufamiliar contexts or with unfamiliar people. Frequent difficulties participating independently in unfamiliar educational activitiesOccasionally shows modera Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal3Severe speech disorder - phonological disorder number of atypical processes one-English sounds Structure of words also affected eg deleted syllables Some articulatory difficulties Significant difficulties with intelligibility - usually reliant on familiar listeners, difficult to understand out of context.Frequent difficulties participating in social activitiesOccasionally shows modera Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal3Significant difficulties with intelligibility - usually reliant on familiar listeners, difficult to understand out of context.Frequent difficulties context.Frequent difficulties participating independently in unfamiliar educational activitiesOccasionally shows modera Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal3Significant difficulties with intelligibility - usually reliant on familiar listeners, difficult to understand out of context.Frequent difficulties context.Frequent difficulties participating independently in unfamiliar educational activitiesOccasionally shows modera Distress/embarrassment/ withdrawal <t< th=""><th>Level</th><td></td><td>parent/carer)</td><td>parent/carer)</td><td></td></t<>	Level		parent/carer)	parent/carer)	
<ul> <li>May include any/all of these:</li> <li>Some typical, but also a number of atypical processes</li> <li>Deviant sound production and non-English sounds</li> <li>Vowels and consonants affected</li> <li>Structure of words also affected eg deleted syllables</li> <li>Some articulatory difficulties</li> <li>Mild motor speech difficulties</li> <li>Mild motor speech difficulties with intelligibility – usually reliant on familiar listeners, difficult to understand out of context.</li> <li>Significant phonological</li> </ul>					/
<ul> <li>awareness difficulties impacting on many aspects of literacy development.</li> <li>Some impact on language development eg word finding difficulties, difficulty learning</li> </ul>		<ul> <li>Speech and Language Therapy)</li> <li>Severe speech disorder – phonological disorder</li> <li>May include any/all of these:</li> <li>Some typical, but also a number of atypical processes</li> <li>Deviant sound production and non-English sounds</li> <li>Vowels and consonants affected</li> <li>Structure of words also affected eg deleted syllables</li> <li>Some articulatory difficulties</li> <li>Mild motor speech difficulties</li> <li>Significant difficulties with intelligibility – usually reliant on familiar listeners, difficult to understand out of context.</li> <li>Significant phonological awareness difficulties impacting on many aspects of literacy development.</li> <li>Some impact on language development eg word finding</li> </ul>	Frequent difficulty communicating verbally beyond basic needs. Frequently relies on a trained listener or family members for expressing	Frequent difficulties participating in social activities in unfamiliar contexts or with unfamiliar people. Frequent difficulties participating independently in unfamiliar	Occasionally shows moderate Distress/ upset/ concern/ frustration/ anger/ distress/embarrassment/ withdrawal • Emotional encouragement

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Level	Impairment	Activity	Participation	Wellbeing and
	(level identified by formal	(level identified by teaching staff /	(level identified by teaching staff /	emotional regulation
	assessments carried out by	parent/carer)	parent/carer)	(level identified by teaching staff)
4	<ul> <li>Speech and Language Therapy)</li> <li>Severe speech disorder – severe phonological disorder and /or moderate CYP Apraxia of Speech (CAS).</li> <li>Severe phonological disorder: <ul> <li>Very restricted repertoire of sounds used in speech eg 4-5 sounds</li> <li>Some of these may be non English sounds</li> <li>Many vowels affected, as well as limited consonants</li> <li>Many atypical processes or no apparent phonological system'</li> <li>Syllables deleted regularly</li> <li>Severe phonological awareness difficulties leading to literacy difficulties, And/or</li> </ul> </li> <li>Moderate CYP Apraxia of Speech: <ul> <li>Significant difficulties with motor speech skills (motor planning, programming and execution)</li> <li>Limited range of sounds</li> <li>Likely additional phonological awareness difficulties.</li> </ul> </li> </ul>	Constant difficulty communicating verbally beyond basic needs. Occasional difficulties communicating basic needs. Frequently relies on a trained listener or family members for expressing themselves in any context.	Frequent difficulties participating in social activities, even with familiar people and contexts. Frequent difficulties participating independently in educational activities.	parent/carer)         Frequently displays moderate         levels of distress/ upset/         concern/ frustration/ anger/         distress/embarrassment/         withdrawal         • A structured approach to emotional support from other is required.



	Impairment	Activity	Participation	Wellbeing and
Level	(level identified by formal	(level identified by teaching staff /	(level identified by teaching staff /	emotional regulation
Level		parent/carer)	parent/carer)	, J
				parent/carer)
Level 4	<ul> <li>assessments carried out by Speech and Language Therapy)</li> <li>Moderate CYP Apraxia of Speech (continued):</li> <li>Difficulty imitating sounds at single sound level but especially in sound combinations and words. Prosody may be affected eg rate, volume, intonation, stress, pitch)</li> <li>Severe difficulties with intelligibility even with familiar listeners in familiar context. Likely to need low tech AAC and visual support eg communication book, to</li> </ul>	parent/carer)	parent/carer)	(level identified by teaching staff / parent/carer)
	<ul> <li>express needs, join in conversation, access curriculum.</li> <li>Significant impact on language development – likely to hinder language development resulting in delayed language with shorter sentences, reduced vocabulary, word finding difficulties, impaired grammatical development. (see SSG language grid)</li> </ul>			

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	Impairment	Activity	Participation	Wellbeing and
Level	(level identified by formal assessments carried out by	(level identified by teaching staff / parent/carer)	(level identified by teaching staff / parent/carer)	emotional regulation (level identified by teaching staff /
	Speech and Language Therapy)	. ,	·	parent/carer)
5	<ul> <li>Profound speech disorder: Profound CYP Apraxia of Speech (CAS)</li> <li>Profound difficulties in the production of speech sounds – severe motor difficulties with motor planning, programming and execution of sounds and sound combinations.</li> <li>Extremely limited range of sounds produced spontaneously, and huge effort required to attempt a wider repertoire</li> <li>Difficulty imitating sounds at single sound level, in sound combinations or in words.</li> <li>Significant impact on prosody (intonation, fluency, volume, rate, stress, pitch)</li> <li>Profound difficulties with intelligibility</li> <li>Hugely reliant on non verbal communication incl signing AAC, visual support, for most/all needs.</li> </ul>	Minimal functional communication limited to expressing basic needs, usually requiring tailored use of AAC. Constant dependence on trained / familiar communication partner.	Profound difficulties participating in educational and social activities.	<ul> <li>Frequently displays high levels of distress/ upset/ concern/ frustration/anger/ distress/ embarrassment/ withdrawal May be unable to express or control emotions appropriately.</li> <li>A tailored and structured approach to emotional support is required.</li> </ul>

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Level	Impairment (level identified by formal assessments carried out by Speech and Language Therapy)	<b>Activity</b> (level identified by teaching staff / parent/carer)	<b>Participation</b> (level identified by teaching staff / parent/carer)	Wellbeing and emotional regulation (level identified by teaching staff / parent/carer)
5	<ul> <li>Profound speech disorder:</li> <li>Profound CYP Apraxia of</li> <li>Speech (CAS) continued</li> <li>Huge impact on language -</li> <li>Standardised test scores fall below the first centile on expressive language assessment. (see level 5 on language grid) Receptive language may also be lower than expected.</li> <li>May also affect non speech movements including eating and drinking.</li> </ul>			



### 1C Communication and Interaction: Speech and Fluency Ordinarily Available Provision for 1C Speech and Fluency & 1A Speech and Language



	A Classroom Support Guide for Pupils Presenting with Speech, Language and Fluency Differences Universal Support - Classroom Strategies						
Positive and effective relationships	<ul> <li>Adult support for learning as required.</li> <li>Awareness that speech and language difficulties may impact confidence.</li> <li>Some support to be available for communication and emotional regulation. Eg CYP's frustration leads to anger, and the CYP is unable to quickly give an account to the teacher due to unintelligible speech. More information can be found <u>here</u></li> <li>CYPren are explicitly taught how to listen and work together in groups</li> </ul>	<ul> <li>Opportunities are built in throughout the day for pupils to communicate verbally.</li> <li>Consideration of time needed to process language:</li> <li>More information can be found <u>here</u></li> </ul>					
Enabling environments	<ul> <li>Visual support (signs, symbols, photographs, written word) is consistently used to label the classroom / support routines/ timetable daily activities, so pupils know what to expect and when: More information can be found <u>here</u></li> <li>Noise levels are conducive to learning and unnecessary noise is minimised</li> <li>Consideration is given to seating position in order to maximise CYPren's attention levels</li> <li>Offer individual programmes of work (based on targets set by speech and language therapy staff for blocks of intervention (generally 6-8 weeks per block on input) with reinforcement in whole class activities to aid transfer of skills. Seek support from the SALT service where required to enable staff to deliver programmes.</li> </ul>	<ul> <li>Be aware of the possible impact on vocabulary acquisition and word finding difficulties and use the following adjustments:         <ul> <li>Pre and post tutoring is used to enable the pupil to engage with learning in the classroom.</li> <li>Vocabulary teaching and visual word mats used in lessons: More information can be found <u>here</u></li> <li>Support CYP to develop an increased awareness of phonemic structure eg syllable clapping, initial sounds, rhyme, and semantic structure eg category, function etc</li> <li>See SLT wave 2 training on <u>vocabulary</u></li> </ul> </li> <li>Seek support from the SALT service to enable staff to deliver speech programmes or fluency strategies in the school context.</li> </ul>					

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#### 1C Communication and Interaction: Speech and Fluency Ordinarily Available Provision for 1C Speech and Fluency & 1A Speech and Language continued



	5 5	
Access to Learning	<ul> <li>Word mats available to support vocabulary and spelling</li> <li>Use of visual, auditory and kinaesthetic approaches</li> <li>Resources and displays that support independence</li> <li>Pre-learning of language combined with visuals to support this learning in classrooms</li> <li>Alternative forms of recording used for some pieces of work, especially pieces of longer length</li> <li>Consistent use of gestural system of sound representations (e.g. Cued Articulation, Jolly Phonics) where a gesture is used to represent a phoneme/speech sound, be aware of any sounds the CYP is struggling with and ensure this is a focus: More information can be found here</li> <li>Pupil accesses appropriate wave 2 language intervention e.g. LEAP, NIP, VIP, Stories for Talking , or appropriate small groups or sets: Training can be accessed here</li> </ul>	<ul> <li>CYP accesses group for additional phonological interventions where this is identified as a weakness and / or speech intervention e.g. Rhythm and Rhyme.</li> <li>Teacher is aware of the learning taking place in the intervention group and this feeds back into their planning e.g. speech and fluency language is supported back in class, literacy objectives and activities show consideration.</li> <li>Advice from Speech and Language Therapy (if involved) is included in the planning</li> <li>Reduce language demands for CYPren with language difficulties.         <ul> <li><u>Early strategies</u></li> <li><u>Higher level strategies</u></li> </ul> </li> </ul>
Communication	Adults adapt their language levels to the level of the CYP.	



The CYP shows moderate-severe persistent speech difficulties, typically a Severe Speech Disorder. This interrupts learning and access to the curriculum in some situations. The CYP's needs are met using a combination of approaches, including small group interventions and 1:1 individualised support, in a mainstream school setting, following support and advice from other professionals. Severe speech difficulties can effect language skills, learning, social skills, behaviour and emotional wellbeing, therefore the CYP's needs are met though the SALT service, other agencies (e.g. Learning support, Educational Psychology, as appropriate) parent and schools working together.

<b>Provision:</b> Some targeted and individ	ual interventions over the week	Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Severe Speech Disorder – Phonological Disorder</li> <li>Phonological Disorder: May involve any/all of the following: <ul> <li>Some typical, but also a number of atypical speech processes (consult SLT)</li> <li>Deviant sound production and non-English sounds (consult SLT)</li> <li>Deviant sound production and non-English sounds (consult SLT)</li> <li>A range of consonants affected</li> <li>Some vowels may be affected</li> <li>Structure of words affected e.g. deleted syllables</li> <li>Some articulatory difficulties</li> <li>Mild motor speech difficulties</li> <li>Significant difficulties with intelligibility – usually reliant on familiar listeners, difficult to understand out of context.</li> </ul> </li> </ul>	Speech and Language Therapy Observations, Communication Plans and Reports.Information on the reverse of the Mainstream Schools SALT referral form regarding normal speech errors.ObservationData trackingTeacher assessmentsCYP Progress meetingsCYP/Young Person voiceOne Page Profile/Learner ProfileParent/Carer voiceAn Extended Support Plan information, advice, aspirations and planned outcomesScreening tools and / or assessment	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods</li> <li>The class/subject teacher is accountable for the progress of the pupils within the mainstream class. Curriculum tasks should be modified as required.</li> <li>Get to know the CYP and their speech difficulties and employ useful strategies.</li> <li>Advice from Speech and Language Therapy is included in the planning</li> <li>Staff will be following a speech programme provided by the SALT service.</li> <li>Increased use of gestural system of sound representations (e.g. Cued Articulation, Jolly Phonics) where a gesture is used to</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Educational Psychology Service Speech and Language Therapy Support from the Severe Speech Specialist team, or Phonology Team, from Speech and Language Therapy. Consider Referral to <u>Fusion SEND</u> <u>Hub/Learning Support</u> if the CYP has additional literacy difficulties.
Continued on next page	tools as identified Continued on next page	represent a phoneme/speech sound. Continued on next page	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Significant phonological awareness difficulties impacting on many aspects of literacy development.</li> <li>Some impact on language development e.g. word finding difficulties, difficulty learning new words especially multisyllabic words, grammar and morphology eg plurals (see language grid)</li> <li>In addition, one or more of the following also applies:</li> <li>Frequent difficulty communicating verbally beyond basic needs.</li> <li>Frequently relies on a trained listener or family members, for expressing themselves out of context.</li> <li>Frequent difficulties participating in social activities in unfamiliar contexts or with unfamiliar people.</li> <li>Frequent difficulties participating independently in unfamiliar educational activities.</li> <li>Occassionally shows moderate distress/ upset/ concern/ frustration/ anger/ embarrassment/ withdrawal</li> <li>Emotional encouragement and support required.</li> </ul>	Multi agency planning, outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Consistently using a gestural system in the classroom context to signal specific sound differences that the CYP struggles with.</li> <li>Using other visual means to represent speech sounds e.g. Jolly Phonics symbols and objects</li> <li>Adult modelling of correct speech sounds used in context and with the visual support of the gestural system.</li> <li>Be aware of the possible impact on vocabulary acquisition and word finding difficulties – adjustments may be needed e.g. Repetition and pre teaching when learning new vocabulary for curriculum topics, including multisensory learning, increased awareness of phonemic structure e.g. syllable clapping, initial sounds, rhyme, and semantic structure e.g. category, function etc see SLT wave 2 training on vocabulary)</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Additional opportunities for practicing phonological awareness</li> <li>Opportunities to access alternative methods for reading e.g. whole word approaches.</li> <li>Consideration of time needed to process language and retrieve words when answering questions etc.</li> <li>Possible use of Makaton signing and / or symbol and photo-based communication book, to support successful communication when speech is unintelligible.</li> <li>Similarly, the curriculum may need visual support e.g. symbols for vocabulary, to facilitate success in speaking and listening activities.</li> <li>Grouping</li> <li>Regular (preferably daily) opportunities for individual support for speech difficulties focused on specific targets, with reinforcement in whole class activities to aid transfer of skills</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Opportunities for CYP to access paired/social groups, with a skilled adult and/or symbol facilitated support, to increase successful communication in social situations.</li> <li>CYP accesses groups for additional phonological awareness interventions</li> <li>The teacher is aware of the learning taking place in the intervention group, and this feeds back into their planning e.g. speech is supported back in class, literacy objectives and activities show consideration.</li> <li>The CYP accesses small groups and 1:1 support as advised by the Speech and Language Therapy team.</li> <li>Support to be available for communication and emotional regulation: e.g. CYP's frustration leads to a behaviour incident, and the CYP is unable to quickly give an account to the teacher due to unintelligible speech.</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li><b>Resources</b></li> <li>Offer individual programmes of work, delivered on a regular (preferably daily) basis by a consistent TA, who will follow the advice and demonstration of a programme of work, delivered by the visiting SLT or SLT assistant.</li> <li>Attend any training or mentoring sessions offered by the SALT service to enable staff to deliver speech programmes or fluency strategies in the school context</li> <li>Pre and post tutoring is used to enable the CYP to engage with learning in the classroom, including vocabulary teaching, phonics and phonological awareness. This may require additional visual support.</li> <li>Adult support for learning as required.</li> <li>Alternative forms of recording routinely used.</li> <li>Use of visual, auditory and kinaesthetic approaches.</li> <li>Resources and displays that support independence.</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources (continued)</li> <li>Word mats are available to support vocabulary and spelling.</li> <li>Other forms of visual support, e.g. communication books are available to facilitate successful communication when speech is unintelligible.</li> <li>Advice from Speech and Language Therapy is included in the planning.</li> <li>Use of appropriate resources and access to specific interventions from specialist staff.</li> <li>Transitions</li> <li>Thorough and timely preparations made for transition, both between year groups and between settings.</li> </ul>	

The CYP shows severe persistent speech difficulties, either a Severe Speech Disorder - Severe Phonological Disorder and/or Moderate CYP Apraxia of Speech. These interrupt learning and access to the curriculum in many situations.

The CYP's needs are met using a combination of approaches, including small group interventions and 1;1 individualised support, in a mainstream school setting, following support and advice from other professionals. Severe speech difficulties can affect language skills, learning, social skills, behaviour and emotional wellbeing, therefore the CYP's needs are met though the SALT service, other agencies (e.g. Learning Support, Educational Psychology, as appropriate) and parents/carers and schools working together.

The CYP may be working on aspects of an individual, bespoke curriculum and so may have a highly personalised timetable that includes time spent away from the mainstream class. The CYP is able to access the classroom for some periods, with many opportunities for the CYP to be included with peers where they are able to experience success and supported by a member of staff.

Provision: Frequent, specific speciality	sed input	Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>A student may present with:</li> <li>Severe speech disorder – Severe Phonological Disorder and /or Moderate CYP Apraxia of Speech (CAS)</li> <li>Severe Phonological Disorder: <ul> <li>Very restricted repertoire of sounds used in speech e.g. 4-5 sounds.</li> <li>Some of these may be non- English sounds</li> <li>Many vowels affected, as well as limited consonants.</li> <li>Many atypical processes or no apparent 'phonological system'.</li> </ul> </li> <li>Continued on next page</li> </ul>	<ul> <li>Speech and Language Therapy Assessments, Observations, Communication plans and Reports</li> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> </ul> An <u>Extended Support Plan</u> / EHCP may be in place to draw together information, advice, aspirations and planned outcomes. Continued on next page	As level 3 whilst also including: Quality First Teaching with a specific consideration for CYP with speech and language difficulties. Adjustments to Teaching Methods • An alternative curriculum may be appropriate due to severe speech difficulties and possible secondary language and/or literacy needs, delivered in an adapted educational setting, as recommended by the appropriate specialist services. Continued on next page	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Speech and Language Therapy Consider Referral to <u>Fusion SEND</u> <u>Hub/Learning Support</u> to support additional literacy difficulties <u>Educational Psychology Service</u>



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Severe Phonological Disorder (continued):</li> <li>Syllables deleted regularly.</li> <li>Severe phonological awareness difficulties leading to literacy difficulties.</li> <li>And/or:</li> <li>Moderate CYP Apraxia of Speech</li> <li>Significant difficulties with motor speech skills (motor planning, programming and execution).</li> <li>Limited range of sounds.</li> <li>Difficulty imitating sounds at single sound level but especially in sound combinations and words.</li> <li>Prosody may be affected (e.g. rate, volume, intonation, stress and pitch)</li> <li>Likely to affect literacy with poor ability to form sounds for phonics, and in ability to produce combinations of sounds in sound blending.</li> <li>Likely additional phonological awareness difficulties.</li> <li>Communication partner bears the burden of responsibility.</li> <li>Continued on next page</li> </ul>	Assessment tools identified to unpick need and measure impact of support Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>The CYP accesses small groups and 1:1 support as advised by the Speech and Language Therapy team.</li> <li>Support to be available for communication and emotional regulation: e.g. CYP's frustration leads to a behaviour incident, and the CYP is unable to quickly give an account to the teacher due to unintelligible speech</li> <li>The class/subject teacher has an understanding of how speech difficulties can affect language behaviour and emotional needs.</li> <li>The class/subject teacher is accountable for the progress of the CYPren and young people within the mainstream class. Curriculum tasks should be modified as required.</li> <li>Get to know the CYP and their speech difficulties, their alternative methods of communication, and employ necessary strategies and AAC tools.</li> <li>Continued on next page</li> </ul>	



<ul> <li>intelligibility even with familiar listeners in familiar context.</li> <li>CYP uses a combination of verbal and alternative communication, (likely to need low tech AAC and visual support e.g. communication book, to express needs, join in conversation, access curriculum).</li> </ul>	stments to Teaching Methods
development: likely to hinder       set         language development resulting       set         in delayed language with shorter       set         sentences, reduced vocabulary,       Staff         word finding difficulties, impaired       as a         grammatical development. (see       • A         language grid)       • Affects access to all aspects of         the curriculum.       • If         • CYP may also have other areas       of significant difficulty such as         sensory difficulties, motor       M         planning difficulties (DCD) or       #         severe specific learning       • If         difficulties (literacy).       • If	stiments to reaching wethods tinued) offer individual programmes of ork, delivered on a regular daily) basis by a consistent TA, ho will follow the advice and emonstration of a programme f work, delivered by the visiting LT or SLT assistant. ttend any training or mentoring essions offered by the SALT ervice to enable staff to deliver peech programmes or fluency trategies in the school context. should consider and implement opropriate: dvice from Speech and anguage Therapy is included in ne planning ligh emphasis on speech and unguage development as irected by the SLT team. Staff ill be following a programme rovided by the SALT service. coreased use of gestural system f sound representations (e.g. trued Articulation, Jolly Phonics) here a gesture is used to apresent a phoneme/speech ound.



