Cheshire East Toolkit for Inclusion 0 – 25 Years

Reviewed: January 2024

Contents

1. Foreword

Cheshire East is ambitious for all children and young people (CYP), supporting them to succeed and grow as individuals. All our children and young people deserve to be happy, healthy and safe and enjoy a life that is filled with fun and opportunities to learn and develop. Their interests are at the heart of all we do and through working TOGETHER we will make Cheshire East a great place to be young. Cheshire East has many reasons to be proud of its existing services and the quality of provision; however, we are not complacent and know that there is more we need to do to improve outcomes for children and young people with SEND. The aim of this guidance is to support colleagues in meeting needs and to achieve the best outcomes for our children and young people.

This graduated approach document fulfils a Department for Education (DfE) requirement that each Local Authority (LA) explains the special educational provision it expects to be made from within a mainstream school's or early years setting's budget. This document makes explicit the provision for children and young people requiring support from within the educational establishment without recourse to an Education, Health and Care needs assessment.

This guidance is important to all educational settings because:

- All Cheshire East children and young people should have the same minimum entitlement to provision for special educational needs.
- Settings and local authority staff need a joint understanding to support their dialogue about individual learners.

It supports the local authority in its statutory duty to monitor and evaluate effectiveness of special educational needs provision. It provides the threshold for access to High Needs Funding and/or eligibility for an Education, Health and Care Plan.

The SEND Code of Practice clearly states that, where possible, children and young people should attend mainstream schools in their local area and should be encouraged to feel part of their local community. This graduated approach guidance sets out the continuum for a range of needs and identifies the types of interventions and support available from Universal 'Quality First Teaching' (all teachers) through to 'Specialist'.

This guidance has been developed in co-production with Special Educational Needs Coordinators (SENCOs), Post-16 representatives, parent/carers and a wide range of specialist education, care and health services. This document provides advice and guidance to help educational settings, including early years providers, schools and post 16 settings, to continue to build and enhance their offer for some of our most vulnerable learners.

I would like to thank all our partners across the SEND system who continue to work tirelessly to improve services and provision to ensure our children and young people achieve their aspirations and dreams with the right help, from the right people, at right time.

2. Acknowledgements

The compilation of this guidance would not have been possible without the commitment of the following individuals and teams (individuals shown in black have since left their listed organisation.

Where organisations have changed names, their new names are shown in italics):

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3. Introduction

3.1. What are Special Educational Needs (SEN)?

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

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

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

A child under compulsory school age has special educational needs if he or she has a learning difficulty or disability and will require special educational provision upon entering school.

Disability

Many children and young people who have SEN may have a disability under the Equality Act 2010 – that is: "a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities."

Children and young people with such conditions do not necessarily have SEN, but a disabled child or young person may be deemed to have SEN if they require special educational provision.

3.2. Purpose of this document

The Cheshire East Toolkit for Special Educational Needs and Disability (SEND) is aimed at **all educational providers and settings** supporting Cheshire East children and young people aged 0-25 years.

It outlines the provision and support that Cheshire East Council expects to be in place in all educational settings which support Cheshire East children and young people with SEN, and therefore forms an important part of the Cheshire East Local Offer for SEND.

Its purpose is to provide detailed guidance on how educational settings can identify children and young people with different **types** and **levels** of need, along with information on appropriate steps and strategies to support them. It also provides clear information about when a request for an Education, Health and Care needs assessment, or specialist services, may be required.

4. The Continuum of Need for SEN

4.1. Types of Need

The term "Special Educational Needs" covers a broad range of different **types** and **levels** of need, and special educational provision that is provided for a child or young person should match their particular special educational need. *The SEND Code of Practice: 0-25 years (January 2015)* describes **four broad areas of need**; these are outlined on the following page. These areas give an overview of the range of needs that educational providers and settings should plan for.

Types of Need

Communication and Interaction

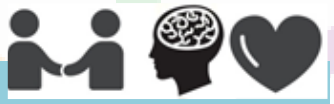
This includes:

- **Speech, language and communication needs** (SLCN). Children and young people with SLCN have difficulty in communicating with others; this may be because they have difficulty saying what they want to and being understood by others, difficulty understanding what is being said to them or they do not understand or use social rules of communication.
- **Autistic Spectrum Condition** (ASC), including Asperger's Syndrome and Autism.

Social, Emotional and Mental Health

Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming **withdrawn or isolated**, as well as **displaying challenging, disruptive or disturbing behaviour**. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as **attention deficit disorder**, **attention deficit hyperactive disorder** or **attachment disorder**.

Cognition and Learning



Support for learning difficulties may be required when children and young people learn at a slower pace than their peers. Learning difficulties cover a wide range of needs, including:

- **Moderate learning difficulties** (MLD)
- **Severe learning difficulties** (SLD) where children and young people are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication.
- **Profound and multiple learning difficulties** (PMLD) where children and young people are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.
- **Specific learning difficulties** (SpLD) affect one or more specific aspects of learning. This includes a range of conditions such as dyslexia, dyscalculia and dyspraxia.

Sensory and/or Physical Needs

Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. This includes children and young people with:

- **Visual impairment** (VI)
- **Hearing impairment** (HI)
- **Multi-sensory impairment** (MSI) (a combination of vision and hearing difficulties)
- **Physical disability** (PD)

Detailed information about the specific needs of Cheshire East Children and young people can be found within our Joint Strategic Needs Assessment (JSNA) and our SEN Sufficiency Statement.

4.2. Levels of Need

According to *The SEND Code of Practice: 0-25 years (January 2015),* the **Graduated Approach** can be described as:

"A model of action and intervention in early education settings, schools and colleges to help children and young people who have special educational needs. The approach recognises that there is a continuum of special educational needs and that, where necessary, increasing specialist expertise should be brought to bear on the difficulties that a child or young person may be experiencing."

The purpose of identification is to work out what action the educational setting needs to take, not to fit a child or young person into a category. In practice, individual children or young people often have needs that cut across all these areas and their needs may change over time, in terms of both type and level. The support provided to an individual child or young person should always be based on a full understanding of their particular strengths and needs.

In addition to being described via different broad areas of needs, Special Educational Needs (SEN) can also exist at different levels of severity. The different levels exist as a continuum and needs may go up and down the continuum over time. This is visualised in the Cheshire East **Continuum of Need for SEN diagram** on the following page. The Graduated Approach (described in the following section) provides advice for educational settings on identifying the appropriate level of need for individual children and young people on this continuum through observing the impact of the child or young person's need(s) on their learning.