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		5 5	
<ul> <li>self-esteem, limited social integration, social isolation</li> <li>A structured approach to emotional support from others is</li> </ul>		complex sentences. CYP may need to keep sentences shorter to aid the listener's success in understanding them.	
required.		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>On grammar and morphology – poor speech affects complex sound combinations (word final blends) needed to mark plurals e.g. cats, and past tense e.g. looked</li> </ul>	
		<ul> <li>On vocabulary acquisition and word finding difficulties – adjustments may be needed e.g. Repetition and pre teaching when learning new vocabulary for curriculum topics, including multisensory learning, increased awareness of phonemic structure e.g. syllable clapping, initial sounds, rhyme, and semantic structure e.g. category, function etc see SLT wave 2 training on vocabulary)</li> <li>Consideration of time needed to process language and retrieve words when answering questions etc.</li> <li>Consideration of teaching style</li> </ul>	
		e.g. avoid asking questions in front of a group when the CYPs' answer could be unintelligible.	
		<ul> <li>Be aware of the impact on literacy development</li> <li>Possibly poor ability to articulate sounds in phonics</li> </ul>	
		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Poor phonological awareness at sound, syllable, and word levels – may affect reading and writing.</li> <li>Possibly poor motor skills affecting pencil control/ recording</li> <li>Frequent use of alternative methods of communication e.g. Makaton signing and/or symbol and photo-based communication book, to support successful communication when speech is unintelligible, both in learning and social environments.</li> <li>Similarly, the curriculum will need visual support e.g. symbols for vocabulary, to facilitate success in speaking and listening activities.</li> <li>Awareness of CYPs' risk of social isolation, behaviour difficulties (frustration or withdrawal), and low selfesteem, due to unintelligible speech.</li> <li>Bespoke curriculum - the curriculum should be significantly modified and place high emphasis on speech and language development, with specialist advice.</li> </ul>	
		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Additional adults support the CYP individually, under the direction of the teacher to:         <ul> <li>work on modified curriculum tasks</li> <li>access regular individual support</li> <li>encourage independence.</li> </ul> </li> <li>Pre and post tutoring is used to enable the CYP to engage with learning in the classroom, including vocabulary teaching, phonics and phonological awareness. This may require additional visual support.</li> <li>Grouping</li> <li>Regular (daily) individual support for speech difficulties focused on specific targets, with reinforcement in whole class activities to aid transfer of skills. Follow programme and guidance of SLT.</li> <li>CYP accesses small group and individual support for additional phonological awareness interventions.</li> </ul>	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Opportunities for CYP to access paired/social groups, with a skilled adult and symbol facilitated support e.g. communication books, to increase successful communication in social situations.</li> <li>Teacher is aware of the learning taking place in the intervention group, and this feeds back into their planning e.g. speech is supported in class, literacy objectives and activities show consideration.</li> <li>Intensive individual support in the classroom, to support speaking activities, and literacy.</li> <li>Planned time for small groups and individuals working with some light touch support, to promote and support independent learning.</li> </ul>	
		<ul> <li>Access to appropriate resources and guidance and support to develop specific interventions</li> </ul>	
		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources (continued)</li> <li>Staffing and time needed to prepare resources incl visual support to enhance and support learning.</li> <li>Alternative forms of recording routinely used</li> <li>Use of visual, auditory and kinesthetic approaches</li> <li>Resources and displays that support independence</li> <li>Word mats available to support vocabulary and spelling</li> <li>Other forms of visual support, e.g. communication books, are available, accessible and used regularly in the curriculum to facilitate successful communication and learning when speech is unintelligible.</li> <li>Advice from Speech and Language Therapy is included in the planning.</li> <li>Transitions</li> <li>Thorough and timely preparations made for transition, both between year groups and between settings</li> </ul>	

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The CYP has a profound speech disorder, typically Profound CYP Apraxia of Speech (CAS) which means they have very limited attempts at articulation of words, and therefore also have profound expressive language difficulties. Both their speech and language difficulties severely affect access to the curriculum. These CYPs also need to be measured on the language profiles of the SSG.

The CYP's needs are met by working on an individual, bespoke curriculum and so has a highly personalised timetable that includes time spent away from the mainstream class. The CYP is able to access the classroom for limited periods where they are able to experience success supported by a member of staff. Planned opportunities are provided for the CYP to be included with peers where the CYP is able to experience success.

<b>Provision:</b> Daily, specific specialised input at all times across all aspects of the curriculum		Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>A student may present with:</li> <li>Profound speech disorder, typically Profound CYP Apraxia of Speech (CAS) which may involve:</li> <li>Profound difficulties in the production of speech sounds – severe motor difficulties with motor planning, programming and execution of sounds and sound combinations.</li> <li>Extremely limited range of sounds produced spontaneously, and huge effort required to attempt a wider repertoire</li> <li>Difficulty imitating sounds at single sound level, in sound combinations or in words.</li> <li>Significant impact on prosody (intonation, fluency, volume, rate, stress, pitch)</li> <li>Continued on next page</li> </ul>	Speech and Language Therapy Assessments, Observations, Communication plans and Reports Observation Data tracking Teacher assessments CYP Progress meetings CYP/Young Person voice One Page Profile/Learner Profile Parent/Carer voice An EHCP is likely to be in place to draw together information, advice, aspirations and planned outcomes. <u>Assessment tools identified</u> , where and when they can be used to help unpick need and measure impact of support Multi agency planning, Outside Agency advice and recommendations are followed	<ul> <li>There is agreement between professionals (Educational Psychology Service, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5.</li> <li>Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4. In addition, the following will be in place:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate:</li> <li>Advice from Speech and Language Therapy is included in the planning</li> <li>Continued on next page</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) <u>Speech and Language Therapy</u> <u>Fusion SEND Hub/Learning Support</u> <u>Educational Psychology Service</u>



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Profound difficulties with intelligibility - rarely understood without alternative communication.</li> <li>Hugely reliant on non-verbal alternative communication including signing, low tech communication support, visual support, for most/all needs. The CYP may need high-tech AAC equipment.</li> <li>Huge impact on language, especially expressive language.</li> <li>Standardised test scores fall below the first centile on expressive language assessment. (see level 5 on SSG language grid). Receptive language skills may also be lower than expected.</li> <li>May also affect non speech oral movements including eating and drinking.</li> <li>Affects access to all aspects of the curriculum.</li> <li>Affects social participation.</li> <li>Continued on next page</li> </ul>		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>An alternative curriculum is appropriate (due to difficulties with speech, language and possibly communication, social skills, motor or sensory needs) delivered in an adapted educational setting as recommended by appropriate specialist services.</li> <li>High emphasis on speech, language and communication development as directed by the SLT team. Staff will be following a programme provided by the SALT service.</li> <li>Adapted or bespoke curriculum</li> <li>Emphasis on speech, language and functional communication skills being the focus of an adapted curriculum and integrated into all learning and social opportunities.</li> <li>Teaching approaches that place a high emphasis on supported learning, are very finely graded and provide opportunities for frequent repetition and reinforcement</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
CYP may also have other areas of significant difficulty such as wider motor planning difficulties (Developmental Co-ordination Disorder, DCD) or specific learning difficulties (literacy) or sensory difficulties.		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Additional adults support the CYP individually, under the direction of the teacher to:</li> <li>work on modified curriculum tasks</li> </ul>	
In addition, one or more of the following also applies:		<ul> <li>access regular individual support</li> <li>encourage independence</li> <li>Teaching may need to be</li> </ul>	
Minimal functional communication limited to expressing basic needs, usually requiring tailored use of AAC. Constant dependence on trained / familiar communication partner.Profound difficulties participating in educational and social activities.Frequently displays high levels of distress/ upset/ concern/ frustration/anger/ distress/ embarrassment/ withdrawal. May be unable to express or control		<ul> <li>delivered at a simple level and slower pace, with frequent repetition and over learning, with extended time to allow for CYPs attempts at spoken language.</li> <li>All verbal communication used by staff, to be supported visually using gestures, signs, modelling, objects, photos and/or symbols.</li> <li>Extensive use of multisensory support to access learning e.g. objects of reference, tactile cues, auditory cues, olfactory cues and visual cues</li> <li>Curriculum delivered through structured practical experiential learning opportunities</li> </ul>	
<ul> <li>emotions appropriately.</li> <li>A tailored and structured approach to emotional support is required.</li> </ul>		<ul> <li>Availability of different approaches to learning to read without spoken voice, e.g. word recognition.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Access to appropriate resources and specific interventions</li> <li>Availability of alternative methods of recording written learning e.g. symbols, videos, photos</li> <li>CYP is encouraged to use a Total Communication approach which values any effective means of communication e.g. gesture, facial expression, body language, eye pointing, pointing, signs, objects, photos, symbols etc.</li> <li>Access to alternative communication systems to support expressive communication (low or high tech). This may include object-based systems, photos, symbols and communication books. It may also include alternative methods to participate in education or social tasks i.e. switches, eye gaze, iPad, electronic voice devices etc.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Opportunities to learn to use and build confidence in using alternative communication devices in functional and social situations.</li> <li>Provision to meet additional sensory and/or motor needs as appropriate.</li> <li>Where appropriate, provide opportunities for CYP to develop independent living skills through access to targeted interventions.</li> <li>Support in unstructured learning and social environments including break / lunchtimes.</li> <li>Daily access to staff who are skilled in supporting emotional regulation through the use of visual support, AAC, and SEMH resources.</li> <li>Monitor the progress of the CYP using highly structured methods.</li> <li>Grouping:</li> <li>See level 4</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Intensive daily individual support for speech difficulties focused on specific targets, with reinforcement in whole class activities to aid transfer of skills. Follow programme and guidance of SLT.</li> <li>Planned time for intensive adult support for implementing use of alternative communication e.g. symbols, communication book or use of AAC. Follow the guidance of SLT.</li> <li>Paired and small group opportunities with peers, to develop CYP's confidence in using alternative communication and/or attempts at spoken communication. Guidance from SLT.</li> <li>Access to daily individual and group support for literacy development.</li> <li>Planned opportunities for some light touch adult support to increase independent learning skills.</li> <li>Continued on next page</li> </ul>	

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## 1C Communication and Interaction: Speech and Fluency/Dysfluency Level 5 continued



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>The CYP accesses small group and individualised support, with Speech and Language targets integrated into their daily routine.</li> <li>Access to regular support to develop social skills and support emotional regulation.</li> <li>Additional adults support the CYP individually under the direction of the teacher to:</li> <li>Work on modified curriculum tasks (additional time needed to prepare resources incl visual support to enhance access to learning)</li> <li>Embed speech and language learning and communication into functional and curriculum activities</li> <li>Encourage independence</li> <li>Access for teaching staff to appropriate resources, training, guidance and support from specialist staff, to carry out specific interventions.</li> <li>Continued on next page</li> </ul>	

#### **Communication and Interaction: Speech and Fluency/Dysfluency** 1C **Level 5 continued**



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources</li> <li>A monitoring system should be in place to assess the CYP's needs, plan and identify outcomes, implement support and monitor and evaluate progress,</li> <li>Identify any specific training needs for staff</li> <li>Transitions</li> <li>thorough and timely preparations made for transition, both between year groups and between settings</li> </ul>	



## 1C Communication and Interaction: Speech and Fluency/Dysfluency Interventions and Support



#### Interventions

- Cued articulation training
- <u>SLT Wave 2 packages {especially vocabulary and word finding difficulties.)</u>



#### 1 Communication and Interaction PfA Outcomes and Provision

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	PfA Outcomes				
	Employability/Education	Independence	Community Participation	Health	
	Child will be able to follow direction within routines and comply with simple instructions. Child will show increased listening	Child will have the communication and interaction skills required to request objects or help as required. Child will have the language and	Child will have the communication and interaction skills required to support the development of shared interaction, friendships and play with peers.	Child will be able to alert an adult at times when they are hurt or feeling unwell. Child will have the communication	
y Years . Years)	skills, attention and task focus Child will have the communication and interaction skills to facilitate joint play with peers.	communication skills necessary to support their understanding and ability to make choices between options offered (indoor/outdoor play, snack time, meal time, activities to access within free play etc.).		skills required skills to convey basic feelings to others to facilitate emotional well being	
Early (0-4 )	Child will have the language and communication skills to support real world/role play (doctor, nurse, builder, firefighter, policeman).				
	Areas of Learning for Communication	omes in relation to EFYS ELG (40-60 m and Interaction: Listening and Attention, ndation/docs/devmatters_tracking_2012		to Reception, with reference to Prime	
Provision	Please refer to detail provided within the Communication and Interaction.	ne Teaching and Learning Strategies an	d Curriculum/Interventions sections of the	ne Early Years Ranges Guidance:	

#### 1 Communication and Interaction PfA Outcomes and Provision continued



		PfA Outcomes					
	Employability/Education	Independence	Community Participation	Health			
Reception to Y2 (5-7 years)	Child will have the communication and interaction skills required to meet with adults from a range of careers and obtain information, appropriate to the child's age and developmental level, in relation to different jobs to enable them to begin to think about what they may like to do in the future. Child will engage with real world visits (fire stations, farms, etc.) and be able to communicate with adults present to obtain information relating to any questions they may have.	Child will have the communication and interaction skills required to enable them, with adult supervision support and modelling, to ask for things that they would like (ordering juice in a coffee shop, asking for a toy or food item at a shop counter etc.)	Child will be able to interact and communicate appropriately with peers to enable participation in teams and games, after school clubs and weekend activities. Child will have the communication and interaction skills required to begin to develop friendships with peers.	Child will have the language, communication skills required to gain the attention of an adult at times when they feel unwell in order to access appropriate medical care as required. Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise.			
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Communication and Interaction, SLCN and Autism.						

#### 1 Communication and Interaction PfA Outcomes and Provision continued



		PfA Ou	tcomes		
	Employability/Education	Independence	Community Participation	Health	
Y3 to Y6 (8-11 years)	Child will be able to articulate their ideas in relation to different career and education options and will have the communication skills required to ask questions to support them in moving towards making choices. Child will be able to engage with career related role models/sessions on different career paths from visitors in school to further increase their understanding of potential options/areas of interest.	Child will have the communication and interaction skills required to enable them to ask for things that they would like, to pay for things in a shop or school lunch hall, as step toward independent living. Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required.	Child will have the communication and interaction skills required to develop and maintain friendships with peers. Child will be able to interact and communicate appropriately with peers to enable participation in team games, youth and after-school clubs. Child will have the language and communication skills required to outline any issues relating to bullying or safety online to an adult.	Child will have the language and communication skills required to explain the issue to an adult at times when they are hurt or feel unwell in order to access appropriate medical care as required. Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise.	
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Communication and Interaction, SLCN and Autism.				

#### 1 Communication and Interaction PfA Outcomes and Provision continued



		PfA Ou	tcomes	
	Employability/Education	Independence	Community Participation	Health
Y7 to Y11 (11-16 years)	Child will be able to engage with structured careers advisory sessions, communicating their thoughts and ideas relating to potential career choices and having the interaction skills to talk with adults to obtain additional information/guidance as required to enable them to make informed choices. Child will have the communication and interaction skills (written or verbal) required to facilitate the building of a personal/vocational profile within careers sessions, moving towards building a CV for application for further education/training or employment. Child will have the communication and interaction skills required to function within a workplace environment, either with respect to work experience/voluntary work or part time employment to enable them to gain work related experience and explain areas of interest.	Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required. Child will have the communication and interaction skills required to enable them to socialise with peers (unsupervised) within the community and to access activities within the local community in accordance with their preferences.	Child will have the language, communication and interaction skills to develop and maintain friendships with peers and to integrate successfully into a range of social groupings and situations. Child will be able to interact appropriately via social media, online games and within the online community to maintain personal safety and lessen potential vulnerability.	Child will have the language and communication skills required to ask questions in order to obtain additional information relating to sex education managing more complex health needs, risks related to drugs and alcohol and support for mental health and wellbeing as required. Child will be able to communicate, with adult support/prompting, any health needs or concerns to a GP to obtain appropriate medical care or support as required.

# 2 Cognition and Learning Levelling Grid

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When consid	pport Grid: 2 Learning and Cog	nition – General and Specific L must also consider needs in otl		s of the CYP/your	ng person's profile	e e.g. motor,
•	CYP's overall level, consider the level of need.	ne level given in any cognitive a	assessments (if in place) along			
Level	Assessment data Health service diagnosis of learning disability	Attainment level	Adaptive functioning skills (Ability to manage daily living tasks and social interactions)	Participation	o consider when Attendance	levelling Wellbeing and emotional regulation
1 Slow Progress	Commonly a standard score of 80 to 90. No disability	As a rule of thumb this would be working at least 1 year behind expectations for attainment.	Largely age appropriate functioning	Good participation in adult directed learning activities	Good attendance (over 90%)	Good emotional regulation skills
2 Mild Learning Difficulties	Commonly a standard score of 80 or below. No disability	As a rule of thumb this would be working at least 2 years behind age related expectations for attainment, with potentially a more exaggerated gap as the CYP moves through education.	Some minor difficulties in adaptive functioning	Participates most of the time in adult directed learning activities (75% of the school week)	Attendance 75 – 90%	Some minor difficulties in emotional regulation
3 Moderate Learning Difficulties	Commonly a standard score of 69 or below (between 1st or 2nd percentile which is a 'very low' score). CYP may have a Learning Disability – consider health referral for further assessment such as a referral for a developmental review via Community Paediatricians Mild Learning Disability FSIQ <70, with associated impairment in adaptive functioning	As a rule of thumb this would be working at least 3-4 years or a key stage behind age related expectations for attainment, with a more exaggerated gap as the CYP moves through education.	Moderate impairments in adaptive functioning	Participates some of the time in adult directed learning activities (50% of the school week)	Attendance 50 – 74%	Moderate difficulties with emotional regulation

### 2 Cognition and Learning Levelling Grid continued



	Adaptive functioning skills		Adaptive functioning skills	Areas t	o consider when	levelling
Level	Assessment data Health service diagnosis of learning disability	Attainment level	(Ability to manage daily		Attendance	Wellbeing and emotional regulation
4 Severe Learning Difficulties (SLD)	Commonly a standard score of 60 or below (<1st percentile which is an 'extremely low' score). CYP may have a Learning Disability – consider health referral for further assessment Moderate Learning Disability FSIQ <50, with associated significant impairment in adaptive functioning	As a rule of thumb this would be functioning below age 5 or band 5 of the Birmingham Toolkit/ or equivalent assessment tool	Significant impairment in adaptive functioning	Participates in limited adult directed learning activities (25% of the school week)	Attendance 25 – 49%	Significant difficulties with emotional regulation
5 SLD with low adaptive functioning / PMLD	functioning	Below age 5 functioning or band 5 of the Birmingham Toolkit with additional complex needs/ or equivalent assessment	Severe impairment in adaptive functioning	Mostly does not participate in adult directed learning activities (0- 10% of the school week)	Attendance below 25%	Severe difficulties with emotional regulation
Indicators	Indicators of a specific learning difficulty profile:					

• Adaptive functioning skills may be a strength for the young person.

- Assessment data and attainment levels are likely to be impacted
- Likely to see a spiky profile across cognitive assessments

• Progress needs to be closely monitored and measured, to be able to track impact and support the planning of specific next steps for the CYP

- If you are considering a specific learning need, there is likely to be a gap between the CYP and their peers' level of attainment despite intervention, adaptive teaching and curriculum modification.
- In Dyslexia / Dyscalculia some or all aspects of literacy / numeracy attainment are weak in relation to age, standard teaching, and instruction, and level of other attainments.