5. Introducing the Graduated Approach

5.1. What is the Graduated Approach?

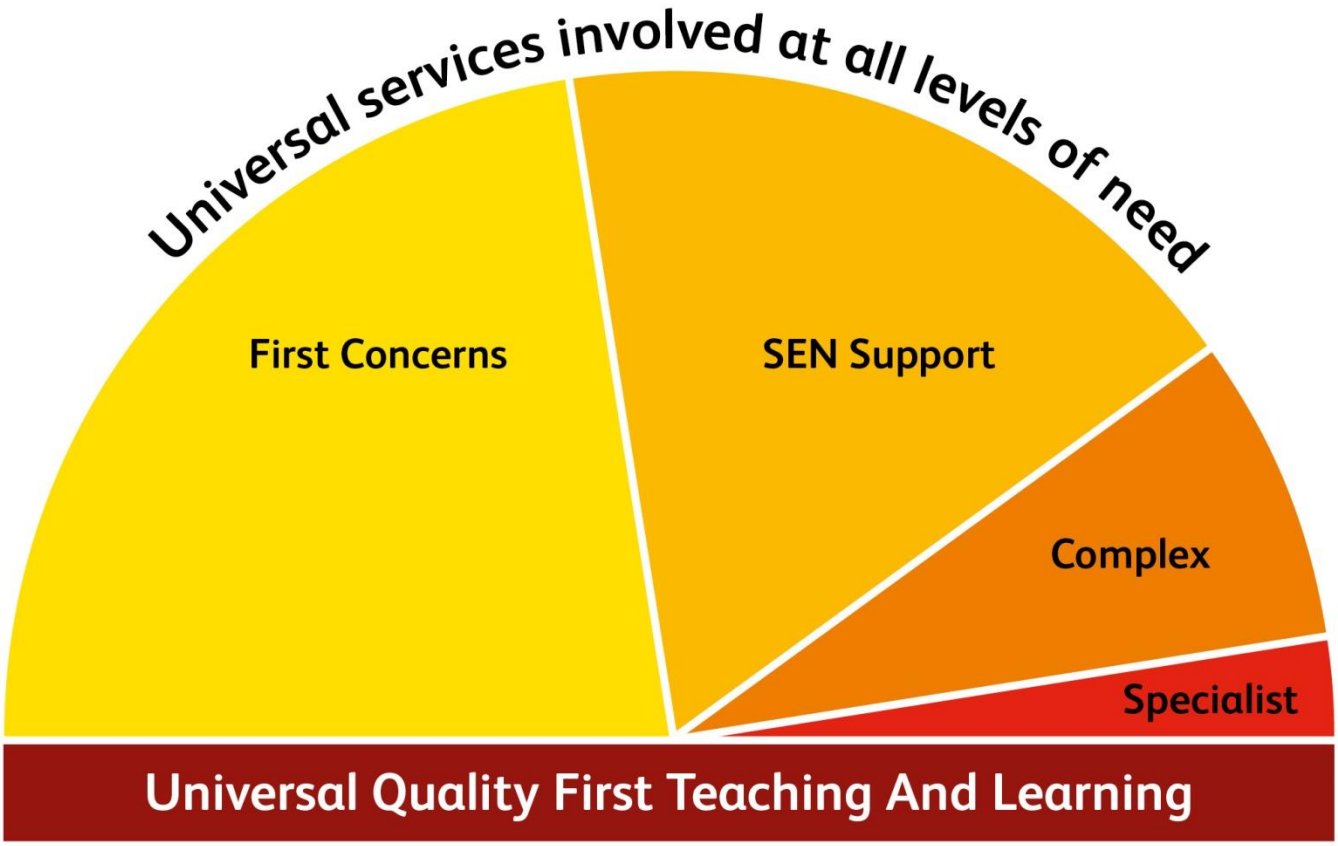
In Cheshire East we are meeting the different types and levels of needs of children and young people with SEN through the use of a **'Graduated Approach**'.

Where a child or young person is identified as having SEN, educational settings should take action to remove barriers to learning and put effective special educational provision in place through the use of a Graduated Approach.

The **Universal** level describes the support that is available to all Cheshire East children and young people, including those with and without SEN. Within the Cheshire East Graduated Approach, at the Universal Level, needs are met through Quality First Teaching and Learning, along with universal health and care services that are available to all children and young people (e.g. GPs, dentists etc.).

Universal services such as Quality First Teaching are provided to all children and young people, and continue to be provided to children and young people with SEN who are also receiving additional support through other levels of the Graduated Approach. This means that all teachers are teachers of children and young people with special educational needs.

Support for children and young people at both **First Concerns** and **SEN Support** levels is tailored to the needs of the individual child or young person, and provided through a variety of means, for example: assistive technology, individual or small group teaching, or in-class support.



First Concerns

Children and young people who have been identified as having emerging difficulties.

SEN Support

Children and young people who have been identified as having special educational needs requiring provision that is additional to and different from the mainstream curriculum.

Child and young person centred approach

Specialist

Children and young people who have an EHCP and are receiving their education in specialist provision.

Complex

Children and young people who have been identified as having significant and complex difficulties and may be in the process of an EHC needs assessment or have an EHC Plan in place.

Some children and young people's needs will be more **complex** in some contexts, and the Graduated Approach describes additional support to meet these needs. When external agency evidence from Cheshire East specialists suggests that children and young people may require additional support over and above the 'SEN Support' level provided by the educational setting, we conduct a multi-agency assessment (Education, Health and Care needs assessment) to determine what additional support they need. If following assessment, it is found that a child or young person will require provision in accordance with an **Education, Health and Care (EHC) Plan**, an EHC Plan will be written.

In Cheshire East, the local authority has provided schools with sufficient funding to provide additional support up to a value of £6,000 and we will usually therefore only issue an EHC Plan where a child or young person requires provision in excess of this. Post-16 providers also receive funding in order to provide the first £6,000 towards the additional support costs for high needs students (see the funding section for more information on funding arrangements for SEN).

The majority of children and young people with SEN will have their needs met though additional support within mainstream provision. A very small proportion will require **specialist** provision. This would only be agreed as part of a multi-agency decision-making process which assesses evidence (including Cheshire East specialist external agency advice) of the child or young person's need and agrees that the child or young person requires specialist educational provision to be made in accordance with an EHC Plan and such provision is only deliverable in a specialist setting.

The SEND Code of Practice: 0-25 years states that, where a child or young person has SEN but does not have an EHC plan, they must be educated in a mainstream setting except in specific circumstances (e.g. attending a special school established in a hospital etc.)

5.2. Using the Graduated Approach

The Graduated Approach is provided in this document as a **series of tables** which:

- provide advice on **identifying** different types and levels of need within the Continuum of Need for SEN through the use of 'impact on learning' indicators that would be observed by staff within the educational setting. Children and young people are not expected to have every indicator at a certain level, but must have more than one.

- describe the **actions** that professionals within educational settings are expected to take to **meet the needs** of children and young people with SEN. This includes information relating to communicating with families and next steps, strategies to be implemented and the evidence that should be recorded.

The tables are organised via the broad areas of need outlined by the Department for Education in *The SEND Code of Practice: 0-25 years*, with some broad areas further split to provide more detailed information on specialist strategies. For each area of need, there are individual tables for the different levels within the Cheshire East Continuum of Need for SEN (First Concerns; SEN Support; Complex and Specialist).

By using the Graduated Approach, we expect reasonable adjustments to be made to ensure that the majority of children and young people with SEN are able to access and have their needs met within mainstream provision, so that they enjoy the same opportunities as their peers wherever possible and are fully included within their communities.

This document is intended to provide assistance for educational settings in supporting children and young people with SEN, and recognises that children and young people's needs must be considered individually. It is not to be viewed as a blanket policy.

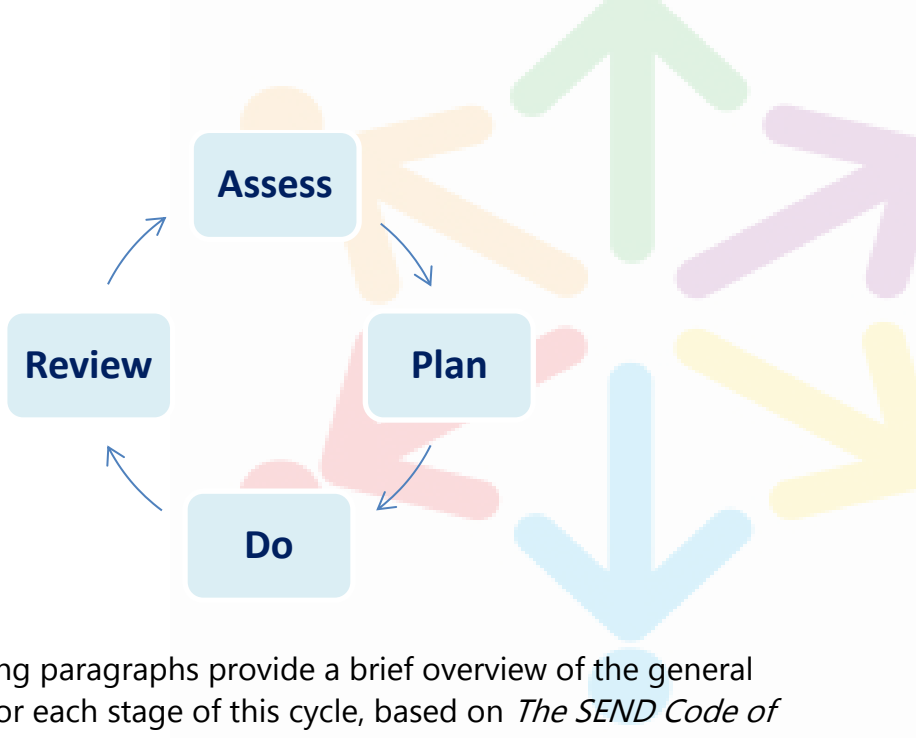
6. Principles of the Graduated Approach

The below principles should be adopted at all stages of the Graduated Approach, not just for children and young people that are undergoing EHC needs assessments or have an EHC Plan in place.