## 2 Cognition and Learning Memory and Retention Ordinarily Available / Universal Support



	Ordinarily available classroom provision and tea	ching approaches for all learners
Positive and Effective Communication and Relationships	<ul> <li>All staff have a good understanding of the impact that working memory and executive functioning skills have on the CYP's ability to learn. Staff should be mindful that the young person will find it difficult to understand links and relationships between information.</li> <li>Give instructions simply and clearly and make sure the student is looking at you first. Break instructions down into small chunks.</li> <li>Allow 1-2 minutes 'take up time' when giving instructions – this will allow the student to process fully what is required of them.</li> <li>Check a CYP's understanding by asking them to repeat back an instruction or explain the task to a peer. You may need to ask them to show you what they should be doing, rather than asking them to tell you.</li> </ul>	<ul> <li>During class discussions, proactively 'retune' the student back into the lesson by interspersing more challenging questions with simple questions addressed directly to those who tend to 'drift off'.</li> <li>Provide repetitions – exact repetitions and rephrasing.</li> <li>Encourage active listening – agree a way for CYP to ask for help or clarification.</li> <li>Give clear guidelines and expectations: "I expect you to have produced at least three sentences by ten past ten; I will be asking you then to share these with your writing partner."</li> <li>Try to use strategies such as checklists, reminder notes, visual timetables etc. to support the student if they forget routines (e.g. bringing a pen and pencil, books, PE kit, arriving at the right lesson at the right time etc.)</li> </ul>
Environment	<ul> <li>Key vocab is displayed with appropriate visuals.</li> <li>Minimise copying from the board – provide individual copies (plan for this).</li> <li>Provide written, visual and video support. Use diagrams and pictures to add meaning alongside text and break long chunks of text up.</li> </ul>	<ul> <li>To support short term memory, have small whiteboards and pens available for notes, to try out spellings, record ideas.</li> <li>Plan to use IT programs and apps to reinforce and revise what has been taught.</li> </ul>
Access to Learning	<ul> <li>All class work and homework should be differentiated across all subjects to enable the CYP to access the full curriculum.</li> <li>Plan to ensure that links to prior learning are made.</li> <li>Plan, teach and model techniques with the whole class to aid memory.</li> <li>Teach CYP strategies to support learning – e.g. asking for help, rehearsal, notetaking, place keeping, mnemonics, mind-mapping.</li> <li>Key learning points are reviewed at appropriate times during and at the end of a lesson or in mini plenaries.</li> </ul>	<ul> <li>Scaffold work by providing writing frames/prompt sheets.</li> <li>Break tasks down into mini steps for the CYP</li> <li>Teach CYP how to use planners or task management boards: tasks are broken down into small manageable steps. These steps are shown explicitly.</li> <li>Mastery learning approaches may be helpful – a student must have mastered key concepts before moving on to the next topic.</li> </ul>

Continued on next page

## 2 Cognition and Learning Attention and Listening Ordinarily Available / Universal Support



	Ordinarily available classroom provision and te	aching approaches for all learners
ng Positive and Effective Communication and Relationships	<ul> <li>Focus attention before giving instructions/information - use visual cues to guide students' attention.</li> <li>Check that information has been understood; observe child's responses and actions, show the child what to do rather than repeating with lots of language.</li> <li>Acknowledge and positively reinforce appropriate listening and attention.</li> <li>Simplify language, use the same language to 'cue' in pupils/students.</li> <li>Use CYP's names to gain attention and give feedback.</li> <li>Use non-verbal and verbal cue to support understanding.</li> <li>Minimise distractions in the classroom – verbal and visual.</li> <li>Check in that pupils have understood – use a 'traffic light' or thumbs up/down system.</li> <li>Use visual supports to reinforce language.</li> </ul>	<ul> <li>Lots of positive feedback and appropriate praise (or reference to a positive engagement/reward system) for good listening.</li> <li>Modelling good attention and listening skills through interaction and shared dialogue,</li> <li>Be aware if an CYP have hearing impairment and plan seating and acoustics.</li> <li>Reminders of the appropriate level of noise for the task.</li> <li>Encourage CYP to give positive feedback to others in their group as felt useful (for example 3 people in a group rating interactions).</li> <li>Use levels of language appropriate to the individual child.</li> <li>Make the 'environment work for the CYP' so they can see where and what is happening in different areas.</li> <li>CYP has access to a low distraction work area within the classroom.</li> </ul>
Enabling Environment	<ul> <li>Ose visual supports to reinforce language.</li> <li>Have an ongoing awareness of the sensory environment and seating.</li> <li>Be aware if any CYP have hearing impairment and plan seating and acoustics.</li> </ul>	<ul> <li>If additional support staff are available, enable them to move around checking that CYP are attending and able to start, continue and complete tasks.</li> <li>Provide timers to give a visual cue of how long a task will last.</li> <li>Use additional visual systems as needed.</li> </ul>
Access to Learning	<ul> <li>Ensure all staff have updated pupil profiles/passports.</li> <li>Break tasks into manageable chunks.</li> <li>Use 'task plans': a visual representation or list of verbal instructions to promote independent working.</li> <li>Develop sequencing skills teach of the language of sequencing. - first, next, finally etc. Have visuals to remind reinforce.</li> <li>Explaining to listening partners what the task is.</li> </ul>	<ul> <li>Rating system for the CYP to indicate if they have heard and understand the task – (thumbs up/green laminated card).</li> <li>Use talking partners/paired and group work.</li> <li>Move closer to CYP as needed to support them in re-focusing to learning/tasks.</li> <li>Lots of positive feedback and appropriate praise (or reference to a positive engagement/ reward system) for good listening. Focusing upon effort not attainment.</li> </ul>

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## 2 Cognition and Learning Literacy Difficulties Ordinarily Available / Universal Support



	Ordinarily available classroom provision and teaching approaches for all learners
Positive and Effective Communication and Relationships	<ul> <li>Keep instructions to one or two parts only. Chunk sequences of instructions – i.e., deliver one at a time vocally, print them one at a time on separate cards, model in numbered steps etc.</li> <li>Allow 1-2 minutes 'take up time' when giving instructions – this will allow the student to process fully what is required of them.</li> <li>Allow time for the CYP to formulate a response and provide a choice of alternative answers if the CYP is struggling to respond.</li> <li>Try teaching an active listening strategy – "Stop, Look and Listen" - every time the teacher speaks. By practising responding in this way students who face Literacy difficulties may find that they recall and understand more.</li> <li>Repeat information/instructions if necessary and check understanding, e.g., Can the CYP tell you/show you what they have to do?</li> <li>Explain idioms and metaphors – don't assume pupils know what they mean (e.g., over the moon).</li> <li>Respond supportively when a student forgets routines – such as bringing a pen and pencil, books, PE kit, arriving at the right lesson at the right time etc.</li> <li>Avoid sudden changes in routine without informing them beforehand.</li> <li>Celebrate effort for attempting tasks as well as celebrating achievement.</li> </ul>
Enabling Environment	<ul> <li>Provide individualised resources to support learning, e.g. a bank of commonly-used words/symbols related to specific topics and signposting them to the other resources they could use. Key vocabulary is displayed with appropriate visuals.</li> <li>Avoid moving around too much or standing in a place with visual distractions when giving spoken instruction/information.</li> <li>If you frequently use your smartboard/whiteboard to present written information, remove visual distractions from around it such as shelving, posters, storage units etc.</li> <li>Build opportunities for learning breaks.</li> </ul>
Access to Learning	<ul> <li>Explicitly teach reading comprehension strategies e.g. re-reading the text, underlining key words, clarifying the meaning of words. Adults should also encourage the CYP to independently summarise what he/she has read and predict what might happen next as part of any reading intervention.</li> <li>Do not expect pupils to write and listen at the same time. Consider the range and level of questions which can be accessed by particular CYP and adjust accordingly. Enable pupils extra time to complete work in class and in classroom tests if needed.</li> </ul>

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## 2 Cognition and Learning Mathematical Difficulties Ordinarily Available / Universal Support



Ordinarily available classroom provision and teaching approaches for all learners					
Positive and Effective Communication and Relationships	<ul> <li>Use specific praise when possible (e.g., you did well to remember to carry the 10) rather than vague praise (e.g., well done).</li> <li>Use language that supports a 'growth mindset'. For instance, 'By half-term you will be able to add and take away fractions'.</li> <li>Use consistent maths terminology. Use transparent language which explains what you are talking about e.g., 'three groups of four' rather than 'three times four'.</li> </ul>	<ul> <li>Use consistent maths terminology. Use transparent language which explains what you are talking about e.g., 'three groups of four' rather than 'three times four'.</li> <li>Encourage CYP to ask questions.</li> <li>Avoid sudden changes in routine without informing them beforehand. Give an overview of the lesson at the beginning, middle and end</li> </ul>			
Environment	<ul> <li>Ensure all classes (even in KS3 and 4) have practical resources which clearly demonstrate the relative value of number, e.g. Numicon, Dienes, Cuisenaire rods.</li> <li>Table-top resources such as 100 square, number lines, times tables. Make sure these are easily accessible. For secondary school these could be put into a planner.</li> </ul>	<ul> <li>Visuals around class for maths language such as operators and BIDMAS.</li> <li>Use of games and IT to add variety to overlearning.</li> <li>Maths vocabulary mats.</li> <li>Allow brain breaks, including allowing the CYP to physically move.</li> </ul>			
Access to Learning	<ul> <li>The class/subject teacher is accountable for the progress of the CYP within the mainstream class. They should know, through formative assessment and Assessment for Learning, what each pupil can and cannot do.</li> <li>Make clear links to previous learning.</li> <li>Active learning is more effective than listening.</li> <li>Small steps teaching based on early concepts with these being built upon through overlearning.</li> <li>Ensure basic concepts are secure before moving on.</li> <li>Overlearn and revisit the four arithmetic operations.</li> <li>Teach CYP to think about their own learning more explicitly, often by teaching them specific strategies for planning, monitoring, and evaluating their learning.</li> <li>Routine feedback.</li> <li>Allow CYP to evaluate their own learning and understanding. Encourage CYP to ask questions.</li> <li>Allow for individual thinking time and partner discussion.</li> </ul>	<ul> <li>Start from what the child already knows (appropriate assessments undertaken to determine).</li> <li>Move slowly from concrete to abstract (model using resources to support thinking and reasoning). As you introduce more abstract tasks, make links to concrete resources demonstrating how you would use resources to solve the problem.</li> <li>Differentiated questioning and targeted simplified level/pace.</li> <li>Break tasks into chunks. Use task boards and task plans.</li> <li>Regular checking by the class teacher to ensure understanding of concepts.</li> <li>Relate number concepts to everyday life and specific areas of interest.</li> <li>Limit demands on memory (encourage CYP to work out what they need to know, using what they already know). Focus on reasoning rather than remembering.</li> <li>Use mnemonics, humour, drama and mechanisms to help make a memory that will stick.</li> </ul>			

# 2 Cognition and Learning Level 3



Moderate difficulties that affect all • [ areas of the curriculum and • ]	Identification and Assessment	Reviews: 3 per year Teaching and Learning Strategies	Documents: Support Plan or Extended Support Plan Additional advice and support
<ul> <li>Persistent difficulties with the acquisition and/or use of language, literacy and numeracy despite QFT and relevant, focused small group interventions.</li> <li>May have a lack of concentration in some lessons due to comprehension and language difficulties</li> <li>Identified or suspected memory difficulties</li> <li>May display some behaviour</li> </ul>	Observation Data tracking Teacher assessments CYP Progress meetings CYP/Young Person voice One Page Profile/Learner Profile Parent/Carer voice An <u>Extended Support Plan</u> may be in place to draw together information, advice, aspirations and planned outcomes <u>Screening tools and / or</u> <u>assessment tools as identified</u> Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate <ul> <li>Individual support working on progressive personalised targets as informed through in depth learning assessments and observations, building and developing key skills. This needs to be monitored and recorded on assessment tools that signal the next appropriate steps e.g. Locke and Beech, Birmingham Toolkit etc.</li> <li>Explicit links made between interventions and group work/whole class work. School has a system in place for this.</li> </ul> </li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) <u>Fusion SEND Hub/Learning Support</u> <u>Educational Psychology Service.</u> <u>Speech and Language Therapy</u> Health Services if involved.

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Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
May find it difficult to follow lengthy (more than 2 or 3-step) instructions and routines Support may be needed to organise resources and / or new activities Difficulties with adaptive behaviour and social skills that requires support e.g. can seem immature when compared to peers. Cognitive and school assessment indicate significant and enduing difficulties with several aspects of cognition e.g. memory, concept development, information processing, understanding, sequencing and reasoning. For a specific learning difficulty significant discrepancies between different areas of cognition or a highly unusual profile of strengths and difficulties. Difficulties in some aspects of cognitive processing will be present e.g. slow phonological processing, poor working memory, difficulties with audial and visual processing.		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Specific planning and modifications made to allow the CYP to access whole class learning e.g. in curriculum lessons the CYP's literacy ability informs the work that they produce. This includes the modification of language used in explanations and questioning.</li> <li>Visual cues to support auditory information at all stages of delivery.</li> <li>Assistive technology to be utilised.</li> <li>The CYP's interests are taken into consideration when planning</li> <li>Due regard will need to be made regarding social skills / gross motor skills etc.</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping</li> <li>The CYP will access a variety of support over the week may include whole class teaching, small group support and daily individualised support working on personalised targets matched to their learning profile to enable them to access the curriculum, e.g. working on individual outcomes that are repeated and reinforced.</li> <li>At secondary, this may be a bespoke curriculum, utilising varied routines, possible TA support in class and/or focus groups with highly differentiated targets. CYP may access additional support at GCSE levels, additional to that which is normally delivered within the setting</li> <li>The CYP accesses designated learning time, either in small groups or 1:1, with the class teacher and other members of staff. Additional adults work under the direction of the teacher.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>Clear entry and exit criteria for intervention, with evidence of progress shared with the CYP (where appropriate) and family.</li> <li>Pre / post learning opportunities are consistently planned and utilised.</li> <li>Possible alternative GCSE pathway provision may be in place</li> </ul>	
		<ul> <li>Wide variety of resources appropriate to the task, depending on the task this may include visuals, practical equipment, memory aides that will support access to the learning with as much independence as possible.</li> <li>TEACHH (or similar approach) system in place with tasks that allow consolidation of key skills to be completed independently.</li> <li>Interest boxes specific to CYP for downtime.</li> </ul>	
		Continued on next page	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources (continued)</li> <li>Specialist equipment and technology specific to the CYP's learning need e.g. sloping board, dictation software, reading device/support, Clicker or Docs Plus etc. are in place.</li> <li>CYP's voice is communicated to all supporting so that everyone is aware of what works and what doesn't from the CYP's perspective.</li> <li>Personalised timetable e.g. use of Now &amp; Then, reward focused activities where appropriate etc.</li> <li>Specific training needs for staff are identified and sourced. Staff may be supported through working alongside specialists, either Outside Agency or from within school (though an appropriately qualified and highly skilled specialist).</li> </ul>	

#### 2 Cognition and Learning Level 4



The CYP's needs are met through a bespoke provision offer and highly personalized timetable. This will include time in mainstream classes where appropriate with a high level of scaffolding and support in place to achieve success. The CYP will work on individualized outcomes as advised by appropriate practitioners.

Provision: Frequent, specific specialised input		Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>For a general learning difficulty: Severe difficulties that affect all areas of the curriculum and adaptive functioning skills.</li> <li>Persistent and pervasive difficulties with the acquisition and retention of use of language, literacy and numeracy despite QFT and relevant, focused small group and 1:1 intervention.</li> <li>May present with very short attention span due to comprehension and language difficulties</li> <li>Suspected or identified memory difficulties</li> <li>May display some behaviour problems and / or work avoidance. Possible difficulties with self esteem, motivation and emotional wellbeing</li> </ul>	<ul> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> <li>An Extended Support Plan / EHCP may be in place to draw together information, advice, aspirations and planned outcomes</li> <li>Assessment tools identified to unpick need and measure impact of support</li> <li>Multi agency planning, Outside Agency advice and recommendations are followed</li> <li>Access arrangements considered</li> </ul>	<ul> <li>As Level 3 whilst also including:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate</li> <li>Teaching approaches that place a high emphasis on direct training, are very finely graded and offer practical tasks which provide opportunities to make progress towards planned outcomes</li> <li>Curriculum focusing on the acquisition of functional skills to be worked on across the week, where appropriate.</li> <li>Opportunities are frequent, repeated and reviewed, ensuring generalisation has occurred before moving on.</li> <li>Tasks will be short in duration and may be reward led</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Fusion SEND Hub/Learning Support Educational Psychology Service. Speech and Language Therapy Health Services if involved.
despite support. Continued on next page		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
<ul> <li>Likely to find it difficult to follow lengthy (more than 2 step) instructions and routines</li> <li>A high level of support needed to organise resources and / or new activities</li> <li>Likely to need constant on-going level of support for learning as well as personal / social / emotional well- being and / or self-help and safety.</li> <li>Cognitive and school assessment indicate significant and persistent difficulties with several aspects of cognition e.g. memory, concept development, information processing, understanding, sequencing and reasoning requiring significant alteration to the pace and delivery of the curriculum.</li> <li>Difficulties with adaptive behaviour and social skills e.g. can seem immature when compared to peers, may become increasingly vulnerable.</li> <li>Continued on next page</li> </ul>		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Additional adults support the CYP individually, under the direction of the teacher and other key staff to: <ul> <li>work on highly modified curriculum tasks when working with the whole class</li> <li>access significant amount of individual support sessions across each day</li> <li>encourage independence</li> </ul> </li> <li>Visual cues to support auditory information at all stages of delivery.</li> <li>The curriculum places an emphasis on identified holistic outcomes e.g. life skills, opportunity for the CYP to engage in community activity and to encourage independence</li> <li>Develop independent living skills.</li> <li>Teaching activities are adapted to reduce the impact of processing difficulties e.g. working memory, processing speed etc.</li> </ul>	
		Continued on next page	

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Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
Likely to need assistive technology to support learning and recording of work. CYP may struggle to access text or record independently. For a <u>specific learning difficulty</u> significant and persistent discrepancies between different areas of cognition or a highly unusual profile of strengths and difficulties. Significant or severe difficulties in some aspects of cognitive processing will be present e.g. slow phonological processing, poor working memory, difficulties with audial and visual processing. These difficulties are likely to be long term/lifelong.		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Adults use the developmental level of language appropriate to the CYP in questioning and explanation.</li> <li>Assistive technology in place.</li> <li>The CYP's interests are taken into consideration when planning.</li> <li>Grouping</li> <li>Working on an individual, bespoke curriculum and so has a highly personalised timetable that includes time spent away from the mainstream class, as advised by appropriate involved professionals and informed by the voice of the CYP and family.</li> <li>The CYP is able to access the classroom curriculum for limited periods where they are able to experience success supported by a member of staff.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping (continued)</li> <li>At secondary this may also include small group or 1:1 withdrawal / specialist withdrawal, a significantly modified GCSE offer, specialist teacher training and/or increased adult:CYP ratio over that of a CYP at Level 3.</li> <li>Planned opportunities are provided for the CYP to be included with peers where the CYP is able to experience success.</li> </ul>	
		<ul> <li>Resources</li> <li>Effective use of personalised resources based on the CYP's interests</li> <li>Effective use of individual visual timetable per session or activity, e.g. start / finish, now / then which does require support to implement.</li> <li>Specialist equipment and technology specific to the CYP's learning need e.g. sloping board, dictation software, reading device/support, Clicker or Docs Plus etc. are in place.</li> </ul>	
		Continued on next page	



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources (continued)</li> <li>CYP's voice is communicated to all supporting so that everyone is aware of what works and what doesn't from the CYP's perspective, adaptations are made.</li> <li>Ongoing, specific training needs for staff are identified and sourced. Staff may be supported through working alongside specialists, either Outside Agency or from within School (though an appropriately qualified and highly skilled specialist).</li> </ul>	



#### 2 Cognition and Learning Level 5



The CYP will require constant support to access a flexible and responsive timetable planned to meet specific outcomes agreed by specialist practitioners / outside agencies, parents, CYP (if appropriate), and school staff. The CYP's needs are met through accessing a fully personalised timetable alongside highly skilled members of teaching staff.

<b>Provision:</b> Daily, specific specialised input at all times across all aspects of the curriculum		Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
Severe Learning Difficulties with low adaptive functioning/ Profound and Multiple Learning Difficulties Educational Psychology or medical cognitive assessments indicate profound and multiple learning difficulties. Severe level of cognitive impairment that is a lifelong disability and impacts on social development and independence. Severe impairment in adaptive functioning. Considerable difficulties with the acquisition and retention of use of language, literacy and numeracy despite relevant, focused small group and 1:1 intervention. Continued on next page	<ul> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> <li>An EHCP is likely to be in place to draw together information, advice, aspirations and planned outcomes</li> <li><u>Assessment tools as identified</u>, where and when they can be used to help unpick need and measure impact of support</li> <li>Multi agency planning, Outside Agency advice and recommendations are followed</li> </ul>	<ul> <li>There is agreement between professionals (Educational Psychology Service, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5.</li> <li>Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4.</li> <li>In addition, the following will be in place:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate</li> <li>Sensory exploration used to engage students with the world around them. The curriculum will maximise communication, creativity, specific interests, and life skills.</li> <li>Continued on next page</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Fusion SEND Hub/Learning Support Educational Psychology Service. Speech and Language Therapy Health Services if involved.



Bespoke Descriptor	Identification and Assessment	Teaching and Learning	Additional advice and support
Level 5		Strategies	
Will present with a very short		Adjustments to Teaching Methods	
attention span		(continued):	
May present with work avoidance		<ul> <li>Teaching approaches that place a high emphasis on direct</li> </ul>	
behaviours being frequently seen		training, are very finely graded	
Will find it difficult to follow 1-2 step		and offer multisensory tasks	
instructions and routines		which provide opportunities to	
		make progress towards planned	
A constant high level of support		outcomes. These will be	
needed to organise resources and/or		regularly updated to reflect the	
new activities		progress the CYP is making.	
Constant on-going level of support		An interactive, consistent, and	
for learning and personal/		repetitive approach is used to learning.	
social/emotional well-being and/or		<ul> <li>Tasks are structured carefully so</li> </ul>	
self-help and safety.		that they are relevant and	
		purposeful to maximise	
Adaptations for safety needed.		motivation and engagement.	
		<ul> <li>Additional adults support the</li> </ul>	
Cognitive and school assessment		CYP individually, under the	
indicate significant and persistent difficulties with several aspects of		direction of the teacher and other	
cognition e.g. memory, concept		key staff to:	
development, information		<ul> <li>work on highly modified curriculum tasks that are</li> </ul>	
processing, understanding,		meaningful and relevant	
sequencing and reasoning requiring		to the CYP	
significant alteration to the pace and		<ul> <li>access significant amount</li> </ul>	
delivery of the curriculum.		of individual support	
		sessions across each day	
		<ul> <li>encourage independence</li> </ul>	
Continued on next page		Continued on next page	



Bespoke Descriptor Ide Level 5	entification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Tasks are completed at a suitable and appropriate pace.</li> <li>The curriculum places an emphasis on identified holistic outcomes e.g. life skills, opportunity for the CYP to engage in community activity and to develop independence where appropriate.</li> <li>Multisensory cues to support all stages of delivery.</li> <li>Develop independent living skills as appropriate for the young person.</li> <li>Multi-sensory teaching and learning is utilised providing a wealth of varied sensory experiences within an active learning environment.</li> <li>If appropriate, a positive behaviour handling plan will be in place.</li> </ul>	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Grouping</li> <li>Working on an individual, bespoke curriculum and so has a highly personalised timetable, as advised by appropriate involved professionals and informed by the voice of the CYP and family.</li> <li>If able to access mainstream classes a high level of support will be provided to ensure this experience is meaningful and relevant.</li> <li>At secondary this may also include 1:2, possibly 1:1 withdrawal, a significantly modified GCSE offer, specialist teacher training and/or increased adult:CYP ratio over that of a CYP at Level 4.</li> <li>Planned opportunities are provided for the CYP to be included with peers where the CYP is able to experience success.</li> <li>Assistive technology to be utilised as advised by Specialist services.</li> <li>Continued on next page</li> </ul>	

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Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support
		<ul> <li>Resources:</li> <li>Effective use of personalised multisensory resources based on the CYPs interests.</li> <li>Effective use of individual visual timetable per session or activity, e.g. start / finish, now / then which does require support to implement.</li> <li>Specialist equipment and technology specific to the CYP's learning need e.g. sloping board, dictation software, reading device/support, Clicker or Docs Plus etc. are in place.</li> <li>Ongoing, specific training needs for staff are identified and sourced. Staff may be supported through working alongside specialists, either Outside Agency or from within School (though an appropriately qualified and highly skilled specialist).</li> </ul>	

#### 2 Cognition and Learning Screening and Assessment Tools

#### **Screening Tools**

- <u>Dynamic assessments</u> observable assessments to identify strengths and needs
- <u>Checklist for dynamic observation</u> a tool to explore how a CYP responds to a task
- Formative assessment for learning difficulties This tool helps you establish if there is a generalised learning difficulty.
- Independence and Functional Skills Checklist a checklist to determine functional skill development.
- Phonics screeners (DoE) to track phonic progress
- Birmingham Toolkit tracking tools to show levels of attainment and monitor progress
- Dyscalculia Screener screening tool to identify dyscalculia
- <u>Dyslexia screener</u> screening tool to identify dyslexia

#### **Assessment Tools**

The standardised assessments listed below are Qualification Level A, so can be administered by teachers.