6.1. Assess, Plan, Do and Review

According to *The SEND Code of Practice: 0-25 years (January 2015)*, supporting children and young people with SEN via the Graduated Approach includes the use of a four-part cycle of 'Assess, Plan, Do and Review'.

Through this cycle, earlier decisions and actions are revisited, refined and revised with a growing understanding of the child or young person's needs and of what supports the child or young person in making good progress and securing good outcomes. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to an individual child or young person's needs.



The following paragraphs provide a brief overview of the general principles for each stage of this cycle, based on *The SEND Code of Practice: 0-25 years (January 2015)*:

Assess – a clear analysis of the child or young person's needs should be carried out by those teaching and supporting the child or young person – this includes the early years key person, the class teacher(s) or the tutor/lecturer in conjunction with the SENCO or additional learning support team.

This initial assessment should be reviewed regularly to ensure that support is matched to need. Where there is little or no improvement in the child or young person's progress, more specialist assessment may be called for from specialist teachers or from health, social care or other agencies beyond the setting. In some cases, outside professionals from health or social care may already be involved with the child. These professionals should liaise with the educational setting to help inform the assessments. Where relevant professionals are not already working with the educational setting, staff from the

educational setting should contact them (if parents agree for children and young people in early years or school).

Plan – Professionals within the educational setting (early years key person, the class teacher(s) or the tutor/lecturer in conjunction with the SENCO or additional learning support team) should work with the child or young person and their parents to agree the outcomes they are seeking, the interventions and support to be put in place, the expected impact on progress, development or behaviour, and a clear date for review. The support and intervention provided should be selected to meet the outcomes identified for the child or young person, based on reliable evidence of their effectiveness. Any related staff development needs should also be identified and addressed.

Do - The key person, class or subject teacher remains responsible for working with the child or young person on a daily basis (even where interventions involve group or one-to-one teaching). The SENCO/additional learning support team should support the key person, class or subject teacher or tutor/lecturer in the further assessment of the child or young person's particular strengths and weaknesses, in problem solving and advising on the effective implementation of support.

Review - The effectiveness of the support and interventions, and their impact on the child or young person's progress, should be reviewed regularly and in line with any agreed dates. The child or young person's views should be taken into account during the evaluation of the quality and impact of the support provided. Professionals within the setting should revise the support in light of the child or young person's progress and development, and decide on any changes to the support and outcomes in consultation with the child or young person and their parent(s).

Educational settings should revisit this cycle of action, and refine and revise their decisions about support as they gain a richer understanding of the child or young person and what is most effective in helping them secure good outcomes. Support for all children and young people with SEN should be kept under review, regardless of whether or not the child or young person has an EHC Plan.

6.2. A person-centred approach

An individual child or young person with SEN should always be at the centre of any assessment or planning process that focuses on them and a person-centred approach should be used. Person-centred approaches are about discovering and acting on what is important **to** the child or young person, what is important **for** them and finding the balance between these. A person-centred approach reflects what a child or young person is able to do, what is important to them (now and in the future) and thinks about what support they might need in order to reach their potential. It is therefore a process of continual listening and learning. Being person-centred includes problem solving and thinking about how we can allocate the most appropriate support and resources in order to enable children and young people with SEN to work towards their aspirations. These resources may come from the child or young person's own network and/or available support within the local community, not just from specialist services.