- Ravens Matrices An assessment of nonverbal reasoning, observation skills and clear-thinking ability
- <u>Cognitive Abilities Tests</u> (CAT Test 4 for KS3 entry) Measures verbal, non-verbal, quantitative and spatial reasoning
- Working Memory Rating Scale Working Memory Rating Scale (WMRS) helps identify children with poor working memory skills.
- TOMAL- 2 a nationally standardised test for evaluating general and specific memory functions
- Dyslexia Portofilio Identifies dyslexic tendencies and recommends intervention strategies.
- <u>York Assessment of Reading Comprehension</u> (YARC) A reading assessment allows you to closely observe a pupil's reading behaviours, strengths and areas for development. It breaks down the components of reading so that you can target specific skills to bring about rapid progress.
- <u>Wide Range Achievement Test</u> (WRAT5) provides an accurate and easy-to-administer way to assess and monitor the reading, spelling, and maths skills, and helps identify possible learning disabilities
- Comprehensive Test of Phonological Processing (CTOPP 2) helps evaluate phonological processing abilities as a prerequisite to reading fluency.
- <u>Test of Word Reading Efficiency</u> (TOWRE2) a measure of an individual's ability to pronounce printed words and phonemically regular nonwords accurately and fluently
- Detailed Assessment of Speed of Handwriting (DASH) can be used to assess handwriting speed
- Hedderley writing speed norms
- Phonological awareness an assessment and intervention pack

#### 2 Cognition and Learning Interventions and Support



#### Interventions

#### <u>The school psychology service</u>

The intention of this resource is to examine the effects of targeted school-based interventions on the development of reading, spelling and writing. This 6th Edition provides information on intervention schemes for children and young people who struggle with reading, spelling, and/or writing. This resource reviews intervention schemes that have been devised to help struggling readers and writers and is intended to inform schools' and other providers' choices among such schemes. There is an obvious need for schools to have clear information in order to make principled decisions about which approach to adopt for children who experience difficulties in literacy.



## 2 Cognition and Learning PfA Outcomes and provision

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Reception to Y2 (5-7 years)	CYP will have the listening skills and concentration to increase the amount of time they are able to maintain focus upon learning tasks CYP will be developing early concepts of literacy and numeracy skills to enable them to lay the foundations of later learning. CYP will have an awareness of 'growing up', and beginning to have some ideas of what they would 'like to be', when they are older.	CYP will understand the concept of time and will develop the skills necessary to access digital and analogue clocks. CYP will understand the concept of cooking and the contribution of ingredients to produce different foods.	CYP will have an understanding of the concept of friendships and will be applying this in their approach to shared play with peers.	CYP will understand the concept of being healthy, including the benefits of exercise and making healthy food choices and will begin to apply this in the context of mealtimes and attendance at clubs and sports activities. CYP will understand the need for regular dental, vision and hearing checks to maintain good health.
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Scholl Age Ranges Guidance: Cognition and Learning.			

## 2 Cognition and Learning PfA Outcomes and provision continued

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	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Y3 to Y6 (8-11 years)	CYP will understand and be able to talk about different careers and education options so that they are able to make choices about what they will do next. CYP will begin to develop a profile of interests and aspirations in order to demonstrate individual strengths and skills.	CYP will understand the concept of money, demonstrating awareness that different objects are of different monetary values and beginning to use money to pay for items such as snacks in school. CYP will begin to understand concepts relation to travel and transport including paying for a ticket/pass, timetables, and road signs and will be aware of the role of these in facilitating independent travel. CYP will understand the concept of recipes relating to preparation of food and will be able to follow these with adult support to make simple foods (cupcakes, sandwiches etc.)	CYP will understand the importance of being safe within the local community, including online, and will begin to understand potential areas of risk, e.g. strangers, online hazards, bullying and ways to take steps to avoid these. CYP will be familiar with the local area, including particular places, routes of travel to enable them to begin to understand where they are going and methods to get there.	CYP will understand the purpose of vaccinations and will cooperate with these to ensure good medical health. CYP will understand changes to their body associated with puberty and will be aware of self-care routines required to maintain good physical health. CYP will understand minor health needs that they may have, asthma, eczema, difficulties with vision and/or hearing; they will understand the strategies and resources to manage these.
Provision	Please refer to detail provided within the Cognition and Learning.	ne Teaching and Learning Strategies an	d Curriculum/Interventions sections of the	ne School Age Ranges Guidance:

# 2 Cognition and Learning PfA Outcomes and provision continued



	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Y7 to Y11 (11-16 years)	CYP will be able to understand information relating to course options (GCSE, NVQ, Entry level qualifications, vocational options etc.) including the requirements for access to a range of HE options to enable realistic and informed choices. CYP will be able to think about subject option choices alongside longer term career goals and will be able to choose subjects and course options to enable next steps in their chosen direction. CYP will begin to think about and plan work experience/part-time opportunities to enable them to understand workplace demands and requirements and to gain early experience in areas of interest for future employment. CYP will continue to develop a profile of interests and achievements in order to demonstrate individual strengths and skills. This will be used in accordance with careers sessions and guidance. CYP will understand supported employment options e.g. Access to Work.	CYP will understand monetary value, how much money they have and how much money items cost, and will be able to make decisions in relation to what they spend their money on as a first step towards financial budgeting. CYP will demonstrate skills in accessing local transport services, buying a ticket/pass, understanding bus times, using these systems of travel to access school, for example. CYP will understand information relating to different food groups and meal planning and will be able to understand instructions within a recipe card/book to enable them to cook simple meals with support.	CYP will understand risks associated with social media, online gaming and online communities and will be increasingly competent in understanding how to keep themselves safe. CYP will understand social norms and conventions in relation to a variety of friendships and relationships and will be able to use this knowledge to enable them to engage appropriately within a range social contexts. CYP will understand options in relation to a range of leisure and social activities available and will be able to use this to make informed and positive choices about how they want to spend their free time. CYP will show increased understanding of the wider picture and will build resistance to support emotional wellbeing.	CYP will understand information relating to sex education and sexual health in preparation for adulthood. CYP will understand the role of the GP and the support available to them. CYP will understand the risks associated with drugs and alcohol and will apply information learned to keep themselves safe. CYP will have a more active role in understanding and managing more complex health needs to facilitate greater independence.

#### **3** Social, Emotional and Mental Health



All CYP will benefit from a whole school approach to emotional wellbeing to develop their emotional resilience and support their readiness to learn. Social and emotional difficulties can manifest themselves in different ways, including becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour.

To best support the CYP's needs it is important to understand the root of the concerns shown as these behaviours may reflect underlying:

- mental health difficulties
- learning difficulties
- physical symptoms or
- be in response to more social and environmental factors.

Assessments and strategies should align with the CYP's chronological age, developmental level and emotional age.

# **Ordinarily Available**

This is Universal Support – as part of the Graduated Response. See <u>assessment tools</u>, <u>interventions and further support</u> that supports your teaching practice.

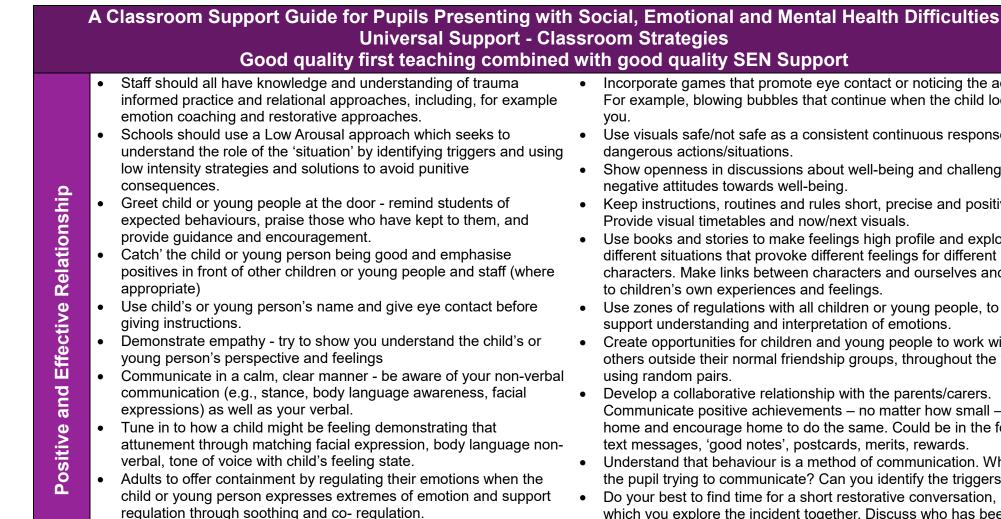
Ordinarily Available provision and teaching approaches for all learners with a recognition that some learners may require very time-limited support to secure effective application of skills and increase their engagement and access to all areas of school life. School will lead in this approach.

The table on the following pages references 4 key areas within Social, Emotional and Mental Health differences that would constitute reasonable adjustments if embedded within the classroom/school.



#### Social, Emotional and Mental Health 3 **Ordinarily Available continued**





Introduce items of high interest to the child that incorporate shared • play in a staged approach. For example, playing with the same toy alongside and progressing to playing with the same toy together in short turn taking activities.

- Incorporate games that promote eye contact or noticing the adult. For example, blowing bubbles that continue when the child looks to you.
- Use visuals safe/not safe as a consistent continuous response to • dangerous actions/situations.
- Show openness in discussions about well-being and challenge negative attitudes towards well-being.
- Keep instructions, routines and rules short, precise and positive. Provide visual timetables and now/next visuals.
- Use books and stories to make feelings high profile and explore different situations that provoke different feelings for different characters. Make links between characters and ourselves and link to children's own experiences and feelings.
- Use zones of regulations with all children or young people, to support understanding and interpretation of emotions.
- Create opportunities for children and young people to work with others outside their normal friendship groups, throughout the year. using random pairs.
- Develop a collaborative relationship with the parents/carers. • Communicate positive achievements - no matter how small - with home and encourage home to do the same. Could be in the form of text messages, 'good notes', postcards, merits, rewards.
- Understand that behaviour is a method of communication. What is • the pupil trying to communicate? Can you identify the triggers?
- Do your best to find time for a short restorative conversation, in which you explore the incident together. Discuss who has been affected, consider the impact of the incident, and agree what to do next. For example social stories.
- Children and young people are aware of who/when/where they can share any concerns with a trusted, named adult.

# **3 Social, Emotional and Mental Health Ordinarily Available continued**



Enabling Environment	<ul> <li>Refer children and young people regularly to expected behaviour in setting and use consistently – ensuring that supply staff apply same consistency.</li> <li>Make expectations for behaviour explicit by giving clear targets, explanations and</li> <li>modelling – don't assume that child and young people should 'know' what to do</li> <li>Provide visual timetables and task lists – may need to be for a short period of time</li> <li>Use a visual timer to measure and extend time on task – start small and praise, praise, praise</li> <li>Consider seating – children and young people seated at the back of the class may not be as tempted to turn around</li> <li>Allow student to have a safe place to store belongings</li> <li>Give the child or young person a classroom responsibility to raise self-esteem</li> </ul>	<ul> <li>Give the child or young person a classroom responsibility to raise self-esteem</li> <li>Play calming music where appropriate</li> <li>Create opportunities for regular revisiting and reinforcement of learning to maximise potential for the child to embed and build on that learning to be able to transfer skills. Develop a 'little and often' approach to interventions to incorporate overlearning and repetition.</li> <li>Develop engagement and motivation through developing provision that matches child's interest.</li> <li>Regular risk assessments in place. Use of visual prompts and consistent language throughout the setting to denote danger.</li> <li>Provide children and young people with territorial space, for example, their own sleep mat, peg, locker helping them feel that they belong by having routines and rituals, for example, welcome and departure songs and greetings.</li> </ul>
Access to Learning	<ul> <li>Give breaks between tasks and give legitimate 'moving around' activities</li> <li>Legitimise movement by getting children and young people to take a message, collect an item, use a 'stress ball' or similar if necessary</li> <li>Teach children and young people how to use post-it notes for questions and ideas rather than interruptions (when appropriate)</li> <li>Personalise teaching where possible to reflect children and young people's interests</li> <li>Allow additional processing time and time allowed to complete a task</li> <li>Provide short term, adult led individual support focusing on listening, concentration, social skills</li> <li>Provide preparation for any change and the need for clear routines including transition for example use of visual timetable.</li> <li>Use of photographs/stories to recall events. Home/setting diary. Objects of reference linked to experiences e.g. conkers from the park.</li> </ul>	<ul> <li>A quiet area may be useful for child or young person to work.</li> <li>A safe space for the child or young person to calm.</li> <li>Provide objects of reference/ visuals/signing so child or young person can indicate needs and wants.</li> <li>Use matching/sequencing games with small choice initially to help to develop categorising skills.</li> <li>Use transitional objects to help children and young people to self soothe if feeling anxious.</li> <li>Use <u>visual support</u> such as objects of reference/Visual cues/ parallel play/buddy system with adult support to help the child or young person to follow routines and structure sessions.</li> <li>Offer an 'Interest box' containing objects/toys/ activities that spark child's curiosity-use as calming tool or reward for engagement.</li> <li>Give a set time for written work and do not extend into breaks to 'catch up' – the child or young person will need these breaks</li> <li>Transition from whole class work to independent or group work is taught, clearly signalled and actively managed</li> </ul>

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#### **3** Social, Emotional and Mental Health Ordinarily Available continued



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ť	•	Check in and out daily with an adult. This helps the pupil prepare for the day ahead. Likewise, have closure on any issues that have	•	Encourage use of worry box or worry diary (in home or school) where the child or young person writes down or draws their worries,	
or		arisen throughout the day.		ensuring this is followed up by any specific adult in the appropriate	
dd	•	Use the SPENCE Anxiety Scale, Boxall Profile, Self-Image Profile or		setting daily.	
n		Strengths, Difficulties Questionnaire (SQQ's) as a holistic approach	٠	Give children and young people the opportunity for a short-managed	
S		to understanding the pupil's well-being.		time out, within an agreed space in the classroom, with support of a	
eted	•	Be aware of the individual's sensitivities to some environments in times of stress e.g., overcrowding		visual time. This will help them to begin to manage their emotions, when they start to escalate.	
ຼິດ	•	Short-term, goal orientated emotional literacy support, such as with	٠	Reduce demands temporarily in response to particularly challenging	
ອ		an Emotional Literacy Support Assistant.		times in their lives	
			٠	Regular contact with home to establish patterns of behaviour in	
				other environments as well as strategies being tried.	



## **3** Social, Emotional and Mental Health

#### Level 3

The CYP has social, emotional, mental health and / or behavioural needs which frequently impact on their engagement with day-to-day activities, their readiness to learn and their relationships with peers and adults. Or the CYP may show behaviours which less frequently but greatly impacts on themselves and others. Despite the challenges it is vital vulnerable CYPs feel welcomed in school, key relationships are built, and proactive support is available to help them manage their emotional regulation through a combination of whole school, class, small group and individual activities.

<b>Provision:</b> Some targeted and individual interventions over the week		Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
The CYP shows <b>Frequent/Moderate</b> (more than once weekly) difficult behaviours such as: May have difficulties with social interaction- deteriorating relationships with adults and/or peers. May show increasingly withdrawn	An assessment, to best understand the CYP's needs and strengths should be conducted including a formulation and intervention plan, shared with key staff, which is reviewed regularly to evaluate progress. Utilise the assessment toolkit to check for underlying needs such as:	These CYPs will benefit from a trauma informed whole school approach. They need the opportunity to build trusted relationships with a small number of key staff, not an individual member of staff, and then, when possible, this should be extended. Staff should consider and implement as appropriate:	Access to additional resources is sought from the Local Authority SEND Manager <u>Early Help</u> -Multi-agency planning processes specify contribution of individual services and lead practitioner. Inter-agency communication established and maintained
OR disruptive behaviour over a period or may involve a sudden change in behaviour Struggles to engage in some learning – struggles to emotionally regulate, showing increasingly withdrawn or disruptive behaviour. May show some struggles during periods of transition (e.g. meltdowns, refusal to begin or end a task, appears lost)	<ul> <li>Communication difficulty</li> <li>Sensory difficulty</li> <li>Learning difficulty</li> <li>Developmental delay or disorder</li> <li>Family stresses</li> <li>Specific stressor within school environment</li> <li>Recent traumatic event</li> <li>Historic trauma</li> <li>Mental health concerns</li> </ul> Continued on next page	<ul> <li>Consideration of an alternative differentiated curriculum that allows flexibility to teach according to emotional needs, not chronological age, using vehicles such as IT, play, creative activities, drama.</li> <li>Modifications to timetable may include, e.g. off-site activities, meet and greet, delayed start time, adjustment to access arrangements.</li> <li>Person Centred Planning such</li> </ul>	Educational Psychologist May make use of Locality Panels – Stage 1 or 2 (if Applicable) Referral to <u>Primary Inclusion Panel</u> Referral to <u>Secondary Inclusion</u> <u>Panel</u> <u>More information</u> – under Inclusive Practice Tab
Continued on next page		as MAPS and PATHS Continued on next page	Continued on next page



### 3 Social, Emotional and Mental Health Level 3 continued



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
Inappropriate and/or risk-taking behaviours may be witnessed	Screening tools and / or assessment tools as identified	Whole school approaches to Nurture. Think Structure, Relationship, Emotional Regulation	Alternative Provision for part of the week – contact the <u>Progressions</u> Team
May have low level self-harm Anxieties about body image	<ul> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> </ul>	and what would further support the CYP across these areas:	<u>Virtual School</u> involvement for a LAC from day 1 of an exclusion must be
May have compulsive or obsessive habits	<ul><li>CYP Progress meetings</li><li>CYP/Young Person voice</li></ul>	<ul> <li>Structure:</li> <li>Access to a safe base in school</li> </ul>	in place SALT
May have lack of energy	<ul><li>One Page Profile/Learner Profile</li><li>Parent/Carer voice</li></ul>	<ul> <li>Positive Handling Plan</li> <li>Flexible, pre-agreed approaches are used by all staff and the CYP,</li> </ul>	Mental Health Support Team
Could be described as low in mood Can be uncommunicative –	An <u>Extended Support Plan</u> may be in place to draw together information, advice, aspirations and planned	<ul><li>e.g. the use of a time-out card as a means of self-regulation.</li><li>Personalised reward systems,</li></ul>	CAMHS Consultation or referral.
struggles to contribute. Or can seem overly keen, regularly interrupts, impulsive.	outcomes.	involving regular monitoring, feedback and support, are known by all staff in school and	Support from a range of organisations can be found at Sheffield Menal Health Guide
May show non-compliance with adult	Multi agency planning, Outside Agency advice and recommendations are followed	are implemented consistently across the curriculum.	Fusion SEND Hub/Learning Support
requests. May communicate	Access arrangements considered	<ul> <li>Use of behaviour targets within the classroom/playground</li> <li>Mainstream class with regular</li> </ul>	
little regard for school rewards and consequences.		targeted small group support such as school-based nurture provision.	
Might struggles with attendance and/or punctuality.		<ul> <li>The CYP is actively involved in monitoring their own targets</li> </ul>	
May have differences in chronological and developmental age in social and emotional		1:1 teaching for the introduction of new concepts and the reinforcement of classroom	
development. Continued on next page		routines and expectations Continued on next page	

## 3 Social, Emotional and Mental Health Level 3 continued



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
May have experienced a number of Adverse Childhood Experiences (ACES) May experience other risk factors (e.g. asylum seeker, in local authority care, minority status or developmental issues). Inappropriate language /communication (inability to adapt to context). May show bullying behaviours or be the victim of bullying. May be at risk of fixed term exclusion.		<ul> <li>Structure (continued):</li> <li>Breakfast club</li> <li>Lunchtime club</li> <li>Short-term individual support within class and unstructured activities.</li> <li>Relationship: <ul> <li>Regular pro-active check ins with key staff in school - frequency negotiated depending on CYP' s needs.</li> <li>Regular 15-minute breaks could be offered to the CYP across the school day with key staff (attachment figures) to help to maintain their ability to regulate informed by Dan Hughes PACE principles (Playfulness, Acceptance, Curiosity and Empathy)</li> <li>Regular check-ins from school staff with parent /carers so CYP has an experience of wrapped around care.</li> <li>Access to staff in school with experience of SEMH, lead behaviour professional, SENDCo, working with the teacher, to develop the CYP's strategies and skills.</li> </ul> </li> </ul>	

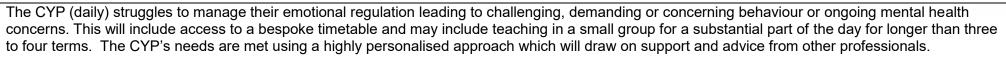
### 3 Social, Emotional and Mental Health Level 3 continued

Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Relationship (continued):</li> <li>Trusted adults offer support at vulnerable times using preagreed strategies</li> <li>Increased access to individual, small group and whole class activities to promote and develop social skills, emotional regulation and self-esteem in order to address SEMH targets. (e.g. Talkabout by Alex Kelly)</li> <li>Access to additional circle time activities, e.g. Silver SEAL</li> </ul>	
		<ul> <li>Emotional Regulation:</li> <li>Strategies developed alongside CYP and shared with school staff, parent/carer such as My Anxiety Plan (MAP) created alongside Educational Psychologist</li> <li>Sensory circuits</li> <li>Use of feelings diary/ logs.</li> <li>Therapeutic Stories e.g. Margot Sunderland books.</li> <li>Approaches to managing anger such as 'Starving the anger/anxiety gremlin' and 'There's a Volcano in my Tummy'</li> <li>Therapeutic approaches (e.g. Think Good Feel Good)</li> <li>Mighty Minds/FRIENDS</li> </ul>	



## **3** Social, Emotional and Mental Health

#### Level 4



Provision: Frequent, specific specialised input		Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
CYP shows <b>Consistent/Severe</b> (daily) emotional distress over a sustained period of time which may	Increased involvement of a range of professionals to provide assessment, formulation and	As for Ordinarily Available and Level 3 whilst also including:	May make use of Locality Panels – Stage 1 or 2 (if Applicable)
be internalised or externalised and some behaviours will be clearly	intervention plans e.g. Inclusion Panel, mental health professionals,	Close liaison with parents and carers	Referral to Primary Inclusion Panel
observable whilst others will be hidden, such as:	EPs	Staff should consider and implement as appropriate:	Referral to <u>Secondary Inclusion</u> <u>Panel</u>
May lack motivation to engage in preferred interests (and may appear withdrawn, sad or angry)	Consider CYP's experience of Adverse Childhood Experiences alongside what protective factors the CYP has available to them	<ul> <li>Regular check in with CYP with key staff</li> <li>The CYP is supported in mainstream activities that they</li> </ul>	<u>More information</u> – under Inclusive Practice Tab
May have thoughts of suicide or self- harm	Screening tools and / or assessment tools as identified	<ul> <li>do attend.</li> <li>1:1 / group work addresses targets as outlined on CYP's</li> </ul>	Educational Psychology Mental Health Support Team
May shows signs of self-neglect (e.g. self-care)	Observation	<ul><li>Extended Support Plan/EHCP.</li><li>Daily implementation of</li></ul>	Locality SENCo Networks
Extremes of mood and behaviour	<ul><li>Data tracking</li><li>Teacher assessments</li></ul>	approaches towards meeting the individual's SEMH targets which	GP
might be witnessed Might have strict habits or routines around food	<ul> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> </ul>	have been identified through the use of appropriate assessment data, e.g. Motional, SCERTS, Boxall, SDQ, B2 or Locke & Beech.	Continued on next page
May have weight changes			
Continued on next page	Continued on next page	Continued on next page	

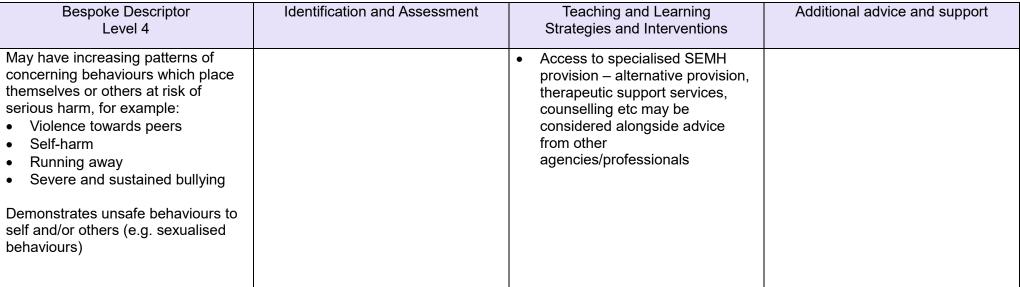


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#### 3 Social, Emotional and Mental Health Level 4 continued

Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning rategies and Interventions	Additional advice and support
Young person may indicate they are feeling constantly 'on edge'	An <u>Extended Support Plan</u> may be in place to draw together information, advice, aspirations and planned	-site activities, meet and eet, delayed start time, ustment to access	May have support from specialist services such as <u>CAMHS</u> ,
Crisis behaviours escalate rapidly due to fluctuating triggers	outcomes. Multi agency planning, Outside	angements cess to a completely bespoke etable, designed to mitigate	<u>Social Care,</u> <u>Ryegate Children's Centre</u> <u>Community Youth Teams</u>
May engage in drug and alcohol misuse	Agency advice and recommendations are followed	ssible triggers which leads to reased success with regard to gagement, access and	If at risk of life-threatening self-harm CYP should be seen by their GP or if
May report seeing or hearing things that other people cannot see or hear (hallucinations) and believing things	Access arrangements considered	ilience. P taught for a significant ount of the time in small	urgent assessment is required, A&E Specialist Training:
that are not actually true (delusions). Behavioural incidents and fixed term		ay from the mainstream class	Trauma informed training Positive Handling Strategies – <u>Team</u>
exclusions increasing, leading to a high risk of permanent exclusion		here they are able to perience success supported a member of staff.	<u>Teach.</u> <u>Healthy Minds</u> training and
There might be a sustained non- engagement in school life		nned opportunities are wided for the CYP to be	resources Fusion SEND Hub/Learning Support
Inability or complete refusal to follow school routines and instructions		luded with peers where the P is able to experience ccess.	
Sporadic engagement with school rewards and consequences		e CYP has access to staff with perience and training in peting the needs of students	
May have increasing difficulties in forming positive relationships, interacting appropriately with adults		h SEMH, working on modified istic curriculum tasks and key Ils – including structured	
and/or peers Continued on next page		erventions as advised by ernal agencies. nued on next page	

#### 3 Social, Emotional and Mental Health Level 4 continued





### 3 Social, Emotional and Mental Health Level 5



Severe and persistent behaviour, emotional regulation, or mental health needs (associated with level four) which means the CYP is struggling to function adequately during the school day on a lesson-by-lesson basis. Poses high risk to self and / or others. Some of this behaviour will be clearly observable and other behaviours will be more 'hidden' (e.g. they may appear withdrawn). The CYP's specified outcomes might be met within a specialist setting alongside agreement with professional outside agency advice, parents, CYP, locality SEN manager and school staff, possibly with ongoing contact from mainstream school.

<b>Provision:</b> Daily, specific specialised input at all times across all aspects of the curriculum		Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
CYP shows <b>Persistent/Profound</b> behaviours associated with Level 4 and emotional distress (more than once a day) over a sustained period of time as well as: Severe and persistent mental health concerns which severely impact on everyday functioning or extremely challenging, demanding or concerning behaviour / emotional regulation difficulties Poses high level risk to self and/or others. Known risk re sexual exploitation or gang affiliation. Behavioural incidents and fixed term exclusions have increased despite appropriate provisions made at Level 4. High risk of permanent exclusion	CYP's needs are either known or under active assessment. Agreement from Outside Agency professionals, Local Authority representatives and staff that the CYP requires access to specialist provision for SEMH/SEN. A range of appropriate professionals are involved. Will normally have an EHC Plan	<ul> <li>There is agreement between professionals (Educational Psychology Service, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5.</li> <li>Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4.</li> <li>In addition, the following will be in place: <ul> <li>A higher staff: CYP ratio enabling access to a personalised holistic curriculum.</li> <li>Specific, specialist provision to target identified SEMH and / or behaviour needs.</li> <li>The CYP accesses a completely individualised curriculum</li> </ul> </li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable) Educational Psychology May have support from specialist services such as: <u>CAMHS</u> , <u>Social Care,</u> <u>Ryegate Children's Centre</u> <u>Community Youth Teams</u> If at immediate risk of harm CYP should be seen at A&E or by a GP.
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#### 3 Social, Emotional and Mental Health Level 5 continued

Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
School refusal Inability or complete refusal to follow school routines, instructions or access timetable Mainstream setting has a detrimental effect on health and well- being		<ul> <li>Small group working with highly skilled staff,</li> <li>Planned opportunities to access specific individual programmes of support, where the CYP's needs allow them to do so, are used to target particular outcomes.</li> </ul>	



#### 3 Social, Emotional and Mental Health Screening and Assessment Tools

#### **Screening Tools**

- Make use of screening tools in other areas of needs to explore if the CYP has an unidentified need.
- <u>Strengths and Difficulties Questionnaire</u> The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioural screening questionnaire about 2-17 year olds.
- <u>Coventry Grid</u> Coventry Child and Adolescent Mental Health Services (CAMHS) has developed the Coventry Grid: ASD vs Attachment Problems to try to identify differences between the two groups and so assist in differential diagnosis.

#### **Assessment Tools**

- <u>ABC analysis</u> An <u>ABC</u> behaviour chart is an observation tool that helps to understand the causes of <u>behaviour</u> which may present as challenging, by recording what happened before, during and after the behaviour. It helps <u>teachers</u>, parents and carers to track the behaviours of children and pupils.
- <u>Adverse Childhood Experiences</u> The concept of adverse childhood experiences refers to various <u>traumatic events or circumstances affecting children</u> before the age of 18 and causing mental or physical harm.
- A <u>BOXALL</u> profile is an evidence based tool supporting a whole school approach to assessing and addressing children and young people's social, emotional and behavioural development to positively impact learning, behaviour, attendance and wellbeing.
- Boxall profile at a glance
- MOTIONAL Motional is a suite of evidence-based, easy-to-use tools designed to measure, positively impact, and report on emotional health
- <u>Measures of Children's Psychological Wellbeing</u> (seven areas Belonging, Distress, Enjoyment, Healthy Living, Resilience, Responsiveness and Social Behaviour).
- <u>https://www.sheffieldchildrens.nhs.uk/services/camhs/healthy-minds/</u>
- <u>PIVATS</u> The PIVATS PSED provides a structured approach to assessing, planning for a measuring small steps in progress in the areas of personal, social and emotional characteristics of their development.



#### 3 Social, Emotional and Mental Health Interventions and Support

# C

#### Interventions

- CAMHS Healthy Minds Resources and Training
- <u>Nurture</u> A nurture group is a focused, short-term intervention for primary or secondary school pupils with social, emotional and behavioural difficulties which make it harder for them to learn in a mainstream class.
- <u>FRIENDS</u> The FRIENDS programs are a suite of Australian-developed, cognitive behaviour therapy (CBT) based programs designed to build life-long resilience in individuals, families, schools and communities.
- Restorative approaches
- Forest Schools Forest School is a child-centred inspirational learning process, that offers opportunities for holistic growth through regular sessions.
- Zones of Regulation A Social Emotional Learning Curriculum and Regulation Program
- The Incredible 5 point scale Teaches social and emotional information by dividing the concept into parts for children
- <u>Trauma Informed Schools</u> passionate about changing children's lives through inspirational training for schools and communities, ensuring mentally healthy cultures for all.
- Therapeutic Stories e.g. Margot Sunderland books.
- Books such as 'Starving the anger/anxiety gremlin' 'There's a Volcano in my Tummy' Kate Collins Donelly
- Mighty Minds
- Think Good Feel Good Think Good -- Feel Good is a practical resource for undertaking CBT with children and young people.
- <u>Talkabout</u> Talkabout is a complete programme for developing self-esteem, social and friendship skills. It is based on teaching children or young adults in groups in school or college but can be adapted for 1:1 sessions.
- <u>Emotional Based School Avoidance Guidance</u> This document has been written for school staff and other professionals to provide information and guidance on how to support children, young people and their families experiencing Emotionally Based School Avoidance (EBSA). It also contains leaflets for children and young people (CYP) and parent carers.

#### 3 Social, Emotional and Mental Health PfA Outcomes and provision

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Early Years (0-4 Years)			CYP will have social skills necessary to facilitate shared play and interaction with peers, developing a growing awareness of friendships to support emotional wellbeing and self-esteem. CYP will be able to recognise indicators of basic feelings in peers (happy and sad) and with support and modelling will respond accordingly at their developmental level (giving a hug to a peer who is crying for example) With prompting, CYP will begin to develop an awareness of basic social conventions in interaction with other, for example, using please and thankyou when asking for or receiving things from others onths) upon transition from Early Years to s, Self Confidence and Self Awareness	
	http://www.primaryresources.co.uk/fou	ndation/docs/devmatters tracking 2012	2.doc	
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Early Years Ranges Guidance: Social, Emotional and Mental Health.			



#### 3 Social, Emotional and Mental Health PfA Outcomes and provision continued

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
to Y2 rs)	CYP will interact with peers and begin to form friendships to support emotional wellbeing.	CYP will show awareness of independent living skills (cooking, cleaning, DIY) and will extend and develop these through real world play	CYP will interact with peers and begin to form friendships with peers to support emotional wellbeing. CYP will maintain positive emotional	CYP will attend necessary dental, medical and optical checks following parental direction and supervision. CYP will cooperate with self-care
Reception to (5-7 years)		CYP will be able to access the dining hall alongside peers, following social routines in relation to seating and	wellbeing through participation in team games, after-school clubs and weekend activities.	and personal hygiene routines with prompting and adult support as required.
Rec		turn taking, and will be able to make appropriate choices in relation to meals	CYP will begin to identify bullying in relationships and will be able to seek adult support.	CYP will have the support and strategies required to promote resilience and emotional wellbeing.
	CYP will interact with peers, making and maintaining friendships with others to support emotional wellbeing.	CYP will be able to maintain friendships with peers and access community based clubs/after school clubs to promote independence and	CYP will maintain friendships with peers to support emotional wellbeing and avoid isolation.	CYP will understand physical changes associated with the onset o puberty and will manage these appropriately, with support as
to Y6 years)	CYP will be aware of structures in place to support social and	emotional wellbeing.	CYP will begin to identify bullying within relationships and will be able to identify support and strategies to	required, maintaining social and emotional wellbeing.
Y3 to (8-11 ye	emotional wellbeing and will access these as required.	necessary to facilitate participation in sleepovers and residential trips.	manage this. CYP will be able to manage social	With support, CYP will access strategies to manage any emotional or mental health needs associated
8)	CYP will show awareness of different feelings and emotions and	CYP will be able to manage their feelings and emotions, accessing	and emotional responses to change.	with their physical or mental health conditions/diagnoses.
	with support will identify and apply appropriate strategies to manage these.	support to apply strategies as appropriate.	CYP will be aware of strategies and precautions to remain safe online.	
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Early Years Ranges Guidance: Social, Emotional and Mental Health.			

#### 3 Social, Emotional and Mental Health PfA Outcomes and provision continued

		PfA Ou	tcomes	
	Employability/Education	Independence	Community Participation	Health
Y7 – Y11 (11-16 years)	CYP will have acquired the necessary social skills in order to interact with employers, clients and peers within the workplace within the context of work experience, voluntary work or part-time employment. CYP will be able to form friendships in the context of education or employment to facilitate emotional wellbeing. CYP should be aware of structures in place to support social and emotional wellbeing and will access these as required. CYP will show awareness of different feelings and emotions and, with support, will identify and apply appropriate strategies to manage these.	CYP will have an awareness of boundaries and social conventions with respect to different relationships and social situations, including online. CYP will begin to show awareness of potential abusive and exploitative behaviour in others and with support and guidance will be able to make safe choices. Young person will begin to make choices to include money, food, exercise, opportunities to socialise, form relationships with others, to support the development of confidence and emotional wellbeing.	CYP will maintain friendships with peers to support emotional wellbeing and avoid isolation. CYP will maintain positive emotional wellbeing through participation in community based activities and socialisation with peers within the community in accordance with their own personal choices. CYP will have an awareness of boundaries and social conventions within a range of relationships and social contexts, including online. CYP will show increased awareness of the bigger picture and will build resilience to support emotional wellbeing.	CYP will have an understanding of sex education and the social and emotional implications of intimate relationships. The CYP will have strategies and resources to support them to maintain positive mental health and emotional wellbeing. The CYP will understand the social and emotional implications of spending too much time on electronic devices and will recognise the importance of sleep and 'down time' in supporting social and emotional health and wellbeing. CYP will access strategies and support, as required, to manage any emotional of mental health needs associated with their physical or medical health conditions/diagnoses.
Provision	Please refer to detail provided within the Social, Emotional and Mental Health.	he Teaching and Learning Strategies an	d Curriculum/Interventions sections of the	9



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

#### **Ordinarily Available**

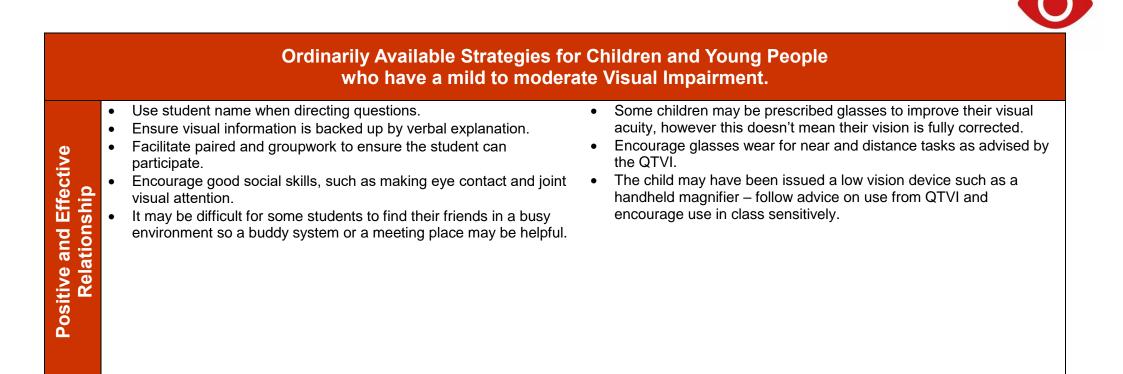
This is Universal Support – as part of the Graduated Response. See <u>resources</u> that supports your teaching practice.

Ordinarily Available provision and teaching approaches for all learners with a recognition that learners with a mild to moderate vision impairment will require low level adjustments to secure effective visual access to their learning as advised by a Qualified Teacher of Vision Impairment (QTVI). In addition to these adjustments students will require a functional vision assessment with updated advice form the QTVI relating the child's specific eye condition at transition points. The school would be responsible for following and implement any advice given by the QTVI. The document below, references the 4 key areas of need that would constitute reasonable adjustments if embedded within a classroom/class team as part of Universal Support.

Visual acuities ranging from 6/12 – 6/24, or other visual factors such as visual field loss and cerebral vision impairment.

The table on the following pages references 4 key areas for Visual differences that would constitute reasonable adjustments if embedded within the classroom/school.





Ensure the student knows their way around key areas of school eg. Ensure good lighting without glare, avoiding glare from windows ٠ Dining room, learning centre social /recreational areas. controllable with blinds. Enabling Environments Ensure the child is made aware about any changes to room layout. Signage should be clear and accessible. ٠ ٠ Ensure all equipment and storage in classroom is labelled clearly. For out of school activities ensure the child is named on any risk • (School Building) Make the classroom environment/layout consistent. assessment taking into consideration the implications of their eye • Aim to keep walkways as clear as possible, coats hung up etc. condition. ٠ Make sure the light is good but avoid glare from windows Displays should be bold, have good contrast and should be at eye • • level if possible. Aim to keep walkways as clear as possible, coats hung up etc. A coat peg at the beginning or end of the row will help towards Outside areas - Changes in levels, stair nosing well highlighted. ٠ independence.

- Make sure the light is good but avoid glare from windows.
- Ensure the IWB is clean and clear of clutter. Use a black pen for teacher scribe and ensure writing is legible, printed and well spaced.
- When speaking to the class or group it is best not to stand with your back to a window
- Reinforce key information breaking it down into manageable, chunks as it may take longer to read/process information.
- Ensure optimum seating position is provided relative to eye condition. (As advised by QTVI)
- Clear and clutter free learning resources in a minimum of font 14 preferably Arial or something similar.
- Enlarging text to A3 to enable print access increases the viewing distance therefore students should fold the page and read as two A4 landscape sections).
- Using a black handwriting pen or 6B pencil may be helpful for students to read back handwritten work.

- Use of low-tech devices as advised by QTVI may be useful, these may include hand held magnifiers and sloping board.
- Provide the student with their own copy of learning material.
- Ensure exemplar work is accessible to the student particularly when using visualiser to display student work.
- For teacher demonstrations, ensure that the student is standing close to you and can see clearly.
- When using the interactive whiteboard, turn off lights to improve the contrast.
- All children with a VI will experience visual fatigue, they may need extra time and short breaks to complete lesson activities. ICT: Ease of Access settings may be used if the student is struggling to access the digital screens eg. mouse pointer /icons.

A child with a VI would be entitled to 25% additional time for examinations. The QTVI can provide a letter to evidence the need for this.

- Facial expression and body language can be difficult to interpret. Verbalise instructions and feelings clearly.
- Verbalise responses from other class members to encourage participation as they may not be able to see peer interactions or responses to questioning across the classroom.
- For groupwork, pair up child with positive peers to support and facilitate the child's engagement and inclusion in the activity.
- Children can become self-conscious or socially isolated due to feelings about their sight loss. It may be useful to liaise with QTVI on opportunities available to them to meet /interact with other children and young people who have a vision impairment.
- Encourage the child to self-advocate and be positive about their vision impairment. Children for example with Nystagmus could adopt an adapted head posture to maximize their vision which may make them feel self-conscious.

### 4A Sensory and Physical: Visual Impairment Level 3



The CYP is diagnosed as having moderate to severe vision loss (within the range of 6/24 to 6/60). The CYP may need to use assistive technology to enable access to large print and the school the curriculum. The CYP will need access to short term programmes of habilitation training where necessary to ensure age related levels of independence are maintained.