The SEND Code of Practice: 0-25 years (January 2015) emphasises the importance of using a person-centred approach during assessment and planning processes for children and young people with SEN. It states that assessment and planning processes should:

- focus on the child or young person as an individual
- enable children and young people and their parents to express their views, wishes and feelings
- enable children and young people and their parents to be part of the decision-making process
- be easy for children, young people and their parents or carers to understand, and use clear ordinary language and images rather than professional jargon
- highlight the child or young person's strengths and capabilities
- enable the child or young person, and those that know them best to say what they have done, what they are interested in and what outcomes they are seeking in the future
- tailor support to the needs of the individual
- organise assessments to minimise demands on families
- bring together relevant professionals to discuss and agree together the overall approach, and
- deliver an outcomes-focused and co-ordinated plan for the child or young person and their parents

6.3. Co-production

Although there is no single definition of co-production, put simply, co-production means '**making something together**'. When applied to supporting children and young people with SEN, co-production describes children and young people with SEN, their parent carers, and professionals across multiple agencies and sectors working together as equal partners to design, plan, deliver and review support and services in order to achieve shared outcomes. Co-production recognises children and young people, parent carers and professionals as assets that all have important contributions to make due to their differing knowledge, skills and experience. Note that there is a difference between co-production and participation: participation means being consulted while co-production means being equal partners and co-creators. For co-production to be most effective, all partners should be brought in at the earliest opportunity when planning or designing support or services.

In line with *The SEND Code of Practice: 0-25 years (January 2015)*, co-production should take place as far as possible at two levels for children and young people with SEN and their parent carers:

1) At an individual level

Children and young people with SEN, and their parents, must be involved in discussions and decisions about their individual support. To support this, children and young people and their parents should be provided with relevant information on their rights in accessible formats, along with time to prepare for discussions and meetings. For children and young people undergoing an EHC needs assessment or with an EHC Plan, *The SEND Code of Practice: 0-25 years (January 2015)* states that "*Early years providers, schools and colleges should also take steps to ensure that young people and parents are actively supported in contributing to needs assessments, developing and reviewing Education, Health and Care (EHC) plans*". This includes capturing the views and wishes of children and young people with SEN, and their parents, in an accessible manner for the individual, which could involve the use of visuals, pictures etc. in order to capture the child or young person's voice. Note that *The Children and Families Act 2014* gives significant new rights directly to young

people once they reach the end of compulsory school age (the end of the academic year in which they turn 16). When a young person reaches the end of compulsory school age, local authorities and other agencies should normally engage directly with the young person rather than their parent, ensuring that as part of the planning process they identify the relevant people who should be involved and how to involve them. Some young people may require support in expressing their views, which may include support from an advocate (who could be a family member or a professional). However, the views of parents must not be used as a proxy for young people's views.

2) At a strategic level

The SEND Code of Practice: 0-25 years (January 2015) also states that children and young people with SEND, and their parents, must be involved in discussions and decisions about local provision. This includes involving children and young people with SEND and their parents in reviewing educational and training provision and social care provision, and in preparing and reviewing the Local Offer.

6.4. Improved outcomes for children and young people

In line with *The SEND Code of Practice: 0-25 years (January 2015),* we believe that there should be a strong focus on high aspirations and on improving outcomes for all children and young people with SEN. Outcomes are not a description of the support or provision that is in place for a child or young person. Instead, outcomes describe the benefit or difference made to an individual child or young person as a result of an intervention, and as such, there should be a focus on outcomes from the earliest stages of identifying and supporting children and young people with SEN. Any planning and delivery of support should always be focused on the outcomes that have been identified for the individual child or young person (i.e. how such support will contribute to achieving the agreed outcomes) and should be based on reliable evidence of effectiveness. Support should be reviewed regularly as part of the 'Assess, Plan, Do, Review' cycle and be adapted or replaced depending on how effective it has been in achieving the agreed outcomes.

The Code also states that with high aspirations, and the right support, the vast majority of children and young people can go on to achieve successful long-term outcomes in adult life. The local authority, educational settings and other services and partners should work together to prepare children and young people with SEN for adulthood and help them to realise their ambitions. The Graduated Approach and Preparation for Adulthood section of this document provides further information on the four nationally agreed Preparing for Adulthood outcomes for children and young people with SEN.

6.5. Training and Workforce Development

The successful delivery of a graduated approach to SEN is dependent upon the individuals involved in supporting children and young people with SEN (across all agencies and at all levels) having the appropriate skills and knowledge that they require to work effectively and efficiently.

This document provides educational settings with information and advice on identifying and supporting children and young people of all ages with different types and levels of SEN, but in order to fully embed this information and advice, all future local training on SEN will be based on and build upon this document. An ongoing multi-agency workforce development programme for SEND covering different specialisms and levels of expertise will ensure that professionals (and parent carers) have opportunities to further develop their knowledge and skills.

7. Emotional Based School Non-Attendance

What is EBSNA?

Emotionally based school non-attendance, also known as school refusal, emotional based school refusal (EBSR) or Anxiety Related Non-Attendance (ARNA) is an umbrella term that describes a group of children and young people who find it difficult to attend school due to a number of emotional factors, such as stress, anxiety or feeling overwhelmed which can often lead to prolonged absence from school.

In Cheshire East, the term Emotionally Based School Non-Attendance (EBSNA) is used to encompass children and young people who are unable to attend school because of increased feelings of fear and anxiety that may make school feel unsafe, uncomfortable, or overwhelming. EBSNA is not a child or young person choosing not to attend or being defiant.

7.1. Context and data

The number of children experiencing EBSNA has increased significantly in recent years. The percentage of persistent absentees nationally in the academic year 2022/2023 (attendance below 90%) was 24.2% according to Government statistics (Gov, 2023).

7.2. What are the possible causes of EBSNA?

Individual, family, school and community factors can all contribute to a child or young person developing EBSNA. Awareness of the early signs of EBSNA is the responsibility of all school staff who can start the processes of support prior to Educational Psychology involvement. The following table shows a non-exhaustive list of possible risk factors:

Individual	Family	School	Community
Low self-esteem	Parental physical or Mental health difficulties	Academic pressures such as exams	Living in an unsafe neighbourhood
Fear of failure	Separation or divorce of parents	Key transition points	Coming from a low socioeconomic background
Adverse Childhood Experiences (ACEs)	Change of family dynamic e.g. new sibling being born	Bullying or difficult peer relationships	Poor access to public transport
Age	High levels of family stress	Physical school environment	Living far away from the school
Learning or developmental need	Loss and bereavement	Unexpected changes e.g., staff or timetable changes	Differences in cultural views regarding education
Physical illness and/or disability	Sibling physical or mental health needs	School holiday periods	Marginalisation from the community
Autism Spectrum Condition (ASC)	Attitudes towards neurodivergent young people within the family	Overwhelm within the school related to sensory differences	Discrimination and prejudice within local community

7.3. What are the early indicators

It is important to note that the early signs of EBSNA may be noted by parents/carers and not as obvious to school staff. Thus, it is important that parental reports of difficulties going into school are taken seriously by school staff and that EBSNA is considered. Below is a non-exhaustive list of some possible signs of EBSNA:

- Complaints of tummy ache or feeling sick before going to bed or in the morning
- Frequent expressions of disliking school
- Expressing a desire to attend classes but is unable to do so
- Social isolation and avoidance of classmates or peer group
- Low self-esteem and confidence
- Stays at home during school hours generally with parents' knowledge
- Reluctance to leave parents or get out of the car
- Patterns of nonattendance, for example not attending on particular days or lessons
- Severe emotional reactions when attempting to go to school, for example fearfulness anxiety, anger, low mood, physical symptoms such as tummy ache, sickness, or headaches

7.4. What is the impact of EBSNA

- Academic attainment affected
- Emotional stress on their families
- Financial implications of a parent having to stay at home with the child or young person
- Reduced social opportunities and limited interaction with their peers
- Reduced employment opportunities
- Missing out on positive school experiences e.g., trips

7.5. What support is available for schools and settings

EBSNA training from Cheshire East Educational Psychology Service. Please contact the EP Traded inbox on Traded.EpService@cheshireeast.gov.uk to book.