<b>Provision:</b> Some targeted and individual interventions over the week		Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
Vision loss classified as moderate/severe. Visual acuities within range of 6/24 and 6/60, or other visual factors such as cerebral vision impairment or visual field loss that leads to significant loss of visual functioning. Children and Young people may have a vision condition which can fluctuate or is degenerative where regular monitoring of visual function is needed.	Children and Young People have been referred to Vision Support Service because they have a clinically diagnosed vision impairment. Once the referral is accepted the QTVI will carry out an initial assessment which will include speaking to parents, all involved with the child and a Functional Vision Assessment (FVA). At this point the QTVI will interpret clinical information and advises on strategies to support use of residual vision, and any compensatory strategies needed. The QTVI will then determine what level of support is needed from the Vision Support Service. The child or young person may also be referred to a Registered Habilitation Specialist for further assessment of mobility and independent living skills. If a child or young person is allocated <b>level 3</b> , they will also require at least annual FVA to offer updated advice the school setting, and ongoing monitoring visits from the QTVI to	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate:</li> <li>All of above but may also need assistive technology to access everyday learning tasks and or large print learning resources to enable full access to curriculum.</li> <li>Differentiation may be necessary considering pace of learning and visual presentation of learning materials.</li> <li>Will require regular monitoring visits from QTVI with delivery of short term intervention programmes where necessary.</li> <li>Will require assessment and advice from Habilitation Specialist and may need short term programme of mobility training.</li> <li>Environmental audit provided by Habilitation Specialist necessary to</li> </ul>	Assessment of functional vision by a QTVI on at least an annual basis. <u>Advice from a QTVI</u> Bespoke training around individual's needs. Regular monitoring of curriculum access and CYP progress. Habilitation input as required and advised by a QTVI. May make use of Locality Panels – Stage 1 or 2 (if Applicable)

advise on appropriate strategies and identify	assess accessibility of school
as and when intervention is needed.	environment.
	Teaching approaches place an
	emphasis on independent learning.
	<ul> <li>ICT equipment may enhance access</li> </ul>
The need for targeted short term intervention	to learning e.g. iPad linked to
programmes are likely to develop specialist	interactive whiteboard or enlarged
skills outlined in the Curriculum Framework	print electronic resources on iPad or
for Vision Impairment. See: Curriculum	kindle as advised and provided by
Framework for CYPren and Young People	Vision Support Service
with Vision Impairment   RNIB   RNIB	Advice from specialist teacher is
	implemented in the classroom with
Access arrangements considered and	regular liaison between QTVI, class
evidence provided by QTVI.	teacher and/or SENDCo.
	Positive learning environment that
Observation	encourages CYP confidence to use
Data tracking	low vision aids such as magnifier or
Teacher assessments	specialist ICT.
CYP Progress meetings	Equality of access may mean that
CYP/Young Person voice	they need to do some things
One Page Profile/Learner Profile	differently.
Parent/Carer voice	CYPs are taught strategies and
	provided with resources to assist with
An Extended Support Plan may be in place to	the development of independent
draw together information, advice, aspirations	learning
and planned outcomes. At this level the	Exam access arrangements will
Vision Support Service QTVI should be	include 25% additional time and may
involved in the writing and termly review	include enlarged or Modified Large
process. If short term intervention is delivered	Print test paper. Use of low tech or IT
by the Vision Support Service outcomes set	equipment such as magnifier,
by the QTVI or Habilitation Specialist should	enlarged protractor, sloping board,
be incorporated into the Plan.	task lighting or use of IT.
	Model and practice ways children
Multi agency planning, Outside Agency	and young people can express their
advice and recommendations are followed	feelings and emotions – this might
	need teaching explicitly.
	Continued on next page



#### 4A Sensory and Physical: Visual Impairment Level 3 continued

Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued):</li> <li>Promote activities that help Children and young people develop confidence and a positive self-esteem.</li> <li>Create opportunities which will deliberately develop a CYP or young person's independence.</li> <li>It may be difficult for the CYP or young person to recognise who is speaking, and to whom. Say the CYP's name and who you are.</li> <li>Facial expression and body language won't be easily seen. Verbalise instructions and feelings clearly.</li> <li>Grouping:         <ul> <li>As advised by the VI team</li> </ul> </li> <li>Resources</li> <li>Technology used to access curriculum tasks such as producing written work in class or viewing interactive whiteboard or lesson resources via iPad. Use of specific software such as screen reader or magnification to support access to learning materials.</li> <li>Continued on next page</li> </ul>	

Resources (Continued)
Modified large print resources
printed or electronic – Use of
RNIB book share to access
downloadable large print texts.
Resources to develop
independent living skills as
directed by the VI team.
Summary of provision from Vision
Support Service:
Service provision of assistive
technology when appropriate to
support independent access to
curriculum.
Mobility assessment where
necessary and short-term
programme of habilitation
training and/or independent living
skills, where necessary to ensure
age related levels of
independence are maintained.
Regular bespoke CPD training
offer taken up by school to raise
awareness of different types of
vision impairment and strategies
to reduce barriers to learning.
Peer awareness training with     student's class.
The school SENDCo must have
completed Level 1 Vision
Awareness training. Please email
Vision Support Service for further
information.
visionsupport@sheffield.gov.uk

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#### 4A Sensory and Physical: Visual Impairment Level 4 and 5

CYP is diagnosed as having a severe to profound vision loss (from 6/60 to acuities less than 6/120). The CYP needs access to specialist provision within a mainstream setting and will require significant adaptations of materials including modified large print or Braille, tactile and specialist technology. The CYP will need to access the CFVI curriculum alongside the school curriculum and will also require modified large print or braille, tactile and multisensory resources to assist their learning. The CYP will require ongoing formal training in the development of mobility, orientation and independent living skills to enable them to live as independently as possible. Adults will support as necessary to meet health and safety needs and risk management.

<b>Provision:</b> Frequent, or daily specialist input across all aspects of the curriculum, alongside explicit intervention teaching of specialist learning skills such as braille and habilitation curriculum to ensure preparation for adulthood is achievable.		Reviews: 3 per year	Documents: EHC Plan
Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
Vision loss is classified as severe to profound with acuities from 6/60 to less than 6/120, with other visual factors such as cerebral vision impairment or visual field loss that leads to severe or profound loss of visual functioning. Children and young people would have needs that require regular specialist teaching and a package of support in their educational setting from the Vision Support Service.	Children and Young People have been referred to Vision Support Service because they have a clinically diagnosed vision impairment. Once the referral is accepted the QTVI will carry out an initial assessment which will include speaking to parents, all involved with the child and a Functional Vision Assessment (FVA). At this point the QTVI will interpret clinical information and advise on strategies to support use of residual vision, and any compensatory strategies needed. The QTVI will then determine what level of support is needed from the Vision Support Service.	Ordinarily Available provision with specific reference to vision loss whilst also including bespoke package of support from Vision Support Service. There is agreement between professionals (Qualified Teacher of Vision Impairment, Educational Psychology Service, Local Authority) that the CYP's needs and provision in place constitute a Level 5. <b>Adjustments to Teaching Methods</b> • Awareness that a CYP may need more time to complete tasks and that equality of access may mean that they need to do some things differently	EHCP Vision Support Service Personalised Support Plan outlining provision from the Service will be used to support the CYP in their school setting. A placement in a Resourced, Provision may be offered at Secondary at Tapton School Integrated Resource. For primary age phase – Resourced Provision will be provided in Child's local school by the Vision Support Service, to ensure the student's is fully included in the school community and has the right support to enable them to fully access the school curriculum. <u>Vison Support Service</u>

<ul> <li>The child or young person may also be referred to a Registered Habilitation Specialist for further assessment of mobility and independent living skills.</li> <li>If a child or young person is allocated level 4 or 5 a support package of provision will be agreed and put in place in the child's educational setting. At Secondary they may be allocated a place at Tapton School Integrated Resource provision will be put in place at the child's local school by the Vision Support Service.</li> <li>A QTVI will need to deliver weekly teaching of specialist skills such as braille or interpreting tactile diagrams to support independent learning and access to all areas of curriculum.</li> <li>A Registered Habilitation Specialist will need to deliver regular blocks of mobility training incorporating long cane skills and independent living skills.</li> <li>Regular assessment of functional vision, monitoring of progress and access to all curriculum areas by a Vision Support Teacher.</li> </ul>	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Differentiated questioning and explicit language used to explain whole class responses.</li> <li>Teacher sharing class planning to ensure that adaptations can be made and lesson resources in required format can be produced and available each lesson.</li> <li>Intervention teaching from Qualified Specialist teacher to teach specialist skills alongside mainstream curriculum.</li> <li>CYP working with braille and tactile learning resources that will need additional differentiation to consider pace and complexity of tactile learning.</li> <li>Ongoing communication needed on lesson planning and assessment between classroom teacher and QTVI to ensure access to all aspects of learning.</li> <li>Regular consultation with QTVI about curriculum delivery to ensure CYP can fully access all curriculum areas, and specialist intervention teaching is delivered in a timely manner. Personalised differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support from Vision Support Service.</li> </ul>
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#### 4A Sensory and Physical: Visual Impairment Level 4 and 5 continued

Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
	<ul> <li>Assessment:</li> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>Specialist teacher assessment</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> </ul> An EHCP is likely to be in place to draw together information, advice, aspirations, provision and planned outcomes. Vision Support Service planning, Outside Agency advice and recommendations are followed. Access arrangements will be determined by the QTVI and evidence provided for the exam boards. Advice on exam practice and provision of past papers provided by QTVI.	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Ongoing intensive specialist skills teaching that focusses on developing independent learning skills to ensure access and curriculum progression delivered by QTVI.</li> <li>Ongoing specialist in class support to reinforce development of specialist skills.</li> <li>Require modified large print, braille, specialist technology, simplified and/or tactile diagrams, 3D representations concrete objects and experiences, to access the curriculum.</li> <li>Will need ongoing formal intensive instruction in the development of mobility and orientation skills and independence training from habilitation specialist. Teaching of long cane skills is essential. Staff in the school will need appropriate training on sight guide.</li> </ul>	



#### 4A Sensory and Physical: Visual Impairment Level 4 and 5 continued

Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
	Additional resourced provision agreed with Vision Support Service, parents and school setting to assess CYP need, identify outcomes, implement support and monitor and evaluate progress The Vision Support Service outcomes and small step targets should be incorporated into the termly assess, plan do review process in school and the QTVI invited to all review point meetings. Multi Agency professional assessment should seek advice from the QTVI in all additional assessment to ensure the CYP is not disadvantaged and can access and complete assessment.	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Facilitate social skills in all activities and social times to create opportunities for peer to peer interaction. Explicit social skills teaching to support social and emotional development.</li> <li>Provide opportunities for explicit learning of appropriate social behaviour.</li> <li>Resources (continued)</li> <li>Specialist IT equipment that ensures access to learning in a way that does not disadvantage the CYP. Eg Braille notetaker, iPad or laptop with additional specialist apps or software such as screen reader or magnification, electronic resources, penfriend or voice recorder.</li> </ul>	



### 4A Sensory and Physical: Visual Impairment Level 4 and 5 continued

Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies, Resources and Physical Environment	Additional advice and support
		<ul> <li>Summary of Support from the Vision Support Service</li> <li>Regular joint planning with mainstream setting to ensure full access to all curriculum areas. This will allow the QTVI to deliver timely intervention to teach the CFVI relevant to that stage and age phase.</li> <li>A rolling programme of habilitation training to include independent living skills, long cane training and mobility training to ensure age related levels of independence are maintained.</li> <li>Provision and training of assistive technology and modified, adapted braille and tactile curriculum resources.</li> <li>CPD training offer taken up by school to raise awareness of individual student needs and strategies to fully include and reduce barriers to learning. Bespoke training offered around creating Vision Friendly Classroom, using assistive technology and exam access.</li> </ul>	

	Summary of support from the Vision Support Service (continued) • CPD training offered to SENCOs to ensure collaboration and understanding of how Service and school can support CYP to progress and develop efficient ways of working.	
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#### 4A Sensory and Physical: Visual Impairment Resources

Resources			
•	Curriculum Framework for CYPren and Young People with Vision Impairment   RNIB   RNIB		
•	Thomas Pocklington Trust		
•	Health, social care and education professionals   RNIB,		
•	Early years support for Children with vision impairment   RNIB		
•	Sheffield Royal Society for the Blind Home Page (srsb.org.uk),		
•	New to vision impairment? - RSBC		
•	CVI Scotland - About Us		
•	NatSIP - A place to start - Working with a child or young person with sensory impairment		
•	Resource center – Perkins School for the Blind		





The professional judgement of a Qualified Teacher of the Deaf (QToD) should be applied to decide on the implications of a d/Deafness. For example a pupil may have a moderate to severe hearing loss but be functioning within a different hearing category due to individual communication and access needs and/or additional learning difficulties.

## **Ordinarily Available**

This is Universal Support – as part of the Graduated Response. See <u>resources</u> that supports your teaching practice.

Ordinarily Available provision and teaching approaches for all learners with a recognition that some learners may require very time-limited support to secure effective application of skills and increase their engagement and access to all areas of school life. School will lead in this approach.

The table on the following pages references 4 key areas for hearing differences that would constitute reasonable adjustments if embedded within the classroom/school.

Ordinarily Available Strategies for Children and Young People who are d/Deaf							
Positive and Effective Relationship	<ul> <li>Ensure that children and young people have understood information or instructions so that they can carry out a task independently.</li> <li>Monitor the child's or young person's social development.</li> <li>Model and practice ways to communicate effectively with others.</li> <li>Model and practice ways to initiate conversations.</li> <li>Model and practice ways to use appropriate language when interacting with different people</li> <li>Put into practice any specific advice given by the specialist teacher</li> <li>Consistent use of any audiological equipment provided to be monitored by school staff</li> </ul>						

Continued on next page

## 4B Sensory and Physical: d/Deaf Ordinarily Available continued



- Ensure the environment promotes good listening and watching conditions,
- Ensure the pupil is seated appropriately to enable use of equipment and to access the board/ flipchart and any spoken language.
- Choose pairs or groups carefully to ensure full participation in the activity.
- Hearing aids do not restore typical hearing levels. It is important to remember all noise, including background noise, is amplified making communication difficult in noisy environments.
- Learning with a Hearing loss is hard work allow extra time and vary activities to avoid fatigue.
- Try to keep activities short that require a lot of concentration or listening (such as stories or group work) and build in short breaks, for example, opportunities to do something active.
- Short breaks may be needed during activities that need sustained listening and attention to avoid auditory fatigue
- Provide a quiet, cosy corner to allow children to self-regulate and be calm. Keep resources here to encourage relaxation and rest.
- Provide positive role models of deafness and people who wear hearing aids.

- Use resources from specialist charities-they often have lots of free helpful information and advice for professionals: National Deaf Children's Society | Supporting deaf children (ndcs.org.uk)
- You may need to work with a range of professionals including hospital, educational specialists and charities.
- CPD training offer taken up by school to raise awareness of different types of hearing losses and strategies to reduce barriers to learning.

#### Support provided by the d/Deaf / Hearing Support Service:

- One-off advice from specialist teacher to assess functional hearing in school setting for learners where schools have concerns
- On-going monitoring
- At key transition points, assessment of functional hearing completed, report/learner profile supplied with recommendations and advice given on reasonable adjustments that enables access to all curriculum areas. The learner profile will be updated at each transition point.
- Professional judgement of QToD applied on case-by-case basis
- CPD training offer taken up by school to raise awareness of different types of hearing losses and strategies to reduce barriers to learning.
- Consultancy support available by contacting the Service at <u>HearingImpairedService@sheffield.gov.uk</u>

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## 4B Sensory and Physical: d/Deaf Ordinarily Available continued



- Consider seating position to ensure it promotes good listening and attention-at the front is usually best.
- If a child has better residual hearing in one ear then place yourself on that side.
- Give context to what you are saying by using visual aids such as pictures or models-if you can use actual objects this can be really powerful for all children and young people when demonstrating a new topic or skill.
- The noise level, acoustics and the layout of rooms are particularly important. Reducing noise levels will benefit children with glue ear or who have mild or unilateral d/Deafness as they may find it difficult to distinguish the teachers voice from background noise. Manage noise levels so they are conducive to learning and unnecessary noise is minimised :E.g. Close the window or door when there is a noise outside.
- Add rubber tips to chairs and tables.
- Replace noisy equipment.
- Avoid sitting children and young people near noisy equipment
- Use displays for language development. Displays with pictures and captions or explanations can provide important visual clues for communication.
- Make sure you have the child's or young person's attention before you start talking.
- Speak clearly and at your normal pace, avoid shouting and whispering. Don't speak too slowly or over exaggerating your mouth patterns.
- Keep your face clear and try not to cover it with your hands, hair or any objects.
- Make sure there is good lighting and that your face is not in a shadow. (don't stand with you back to a window which will shadow your face)
- Face the student when talking and allow some space between you and the child, ideally keep a distance of between 1 and 2 metres.
- When talking don't walk around the room or turn to write on the black/white board.
- Encourage others to speak one at a time and to raise their hand before speaking so that a d/Deaf child or young person is aware of who is talking.

- Use gesture and facial expressions to help children and young people understand what you are saying.
- Create visual timetables, schedules and choice boards to explain everyday routines.
- Repeat or re-phrase what you have said if a child or young person has not understood.
- Write key words, topic headings or questions on the board.
- Allow time for children and young people to look at visual clues or demonstrations before you start talking again, this will give them time to focus their attention back on you.
- Give consideration to seating arrangements and select supportive neighbours.
- Plan your sessions/lessons so that the tasks which require a lot of listening can be done when background noise is low.
- Encourage children to work quietly and reduce the level of noise in the room rather than raising your voice.
- Teaching that takes into account language delay: a targeted approach to teaching new vocabulary; breaking down information into smaller chunks; repeating and rephrasing information; checking understanding through careful questioning.
- Think about how to assess what a child has learnt and understood-you may need to use a more flexible approach.
- Keep instructions simple, avoid long and detailed explanations.
- Include tasks which require a range of responses and not just those which require a written answer.
- Always give an explanation of new vocabulary and prepare vocabulary sheets which contain words specific to the subject or topic you are teaching. If possible illustrate key words with a picture.
- Expect d/Deaf children to conform to the same standards of discipline as the rest of the children and young people.
- Literacy teaching to take into account CYP's ability to hear specific speech sounds and the need for a holistic approach to teaching reading
- Plan in pre and post learning times to prepare a child for a lesson and/or check their understanding
   Continued on next page

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#### 4B Sensory and Physical: d/Deaf Ordinarily Available continued



Communication	<ul> <li>Use the 5 steps outlined by the NDCS: repeat, re-phrase, explain, simplify, clarify <u>Resources for education professionals   Information for professionals (ndcs.org.uk)</u></li> <li>Promote good communication skills within the classroom.</li> <li>Make sure that you have a child's or young person's attention before starting to talk, otherwise they may not follow the first part of the conversation or instructions.</li> <li>Gain child or young person's attention, before you expect them to listen. For example, using stories with a repeating phrase that they can join in with will help to hold attention.</li> <li>Give children and young people time to look and then listen, to hel them to integrate their attention.</li> <li>When changing the topic of the conversation let the child or young person know, otherwise they may find the discussion confusing. It useful to introduce the topic first before going into detail.</li> <li>Do not shout as this will distort your lip patterns. For children and young people who use hearing aids sudden loud noises can be painful or shocking.</li> <li>Try to keep your hands free so that you can use natural gestures the start of the source is the source in the source is the source in the source is the source is a start of t</li></ul>	<ul> <li>rephrase the question if they appear to have misunderstood.</li> <li>Pause between sentences.</li> <li>Talking about what you are doing and why</li> <li>Body language, facial expressions and gestures match the spoken word.</li> <li>Use a targeted approach to teaching new vocabulary. Repetition and reinforcement of new words. Use repetitive language linked to everyday routines.</li> <li>Encourage children and young people to tell you if they don't understand something.</li> <li>Use short sentences as these are easier to understand than either single words or long complex phrases.</li> <li>is</li> <li>Use simple questions and open-ended questions and give simple instruction. Use a wide range of vocabulary and pin new vocabulary onto something the child or young person already knows or can see.</li> <li>Establish ground rules for how a discussion will work and ensure children and young people take it in turns to speak.</li> </ul>
	<ul><li>painful or shocking.</li><li>Try to keep your hands free so that you can use natural gestures t</li></ul>	children and young people take it in turns to speak.
	<ul> <li>support what you are saying.</li> <li>Keep your sentences short and remember to explain any new vocabulary or technical terms.</li> </ul>	<ul> <li>where possible introduce the next speaker by name.</li> <li>When organising group work, plan in advance who children and young people will work with.</li> </ul>



#### 4B Sensory and Physical: d/Deaf Level 3



	vel (see descriptor below). The pupil's new classroom delivery, materials and the us dual interventions over the week		
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
Hearing loss is classified as moderate sensori-neural with unaided threshold 41-70 dBHL NATSIP Criteria score 35 - 59	<ul> <li>Medical diagnosis by audiology professionals and ongoing management from clinical professionals</li> <li>Scored in accordance with NATSIP criteria by QToD</li> <li>Access arrangements considered</li> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> <li>An Extended Support Plan / EHCP may be in place to draw together information, advice, aspirations and planned outcomes.</li> <li>Continued on next page</li> </ul>	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods <ul> <li>Advice from QToD is implemented in the classroom</li> <li>Attention will need to be paid to seating position in classroom and the listening environment – see ordinarily available document</li> <li>Attention will need to be paid to use of audiological equipment. In addition to hearing aids or implants, they may require a radio aid.</li> <li>Differentiation may be necessary taking into account sustained impact of hearing loss on language acquisition, pace of learning, and the requirement for visual aids</li> </ul> </li> <li>Continued on next page</li> </ul>	<u>d/Deaf and Hearing Support Service</u> <u>Educational Psychology Service</u> <u>Speech &amp; Language Therapy</u> Other external agencies as required May make use of Locality Panels – Stage 1 or 2 (if Applicable)

### 4B Sensory and Physical: d/Deaf Level 3



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
	Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Wave 1 (Quality First Teaching) with a specific consideration for children with hearing loss</li> <li>Consideration of environmental factors that promote good listening and watching conditions</li> <li>Awareness that a pupil may need more time to complete tasks and that equality of access may mean that they need to do some things differently</li> <li>Flexibility of groupings allows for buddy support, effective language role models, and targeted teaching.</li> <li>Targeted, explicit learning of new vocabulary and key terminology across the curriculum.</li> <li>Build a relationship with the child or young person in your setting. Do not rely solely on the Key person/TA to teach, make time to work directly with children and young people.</li> <li>Provide opportunities for explicit learning of appropriate social behaviour.</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Model and practice ways to communicate effectively with others.</li> <li>Model and practice ways to initiate conversations.</li> <li>Model and practice ways to use appropriate language when interacting with different people.</li> <li>Model and practice ways children and young people can express their feelings and emotions – this might need teaching explicitly.</li> <li>Promote activities that help children and young people develop confidence and positive self-esteem.</li> <li>Make opportunities for children and young people to make choices, for example: choosing an activity or how they would like to be supported.</li> <li>Ensure that children and young people have understood information or instructions so that they can carry out a task independently</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
			Additional advice and support
		Continued on next page	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Resources</li> <li>Consistent use of any audiological equipment provided</li> <li>Consideration and assessment for radio aid to enhance classroom listening and learning</li> <li>Teaching resources that are appropriate to the language of the learner, are mindful of the sustained impact of hearing loss on language competence of the learner, and are highly visual.</li> <li>Use of subtitling or closed captions for any multimedia content</li> <li>Support provided by the d/Deaf/ Hearing Support Service</li> <li>Termly or half termly teaching session with QToD.</li> <li>QToD should be invited to multi- professional meetings</li> <li>QToD to advise on reasonable adjustments that enables access to all curriculum areas</li> <li>QToD to advise on exam access arrangements for candidates with hearing needs.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Support provided by the d/Deaf/ Hearing Support Service (continued)</li> <li>Assessment of suitability for assistive technology (e.g. radio aid) and provision if appropriate</li> <li>CPD training offer taken up by school to raise awareness of different types of hearing impairment and strategies to reduce barriers to learning</li> </ul>	





The pupil has a classified hearing level (see descriptor below). The pupil's needs are met through the use of significant adaptations of materials and assistive technology to enable access to the curriculum. The pupil will require formal ongoing instruction to enable them to live as independently as possible, as directed by the Deaf, Hearing Support Service.

<b>Provision:</b> Frequent, specific speciality input at all times across all aspects of	sed input or daily, specific specialised the curriculum	Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>Hearing loss is classified as sensorineural, severe with unaided threshold 71-95 dBHL, or profound with unaided threshold in excess of 95 dBHL.</li> <li>Evidence of impact on language acquisition due to the sustained impact of severe-profound hearing loss</li> <li>A variety of signed communication approaches may be considered and used</li> <li>Access to BSL or SSE integral throughout school day</li> <li>NATSIP Criteria score 60+</li> </ul>	Medical diagnosis by audiology professionals and ongoing management from clinical professionals Scored in accordance with NATSIP criteria by QToD Access arrangements considered Observation Data tracking Teacher assessments CYP Progress meetings CYP/Young Person voice One Page Profile/Learner Profile Parent/Carer voice An Extended Support Plan / EHCP is likely to be in place to draw together	<ul> <li>As for Ordinarily available and wave 3 whilst including:</li> <li>Adjustments to Teaching Methods</li> <li>Communication may include the use of British Sign Language, Sign Supported English (SSE),or other manual or visual methods</li> <li>Attention will need to be paid to use of audiological equipment which may include a radio aid</li> <li>Differentiation will be required across the curriculum with a specific consideration for pupils with severe-profound hearing loss, where speech and language acquisition has been impacted by the long-standing hearing loss.</li> <li>Regular consultation with QToD about delivery of curriculum to</li> </ul>	d/Deaf and Hearing Support Service Educational Psychology Service Speech & Language Therapy Other external agencies as required May make use of Locality Panels – Stage 1 or 2 (if Applicable)
	information, advice, aspirations and planned outcomes. <b>Continued on next page</b>	ensure the pupil can fully access all curriculum areas	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
	Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Teaching that takes into account language delay: a targeted approach to teaching new vocabulary; breaking down information into smaller chunks; repeating and rephrasing information; checking understanding through careful questioning</li> <li>Literacy teaching to take into account CYP's ability to hear specific speech sounds and the need for a holistic approach to teaching reading</li> <li>Opportunities provided for pupil to work one-to-one or in a small group in a quiet listening environment.</li> <li>PHSE programmes that promote a positive sense of identity as a hearing impaired /Deaf young person (e.g. NDCS Healthy Minds, Personal Understanding of Deafness programme)</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Adjustments to Teaching Methods (continued)</li> <li>Use a photo book to record special events, special people or everyday routines to encourage communication and language development or support understanding.</li> <li>Responding to the child's gestures and noises through mirroring and copying and then waiting for them to respond to you and communicating about and showing interest in the child's immediate environment and what they are interested in.</li> <li>produce information for parents such as a booklet which includes information about your curriculum area, practical advice for supporting their child and who to contact if they have a concern or complaint</li> <li>Continued on next page</li> </ul>	





Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Resources</li> <li>Teaching resources that are appropriate to the language and communication approach of the learner, are mindful of the sustained impact of hearing loss on language competence of the learner, and are highly visual.</li> <li>A high level of adult support for learning, health and safety, and risk management</li> <li>May require a radio aid to access learning in mainstream classes</li> <li>Consistent and appropriate use of any audiological equipment provided (may include a radio aid), including a programme of regular equipment checks</li> <li>Access to technological support such as speech-to-text software to support capture of teachers' spoken delivery</li> <li>Access to staff with sign language skills as appropriate to the age and stage of the learner</li> </ul>	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Resources (continued)</li> <li>Support for note-taking, hand- outs given in advance to support learning and vocab understanding prior to the lesson.</li> <li>Use of visual and practical aids to support new learning</li> <li>Use of BSL images or symbols on resources (e.g. Wldgit BSL) as appropriate to the learner</li> <li>Use of subtitling or closed captions for any multimedia content</li> <li>Advice from QToD is implemented in the classroom</li> <li>Exam access arrangements are in place for all externally assessed components. This may included additional time, 'live' speaker for any speaking and listening elements, use of reader, scribe, language modified papers, and BSL delivery of exams.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Support provided by the d/Deaf/ Hearing Support Team</li> <li>A programme of direct teaching planned by specialist teacher, delivered fortnightly or weekly by QToD and/or specialist teaching assistant. This may include, but is not limited to: promote and support language development; pre- and post-tutor curriculum content; personalised curriculum approaches; coaching in the development of audiological skills; addressing personal understanding of deafness; awareness of reasonable adjustments to support through life; support at transition points e.g. to secondary, post16 and HE considerations; preparation for adulthood with a hearing loss, etc.</li> <li>Where daily access to a QToD would be beneficial, and signed communication approaches across the day, consideration of Integrated Resource placement as deemed necessary through EHCP.</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Strategies and interventions</li> <li>Support provided by the d/Deaf/ Hearing Support Service (continued)</li> <li>Where an IR placement is required, note-taking and communication support will be an integral aspect to the curriculum support in accordance with student's needs.</li> <li>QToD to supply annual reports to support the 'Plan, Do, Review' EHCP cycle.</li> <li>Regular consultation with QToD about delivery of curriculum to ensure pupil can fully access all curriculum areas</li> <li>May include use of BSL or SSE sign language to support the learning across the curriculum</li> <li>Provision and maintenance of a radio aid system</li> <li>Access to Deaf Instructors to support sign language development and d/Deaf role models</li> <li>CPD training offer taken up by school to raise awareness of different types of hearing loss, language development implications, and strategies to reduce barriers to learning</li> <li>Continued on next page</li> </ul>	



Bespoke Descriptor Level 4 and 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Support provided by the d/Deaf/ Hearing Support Service (continued)</li> <li>CPD training for day-to-day checking and trouble-shooting of problems with audiological equipment</li> <li>CPD to encourage a sign language friendly school environment (as appropriate)</li> <li>Access to a deaf peer group</li> <li>QToD should be invited to all multi-professional meetings</li> <li>Specific advice and guidance for transition to next stage – secondary, post 16 or post18.</li> <li>Specific advice and guidance for preparation for adulthood, awareness of rights and support mechanisms for d/Deaf adults, accessing work, etc</li> </ul>	

## 4B Sensory and Physical: d/Deaf Resources



Resources		
<u>National Deaf Children's Society</u>		



#### 4C Sensory and Physical: Physical Difficulties Ordinarily Available



This is Universal Support – as part of the Graduated Response. See <u>assessment tools</u>, <u>interventions and further support</u> that supports your teaching practice.

Ordinarily Available provision and teaching approaches for all learners with a recognition that some learners may require very time-limited support to secure effective application of skills and increase their engagement and access to all areas of school life. School will lead in this approach.

The table on the following pages references 4 key areas for Visual differences that would constitute reasonable adjustments if embedded within the classroom/school.

	Ordinarily Available Strategies for Children and	I Young People with a Physical Disability
Positive and Effective Relationship	<ul> <li>Repetition of adult prompting and praise for young person to meet motor goals including self-care skills</li> <li>Observation of young person completing motor activities including pencil grip and letter formation to identify difficulties.</li> <li><u>Social stories</u> if appropriate</li> <li>Establish goals and use a consistent approach agreed with parents when working on independence</li> </ul>	
Enabling Environments	<ul> <li>Consider the use of</li> <li>Pencil grips (similar support can be gained through using blue tac/elastic band for older children)</li> <li>Easi-grip scissors</li> <li>Sloped work surface</li> <li>Movin' sit cushion</li> <li>Laptop/tablet for recording work with software installed such as Clicker for primary/ DocsPlus for secondary</li> </ul>	<ul> <li>Allowing additional time and support to get changed for P.E.</li> <li>Reminders and support at lunch times if needed for eating/ cutlery skills</li> <li>Reminders and some support if appropriate for self-care such as toileting</li> </ul>

#### Continued on next page

#### 4C Sensory and Physical: Physical Difficulties Ordinarily Available continued



Access to Learning	<ul> <li>Adults direct young person to targeted motor activities</li> <li>Whole class teaching, with TA support for targeted intervention</li> <li><u>School prescribed intervention groups</u></li> <li>Handwriting Programmes – utilise resources on the Learn Sheffield website:</li> <li>Refer to training - <u>Y5 and below Handwriting Advice for Schools</u></li> <li>Refer to training - <u>Y6 and Secondary - Handwriting Advice for Schools</u></li> <li>Targeted gross motor programme to work specifically on pupil's particular gross motor difficulties</li> </ul>	<ul> <li>Repetition and focus on building skills in a range of practical tasks. Make use of the help sheets and videos on <u>Motor Skills Clinic</u></li> <li><u>Fine Motor Skill Activities for Pre-School and Younger Children</u></li> <li><u>Fine Motor Skill Activities for Older Children</u></li> <li>Consider motor skills strengths and needs and signpost young people and their family to relevant extra-curricular groups such as dance/ football/bike skills through <u>Cycle North</u> if appropriate</li> </ul>
Communication	<ul> <li>Communicate motor goals, in a child friendly way, with CYP and ensure they evaluate their progress towards these.</li> <li>Discuss the importance of physical activity and movement.</li> </ul>	





	Provision: Some targeted and individual interventions over the week		<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>NB. GMFCS Level 2 (independently nobile) or 3 (might need the use of an aid)</li> <li>Mobility</li> <li>May be independently mobile / have an abnormal walking pattern / slower than peers at walking / need an aid to support walking / may need a wheelchair for longer distances due to fatigue</li> <li>Seating</li> <li>May need an adapted school chair e.g. Fox Denton, Movin' Sit cushion</li> <li>Splints</li> <li>May wear splints on leg(s) or arm / hand or both</li> <li>Continued on next page</li> </ul>	Assessment of mobility around school by Physiotherapist or Occupational Therapist Risk assessment assessing the CYP's safety in free flow and other environments including school trips. • Observation • Data tracking • Teacher assessments • CYP Progress meetings • CYP/Young Person voice • One Page Profile/Learner Profile • Parent/Carer voice An <u>Extended Support Plan</u> may be in place to draw together information, advice, aspirations and planned outcomes <b>Continued on next page</b>	<ul> <li>Ordinarily Available provision whilst also including:</li> <li>Adjustments to Teaching Methods Staff should consider and implement as appropriate <ul> <li>Likely to require modification/adaptation to tasks to enable access to aspects of the curriculum</li> <li>Whole class teaching but with regular and focused individual support which aim to develop the CYP's skills and independence.</li> </ul> </li> <li>Grouping <ul> <li>A programme of support planned by Physiotherapist or Occupational Therapist, may be offered to include access to activities / equipment which have been advised by CYP's therapist for: <ul> <li>Fine motor development</li> <li>Gross motor development</li> <li>Life skills</li> </ul> </li> </ul></li></ul>	Assessment from <u>Physiotherapist or</u> <u>Occupational Therapist</u> with report or advice and possibly an episode of care or ongoing support offered. May make use of Locality Panels – Stage 1 or 2 (if Applicable)

The CYP has a moderate motor impairment/disordered motor skills which significantly impair their ability to participate in many aspects of school and social



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>Cerebral Palsy GMFCS level 2</li> <li>Can climb stairs with a railing</li> <li>Has difficulty with uneven surfaces inclines or in crowds</li> <li>Has only minimal ability to run or jump</li> <li>Cerebral Palsy GMFCS level 3</li> <li>Walks with assistive mobility devices indoors and outdoors on level surfaces</li> <li>May be able to climb stairs using a railing</li> <li>May propel a manual wheelchair and need assistance for long distances or uneven surfaces</li> <li>NB: where there is good parent/carer support, minimal disruption, easy access environment, experienced staff etc. If a CYP needs adaptations to the environment e.g. lift, move to level 4.</li> <li>Cerebral Palsy MACS level 3</li> <li>Handles objects with difficulty; needs help to prepare and/or modify activities.</li> </ul>	<ul> <li>Screening tools and / or assessment tools as identified</li> <li>Multi agency planning, Outside Agency advice and recommendations are followed</li> <li>Access arrangements considered</li> </ul>	<ul> <li>Resources</li> <li>Equipment to support CYP e.g. pencil grips, easi-grip scissors, laptop / tablet, sloped work surface, cushion for seat, foot box, adapted class chair etc.</li> <li>Follow handwriting advice for schools year 5 and below</li> <li>Follow handwriting advice for schools year 6 and secondary</li> <li>Refer to the 'Menu of Technology' to make decisions around the use of Assistive Technology</li> <li>Refer to training Sway to make decisions around using assistive technology.</li> <li>SENCOs need to have an awareness of the possible future needs of CYPren diagnosed with Duchene Muscular Dystrophy/progressive/deteriorati ng conditions and make early considerations and preparations to ensure the CYP is able to access the resources and finances needed, and the school is adapted to meet need.</li> </ul>	



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>Cerebral Palsy MACS level 3 (continued)</li> <li>The performance is slow and achieved with limited success regarding quality and quantity. Activities are performed independently if set up or adapted.</li> </ul>			
<ul> <li>Severe Developmental Coordination Disorder (DCD) or motor coordination difficulties.</li> <li>Movement ABC-2 score &lt;5<sup>th</sup> percentile</li> <li>Significant difference between measured level of intelligence and motor performance.</li> </ul>			



The CYP has a severe motor impairment and uses a wheelchair some/all of the time. They need adult help to change their position, e.g. wheelchair to class chair, wheelchair to toilet, to stand and turn, or may need to use a hoist. The CYP will have involvement of Physiotherapy or Occupational Teams (or both) which may be intermittent episodes of care. Their needs are met through a highly personalised timetable in school using specialist equipment and training, planned in conjunction with appropriate Outside Agency Practitioners.

Provision: Frequent, specific special	sed input	Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>NB. GMFCS Level 4</li> <li>Cerebral Palsy GMFCS level III <ul> <li>Walks with assistive mobility devices indoors and outdoors on level surfaces</li> <li>May be able to climb stairs using a railing</li> <li>May propel a manual wheelchair and need assistance for long distances or uneven surfaces</li> </ul> </li> <li>NB: Level 4 in the GRID where there are significant changes for the young person e.g. periods of rapid growth, surgery, transition, family events. The education environment is more complex and requires adaptations. The CYP has significant potential to improve / deteriorate without adult intervention.</li> <li>Continued on next page</li> </ul>	<ul> <li>Physiotherapist / Occupational Therapist and other involved professional reports and assessments</li> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> <li>An Extended Support Plan / EHCP may be in place to draw together information, advice, aspirations and planned outcomes.</li> <li>Assessment tools as identified to unpick need and measure impact of support</li> <li>Continued on next page</li> </ul>	<ul> <li>Adjustments to Teaching Methods</li> <li>Staff should consider and implement as appropriate</li> <li>Grouping <ul> <li>Daily individual support to work on modified curriculum.</li> <li>Therapy programmes as advised by PT/OT</li> </ul> </li> <li>Physical Environment <ul> <li>Adaptations to physical environment as advised by OT</li> </ul> </li> <li>Resources <ul> <li>Specialist seating</li> <li>Aids and Equipment e.g. laptop/tablet/alternative recording device, specialist cutlery, changing plinth, manual handling aids</li> </ul> </li> <li>Continued on next page</li> </ul>	Assessment from <u>Physiotherapist or</u> <u>Occupational Therapist</u> with report or advice and possibly an episode of care or ongoing support offered. May make use of Locality Panels – Stage 1 or 2 (if Applicable) <u>Educational Psychology Service.</u>



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>Cerebral Palsy GMFCS level IV</li> <li>Walking ability severely limited even with assistive devices</li> <li>Uses wheelchairs most of the time and may propel own power wheelchair</li> <li>Standing transfers, with or without assistance</li> <li>Cerebral Palsy MACS level IV</li> <li>Handles a limited selection of easily managed objects in adapted situations.</li> <li>Performs parts of activities with effort and with limited success.</li> <li>Requires continuous support and assistance and/or adapted equipment, for even partial achievement of the activity.</li> <li>Young person with Duchene Muscular Dystrophy who can no longer walk, but has some upper limb function.</li> </ul>	Multi agency planning, Outside Agency advice and recommendations are followed Access arrangements considered	<ul> <li>Mobility <ul> <li>Uses a wheelchair some/all of the time to move around school.</li> <li>Adult help to change position, and/or from one piece of equipment to another. E.g. when toileting, transitioning from specialist seating to wheelchair</li> </ul> </li> <li>PE <ul> <li>Needs adult support to access PE and a differentiated programme.</li> </ul> </li> <li>Seating <ul> <li>May need a specialist school chair (in addition to wheelchair).</li> </ul> </li> <li>Splints <ul> <li>May wear splints on leg(s) or arm/hand or both</li> </ul> </li> <li>Functional Skills <ul> <li>Needs adult help with tasks such as dressing, feeding, toileting due to motor impairment</li> </ul> </li> <li>Recording <ul> <li>May need to use assistive technology e.g. laptop, tablet, eye gaze, switches</li> </ul> </li> </ul>	



The CYP has multiple, complex physical difficulties which affect their whole body. The CYP is dependent on a wheelchair and requires a hoist to move. They require multiple pieces of personal equipment, e.g. moulded seat, assistive technology and wheelchair. They have Physiotherapy / Occupational Team involvement, which may be in episodes of care. Their needs are met through a highly specialised provision and timetable in a specialist setting.			
<b>Provision:</b> Daily, specific specialised the curriculum	input at all times across all aspects of	Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
<ul> <li>Cerebral Palsy GMFCS level V</li> <li>Has physical impairments that restrict voluntary control of movement</li> <li>Ability to maintain head and neck position against gravity restricted</li> <li>Impaired in all areas of motor function</li> <li>Cannot sit or stand independently, even with adaptive equipment</li> <li>Cannot independently walk but may be able to use powered mobility</li> <li>MACS level V</li> <li>Does not handle objects and has severely limited ability to perform even simple actions</li> <li>Requires total assistance</li> </ul>	Physiotherapist / Occupational Therapist and other involved professional reports and assessments <ul> <li>Observation</li> <li>Data tracking</li> <li>Teacher assessments</li> <li>CYP Progress meetings</li> <li>CYP/Young Person voice</li> <li>One Page Profile/Learner Profile</li> <li>Parent/Carer voice</li> </ul> <li>An EHCP is likely to be in place to draw together information, advice, aspirations and planned outcomes.</li> <li><u>Assessment tools as identified</u>, where and when they can be used to help unpick need and measure impact of support</li>	There is agreement between professionals (Educational Psychology Service, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5. Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4. In addition, the following will be in place: <b>Adjustments to Teaching Methods</b> Staff should consider and implement as appropriate <b>Mobility</b> • Uses a wheelchair all of the time to move around school and requires hoisting from one piece of equipment to another	Assessment from <u>Physiotherapist or</u> <u>Occupational Therapist</u> with report or advice and possibly an episode of care or ongoing support offered. May make use of Locality Panels – Stage 1 or 2 (if Applicable) <u>Educational Psychology Service.</u> Health Services if involved.
	Multi agency planning, Outside Agency advice and recommendations are followed	Continued on next page	



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>Seating</li> <li>May need a specialist school chair (in addition to wheelchair)</li> </ul>	
		<ul> <li>Splints</li> <li>May wear splints on leg(s) or arm/hand or both</li> </ul>	
		<ul> <li>Functional Skills</li> <li>Dependent on an adult for all tasks such as dressing, feeding, toileting due to motor impairment</li> </ul>	
		<ul> <li>Recording</li> <li>May be able to use high-tech assistive technology for recording work</li> </ul>	

#### 4C Sensory and Physical: Physical Difficulties Screening and Assessment Tools



#### **Screening Tools**

<u>MOVES</u> - The MOVES programme has a screening tool to identify motor difficulties and leads to an easily delivered intervention and support programme for children who present with coordination, motor and organisational difficulties (This has been created by Soth Warwickshire NHS Trust)

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- Gross and fine motor screener Screening tool to help identify if a child has a motor need
- MATCH flyers <u>Recognising Motor Difficulties</u> provides prompts to consider if a CYP has a motor difficulty and ideas for support

#### **Assessment Tools**

DASH - The Detailed Assessment of Speed of Handwriting (DASH) can be used to assess handwriting speed - ideal for providing evidence for Access
 Arrangements for Key Stage 2 National Curriculum Tests and for General Qualifications



#### 4C Sensory and Physical: Physical Difficulties Interventions and Support



#### Interventions

- Ideas and support for life skills advice for younger children
- <u>MOVES</u> The MOVES programme has a screening tool to identify motor difficulties and leads to an easily delivered intervention and support programme for children who present with coordination, motor and organisational difficulties (this has been created by Soth Warwickshire NHS Trust)
- <u>Lincolnshire 1<sup>st</sup> Move checklist and interventions</u> 1st Move is a resource intended for use both by parents/carers and in nursery/schools by teachers and support staff. It is written to be a 'child friendly' approach focussing on skill development. 1st Move emphasises functional skill development
- Follow handwriting advice for schools year 5 and below
- Follow handwriting advice for schools year 6 and secondary
- The National Handwriting Association have lots of information and resources both for teachers and parents

#### **Further Support**

- Refer to the Motor Skills Clinic via the GP\_ for children who have difficulties with their motor skills or suspected DCD, but no physical disability.
- <u>Seek information from the mainstream therapy team</u> for children with a known physical disability when you need physiotherapy or occupational therapy support.
- Seek information from the physiotherapy and occupational therapy teams for an overview of services.
- Seek support from the Sensory Service: For children experiencing difficulties with sensory processing-
- Seek support from the <u>Musculoskeletal Physiotherapy Outpatients Team</u>: For any problems relating to recent injuries and pain.
- Seek support from the <u>Rheumatology Team</u>: For concerns regarding hypermobility and joint pian.
- Refer to the 'Menu of Technology' for different AT options
- Refer to training Sway when considering the use laptops/ipdad/tablets
- Contact the Crick team to discuss Clicker and DocsPlus software
- Strategies to help with Organisation gives advice for CYP to organise themselves, their thoughts, and their equipment.
- <u>Higher level strategies to support planning and organisation skills</u> is for young people with communication difficulties that have difficulty planning and organising on a day to day basis.
- Be aware and make arrangements for CYP with physical difficulties for Fire Evacuations
- Further resources can be found in the Sheffield Children's NHS Resource Library



#### Equipment

- <u>Fledglings</u> Adaptive Clothing inc Swimwear & Shoes, Bedding, Disability & Sensory Aids & more.
- <u>The William Merritt Disabled Living Centre</u> is a registered charity and since 1981 has offered impartial and professional advice for children and adults living with a disability or long-term condition. The Centre carries out assessments for members of the public to help them choose and use daily living aids with confidence and enhance their independence.
- <u>Crelling Harnesses</u> is a friendly family based company offering a full range of seatbelts and harnesses for children and adults with special needs.



## 4D Sensory and Physical: Medical Level 3



Coming soon			
<b>Provision:</b> Some targeted and individual interventions over the week		Reviews: 3 per year	<b>Documents:</b> Support Plan or Extended Support Plan
Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support



#### 4D Sensory and Physical: Medical Level 4



Coming soon			
Provision: Frequent, specific specialis	sed input	Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support



### 4D Sensory and Physical: Medical Level 5



Coming soon				
<b>Provision:</b> Daily, specific specialised input at all times across all aspects of the curriculum		Reviews: 3 per year	<b>Documents:</b> Usually have an EHC Plan	
Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support	





At all levels, consider where the sensory needs maybe coming from e.g. an autism profile, an unmet communication need, a trauma response etc. to help guide us if there may be other areas of the young person's profile that would benefit from support.

### **Ordinarily Available**

This is Universal Support – as part of the Graduated Response. See <u>assessment tools and interventions</u> that supports your teaching practice.

Ordinarily Available provision and teaching approaches for all learners with a recognition that some learners may require very time-limited support to secure effective application of skills and increase their engagement and access to all areas of school life. School will lead in this approach.

The table on the following pages references 4 key areas for sensory differences that would constitute reasonable adjustments if embedded within the classroom/school.

<ul> <li>Capture Pupil Voice: <u>Talking Mats</u> is visual, differentiated way of capturing Pupil Voice.</li> <li>Support in unstructured times, pre-empting sensory needs and making adaptations as appropriate.</li> <li>Develop self-awareness so young people can recognise their sensory triggers and make adaptations as appropriate.</li> </ul>	<ul> <li>Agree a signal that the young person can use to indicate if they are becoming overwhelmed in class and what the response to this signal will be.</li> <li>Social Stories may be used to help young people cope with change/new experiences if appropriate.</li> </ul>

#### 4E Sensory and Physical: Sensory needs Ordinarily Available continued



Enabling Environments	• • • •	Ensure the young person is drinking, eating and toileting regularly – consider making a chart if needed. The classroom is organised to emphasise open space. Pupil is supported to organise their belongings and sit at a low stimulus table/workstation. The white board and surfaces are free of visual clutter – for 1m the circumference. Use of noise cancelling headphones available Reasonable adjustments made for uniform where needed. Weighted items (e.g. blanket) and tactile objects available where appropriate Transition times are managed effectively, so that noise levels are not excessive, and the young person knows what to expect. This could mean pupil leaving 5 mins earlier to and from lessons. Offer a range of sensory equipment e.g. wobble cushion, stress ball, chewlerry and fiddle toys – agree with the young person what resources support them.	<ul> <li>Whole class and school sensory profile completed and adaptations made where needed</li> <li>Consider individual sensory profile</li> <li>All staff to adopt a Low Arousal Approach Sheffield City Council\Desktop\Low arousal classroom environment approaches.docx</li> <li>Use movement breaks at the first signs of stress, where appropriate and possible. Offer physical activity to allow them to expel energy/stress and gain proprioceptive feedback. For some young people this could be delivering a note, carrying some books etc.</li> <li>Ensure pupil can access a 'Regulating Space' in school – free to access when in crisis. Practice moving to this room if appropriate and possible, when pupil is in a Low Arousal state.</li> <li>Ensure young people with sensory issues can access a toilet other than the pupil toilets e.g. disabled toilet, staff toilet.</li> <li>Offer the young person access to a peg/coat hook at the end of a line or a space separate from the others if needed.</li> <li>Low Arousal Approach: Studio3 has free webinars and support</li> </ul>
Access to Learning	•	Consistency of approach amongst staff – all staff will be aware of the young person's sensory needs and reasonable adjustments and adaptations needed Environmental considerations are made to meet the known needs the pupil e.g. seating position, noise, personal space and classroom layouts, displays and signage. Staff may have recognised needs through the use of sensory checklists, staff observations or outside agency input	<ul> <li>Make use of sensory breaks where needed</li> <li>Utilise sensory circuits and physical activity to enable the young person to start noticing bodily sensations and linking these to emotions. This can then link into emotional support such as Zones of Regulation or the 5-point scale.</li> </ul>
Communication	•	Ensure there is a familiar, emotionally available adult to 'check-in'. Make use of one-page profiles/ pupil passport that clearly captures the young person's voice on the approaches they find helpful and those they find unhelpful. Ensure these are reviewed regularly.	<ul> <li>Introduce a home-school communication book in place where appropriate.</li> </ul>



At all levels, consider where the sensory needs maybe coming from e.g. an autism profile, an unmet communication need, a trauma response etc. to help guide us if there may be other areas of the young person's profile that would benefit from support. **Documents:** Support Plan or **Provision:** Some targeted and individual interventions over the week **Reviews:** 3 per year **Extended Support Plan** Identification and Assessment Teaching and Learning **Bespoke Descriptor** Additional advice and support Level 3 Strategies and Interventions Will experience moderate sensory **AET Sensory Checklist** Sensory supports/Movement breaks Understanding Your Child's Sensory needs that have an impact on are planned into the timetable Signals - Angie Voss everyday life, e.g. avoidance of frequently, this could take the form of Observation May make use of Locality Panels environment or activity, some completing class jobs, taking a note, Data tracking • distress or inability to attend and collecting the milk etc. Stage 1 or 2 (if Applicable) Teacher assessments ٠ • A personalised sensory plan focus CYP Progress meetings • Identifying individual sensory CYP/Young Person voice • needs and steps taken to One Page Profile/Learner Profile • support. Parent/Carer voice Sensory Circuits are offered as a daily part of the timetable (these An Extended Support Plan / EHC can be completed by the young plan may be in place to draw person independently depending together information, advice, on age/stage of development). aspirations and planned outcomes Spaces created inside and outside that cater for specific Screening tools and / or assessment sensory needs for a young tools as identified person, if appropriate. May require support with Multi agency planning, Outside transitions and change even with Agency advice and forewarning. recommendations are followed Continued on next page Access arrangements considered



Bespoke Descriptor Level 3	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		<ul> <li>May require sensory adaptations in the learning space such as consideration to where they sit, fiddle toys, regular movement breaks.</li> <li>Physical sensory consideration such as alterations to the uniform, seating plan and sensory support tools may be appropriate.</li> </ul>	
		Make use of Sheffield CYPren's Sensory Service - <u>Sensory</u> <u>Processing support videos and</u> <u>resources</u>	
		Universal Provision offer from the Sensory Service: -This is the first level of provision for all families. Our Virtual Therapy service provides information about sensory processing and how to understand your CYP's sensory needs, and provides strategies that may help you and your CYP. (There is the option to access this information via a group workshop for families who are unable to access digital resources). See the link above for the Virtual Therapy service.	



ovision: Frequent, specific specia	Reviews: 3 per year	<b>Documents:</b> Extended Support Plan or EHC Plan	
Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
ay be overloaded by external vironmental stimuli. Insory differences will be present an extent that they have a great pact on daily life, e.g. sensory oidance/seeking within vironmental settings and visible stress and/or avoidance.	AET Sensory Checklist• Observation• Data tracking• Teacher assessments• CYP Progress meetings• CYP/Young Person voice• One Page Profile/Learner Profile• Parent/Carer voiceAn Extended Support Plan / EHCplan may be in place to drawtogether information, advice,aspirations and planned outcomesScreening tools and / or assessmenttools as identifiedMulti agency planning, OutsideAgency advice andrecommendations are followedAccess arrangements considered	<ul> <li>A personalised sensory plan - Identifying individual sensory needs and steps taken to support.</li> <li>Physical sensory consideration such as alterations to the uniform, seating plan and sensory support tools may be appropriate.</li> <li>Make use of Sheffield CYPren's Sensory Service - <u>Sensory</u> <u>Processing support videos and</u> <u>resources</u></li> <li>Targeted Provision offer from the Sensory Service: If you have specific question(s) about your CYP's sensory needs that aren't covered in the Universal Provision Virtual Therapy package, you will have the option to contact our team to request further support.</li> <li>Continued on next page</li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable)



Bespoke Descriptor Level 4	Identification and Assessment	Teaching and Learning Strategies and Interventions	Additional advice and support
		We will then liaise with you either via email or telephone to discuss your questions and to provide advice. You can expect us to provide training resources for school staff about how to understand the sensory needs of CYPren and help to make the school environment sensory accessible.	





At all levels, consider where the sensory needs maybe coming from e.g. an all guide us if there may be other areas of the young person's profile that would be <b>Provision:</b> Daily, specific specialised input at all times across all aspects of the curriculum           Bespoke Descriptor         Identification and Assessment           Level 5         Identification and Assessment			<ul> <li>need, a trauma response etc. to help</li> <li>Documents: Usually have an EHC Plan</li> <li>Additional advice and support is available from:</li> </ul>
Will experience severe sensory needs that have a very significant impact on everyday life, e.g. avoidance of environment or activity , significant distress or inability to attend and focus	AET Sensory Checklist• Observation• Data tracking• Teacher assessments• CYP Progress meetings• CYP/Young Person voice• One Page Profile/Learner Profile• Parent/Carer voiceAn EHC is likely to be in place to draw together information, advice, aspirations and planned outcomesAssessment tools identified, where and when they can be used to help unpick need and measure impact of supportMulti agency planning, Outside Agency advice and recommendations are followedAccess arrangements considered	<ul> <li>There is agreement between professionals (Educational Psychology Service, Locality SENCO, Local Authority SEND Manager etc.) that the CYP's needs and provision in place constitute a Level 5.</li> <li>Staff should have considered and implemented effective and appropriate strategies from previous levels, especially level 4.</li> <li>In addition, the following will be in place: <ul> <li>A personalised sensory plan - Identifying individual sensory needs and steps taken to support.</li> <li>Physical sensory consideration such as alterations to the uniform, seating plan and sensory support tools may be appropriate.</li> </ul> </li> </ul>	May make use of Locality Panels – Stage 1 or 2 (if Applicable)



Bespoke Descriptor Level 5	Identification and Assessment	Teaching and Learning Strategies	Additional advice and support is available from:
		Make use of Sheffield CYPren's Sensory Service - <u>Sensory</u> <u>Processing support videos and</u> <u>resources</u>	
		Specialist Provision offer from the Sensory Service: Sometimes, despite putting in place sensory strategies at school and home, your CYP may need a more personalised approach. If your CYP is on a reduced timetable, spends significant time away from the classroom, is at risk of exclusion, or is unable to attend school at all, with sensory issues being a significant factor, we will work with you and your CYP and school staff to help develop an individual plan for supporting your CYP's sensory needs in school and at home. How Do I Get Help from the Sensory Service? All the information, advice and resources are freely available at our <u>Sensory Service Virtual Therapy</u> <u>Area</u> .	

#### 4E Sensory and Physical: Sensory needs Screening and Assessment Tools and Further Information

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Screening Tools	
<u>AET sensory checklist</u> – Speak to your ASCET link teacher	
Assessment Tools	
<u>Sensory assessment checklist</u> from the National Autistic Society	
Further information	
<ul> <li>Further information and training available from the <u>Sensory Service.</u></li> <li>Useful books: <u>Understanding my Child's Sensory Signals</u></li> </ul>	



		PfA Ou	tcomes	
	Employability/Education	Independence	Community Participation	Health
Early Years (0-4 Years)	Child will access the EY environment and activities in accordance with their physical capabilities, to support them to make progress towards early learning goals. N.B, for some children with complex medical/physical needs, alternative feeding plans will need to be considered following guidance from relevant professionals. Child will dress and undress with increasing independence in accordance with their physical/medical needs.	independently in accordance with their physical/medical needs/diagnoses. Child will participate in mealtime routines using cutlery with increasing dexterity and independence to feed themselves appropriately.	Child will access community-based activities/clubs/groups in accordance with their physical/medical capabilities, to facilitate shared play and interaction and to support the development of friendships with peers. Child will access visits/day trips as appropriate.	Child will attend regular medical, optical and visual checks to support good health. Child will comply with self-care routines and medical routines to support good physical health. Child will engage in regular physical exercise to maintain good physical health and support the development of gross motor skills. Child will try a range of new foods offered to support the development of a balanced and healthy diet.
	Child will have reached expected outcomes in relation to EFYS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Prime Areas of Learning for Physical Development: Moving and Handling and Health and Self Care. http://www.primaryresources.co.uk/foundation/docs/devmatters_tracking_2012.doc			
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Early Years Ranges Guidance: Physical, Medical and Sensory Needs.			





	PfA Outcomes				
	Employability/Education	Independence	Community Participation	Health	
Reception to Y2 (5-7 years)	Child will cooperate with self-care routines and medical routines, including those associated with any physical or medical conditions/diagnoses. Child will access regulatory activities to support them to concentrate and maintain focus in the classroom.	Child will cooperate with self-care routines, medical routines including those associated with any physical or medical conditions/diagnoses	Child will access community-based activities/clubs/groups in accordance with their physical/medical capabilities, to facilitate shared play and interaction and to support the development of friendships with peers. Child will access visits/day trips as appropriate.	Child will attend relevant health, dental, optical and hearing checks as required to promote good physical health. Child will cooperate with self-care routines and medical routines including those associated with any physical or medical conditions/diagnoses. Child will participate in sport and physical exercise in accordance with their physical/medical capabilities.	
Y3 to Y6 (8-11 years)	Child will be able to access careers information, opportunities to meet role models/talks from visitors to school through adaptions and formats which consider physical, sensory or medical needs as appropriate to individual circumstances.	Child will be able to move around the school environment as required. Child will begin to develop age- appropriate life skills to include basic cooking skills, awareness of transport and requirements for travel (tickets, timetables etc.), money in accordance with their physical and medical capabilities.	Child will be able to access after- school clubs, youth groups, sports teams, community-based groups in accordance with their physical and medical capabilities.	Child will be able to manage minor health needs. Child will make healthy eating choices and will engage in physical exercise in accordance with their physical/medical capabilities.	
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Physical, Medical and Sensory Needs: HI, VI, Dual Sensory Needs, Physical and Medical Needs.				

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	PfA Outcomes				
	Employability/Education	Independence	Community Participation	Health	
Y7 to Y11 (11-16 years)	Child will be able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and formats which consider physical, sensory and/or medical needs as appropriate to individual circumstances. Child will understand supported employment options e.g. Access to Work Child will be able to make smooth transitions to new settings to facilitate emotional wellbeing and	Child will be able to move around the school or work-based environment as required. Child will demonstrate age- appropriate independent living skills to include cookery, access to local transport, money and time management in accordance with their physical and medical capabilities.	Child will be able to access transport options within their physical and medical capabilities to facilitate independence and community participation. Child will be able to access community-based groups/activities in accordance with their physical and medical capabilities.	Child will be more independent in managing more complex health needs in accordance with their physical and mental capabilities. Child will attend their annual health check with their GP if registered as having a learning disability.	
Provision	support integration and inclusion.       Image: support integration and inclusion.         Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance:         Physical, Medical and Sensory Needs: HI, VI, Dual Sensory Needs, Physical and Medical Needs.				



	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 16 (16-18 years old)	YP will be able to access and function within work-based environments in relation to apprenticeships, supported internships and traineeships in order to progress with future career choices. YP will be able to present their skills in written form (C.V) to help secure future education and work-based options.	<ul> <li>YP will have life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances.</li> <li>YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.</li> <li>YP will have an awareness of risk within the home context and will manage this appropriately in order to remain safe.</li> <li>YP will plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.</li> </ul>	YP will be able to access community, leisure and social facilities to enable participation within the local community in accordance with the YP's preference. YP will be able to access appropriate transport in order to facilitate participation within community, leisure and social activities. YP will show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.	<ul> <li>YP will recognise the need for dental, medical and optical health and will take responsibility for making appointments as required.</li> <li>YP will take steps to remain physically active and healthy in the context of their individual circumstances.</li> <li>YP will make healthy eating choices in order to promote physical wellbeing.</li> <li>YP will maintain any physiotherapy regimes necessary to ensure physical health and optimum mobility in the context of their individual circumstances.</li> <li>. YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.</li> </ul>

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	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 19	<ul> <li>YP will be able to access and function within work-based environments in relation to voluntary work, community based projects and paid work in order to progress with future career choices.</li> <li>YP will be able to access and function within higher education provision in order to progress with future career choices.</li> <li>YP will be able to present their skills in written form (C.V.) to help secure future education and work-based options.</li> <li>YP will be able to access job centre provision to support pathways into employment post education.</li> </ul>	YP will access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing.	<ul> <li>YP will be able to access community, leisure and social facilities to enable participation within the local community in accordance with the YP's preference.</li> <li>YP will be able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</li> <li>YP will show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</li> </ul>	<ul> <li>YP will recognise the need for dental, medical and optical health and will take responsibility for making appointments as required.</li> <li>YP will take steps to remain physically active and healthy in the context of their individual circumstances.</li> <li>YP will make healthy eating choices in order to promote physical wellbeing.</li> <li>YP will maintain any physiotherapy regimes necessary to ensure physical health and optimum mobility in the context of their individual circumstances.</li> <li>.</li> <li>YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.</li> </ul>



	PfA Outcomes				
	Employability/Education	Independence	Community Participation	Health	
Provision Post 16 and Post 19	Adapted education and workplace arrangements to consider the YP's physical and medical needs Access to onsite medical professionals as required Adaptations to daily education/employment-based routines to consider any ongoing Physiotherapy/OT programmes. Adult support as required to facilitate delivery. Access to appropriate equipment/resources: standing frames, wheelchairs (manual and power), walking aids Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio aids; electronic voice output communication aids (VOCA) as appropriate. Adult support to facilitate alternative/adapted forms of communication as required.	Adapted living arrangements suited to the YP's physical and medical needs Access to appropriate equipment/resources: standing frames, wheelchairs, manual and power, walking aids Access to equipment to facilitate independence in self-care routines Adapted forms of accommodation and transport to consider the physical needs of the YP and facilitate independence Enhanced PSHCE/life skills and SRE programmes to ensure skills embedded	Access to appropriate equipment/resources: standing frames, wheelchairs, manual and power, walking aids Adapted forms of accommodation and transport to consider the physical needs of the YP and facilitate independence Provision of information relating to disabled access and adapted environments. Adult support to facilitate community participation Programmes of study to facilitate the YP understanding of risk in the context of community participation and support to enable them to make informed choices suited to the YP's individual needs	Access to equipment to facilitate independence in selfcare routines Access to appropriate equipment/resources to facilitate mobility: standing frames, wheelchairs, manual and power, walking aids Medical teams or trained carers on site as required or if a day provision Access to a medically trained carer as required. Access to Occupational Therapy programmes to be carried out by a trained carer Access to physiotherapy programmes that will be delivered by trained carers/ family members. Training in the delivery of emergency medications to appropriate professionals/carers People working with/supporting people in this cohort must have knowledge of the individuals' method of communication. Sensory input where required	