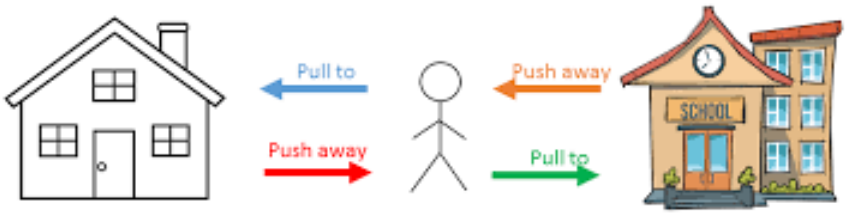
You can refer to the Education Inclusion Panel to gain advice and support with a child or young person who is persistently absent.

7.6. What can schools and settings do to help

Push and Pull factors

It is important to recognise and understand the push and pull factors involved to enable support to be given.

This encourages the young person and adults around them to think about the things that pull them to school and home, and what factors push them away. This can allow a better understanding of how the young person is feeling, and to help them feel supported and listened to.



Additionally, this can also help to identify the strategies and interventions which may be beneficial in supporting a reintegration into school. Once the push and pull factors have been identified, these can used to establish the function/s of the non-attendance, as seen in the table below. There can be more than one function and may be helpful to establish which one is the primary function. This can be done using different colours or numbering them.

Resources to Obtain Pupil Voice and Identify Push and Pull Factors

- School Wellbeing Cards (Dr Jerricah Holder)
- A Therapeutic Treasure Deck of Sentence Completion and Feelings Cards (Dr Karen Treisman)
- Drawing the Ideal Self (Dr Heather Moran)
- Drawing the Ideal School
- EBSNA Card Sorting Activity (Lancashire EBNSA Guidance- Page 22)
- Children's Exploratory Drawings (CEDs)
- Mapping the Landscape - this can be accessed via your link EP

The following are all taken from the Anna Freud website https://www.annafreud.org/

(Please be aware that they use the acronym EBSA which is not used in Cheshire East)

Universal

Take a whole-school approach to mental health and wellbeing

Taking a whole-school approach to mental health has benefits for pupils, staff and families. It means involving all aspects of the school community in promoting and supporting wellbeing. By developing a culture which prioritises wellbeing and is supportive and safe, school staff can reduce the impact of EBSNA risk factors.

Keep an eye out for early indicators and start conversations.

As part of regular reviews of attendance data, school staff should try to spot early patterns of absence arising, keeping an eye out for sporadic attendance and lateness.

If staff notice these patterns emerging, beginning a dialogue with the child or young person about how they are feeling can help them open up and ask for help. These conversations can feel difficult or uncomfortable but will also let a pupil know that they are being listened to and supported.

Nurture protective factors

A protective factor is an attribute or condition that can help protect a child or young person against some of the risk factors outlined above, thereby preventing EBSNA or reducing its impact. Developing protective factors isn't something a child or young person can be expected to do alone. Schools play a very important role in developing protective factors in their pupils.

Positive and supportive communication with families

Ensuring that parents and carers feel connected and involved with the school is key to support children and young people's mental health. Due to the coronavirus pandemic, parents and carers may have disengaged from the school community. Some parents and carers may also have had difficult times at school themselves when they were younger, and their confidence in the ability of the school to support their child may be low. By finding ways to involve them in school life and communicating with them regularly, you will build parents' and carers' trust in the school. If the family of the child or young person trusts that the school will be able to support their child, they will be more likely to encourage the child to attend school, as they know that they will be cared for and supported.

Targeted

As well as working on universal approaches to mental health and wellbeing, it's also important for school staff to develop a planned process around EBSA for children and young people who require more targeted support.

You may be familiar with the assess/plan/do/review model, which is laid out in the SEND Code of Practice. If not, the SENCo in your school will know it. It is a very useful framework for working with a pupil experiencing EBSA.

Assess

• Keep an eye out for early indicators of EBSA in pupils and act quickly.

• Work with pupils to identify the risk factors they are experiencing which may be causing EBSA. The Child Outcomes Research Consortium (CORC)'s website hosts a number of different tools to help you do this.

Plan

• Co-produce a return to school action plan with the pupil, family and school all involved in the process. Agree a date of review, and share the plan with all parties involved. If the student is finding the idea of returning to school particularly difficult. the plan could focus on smaller steps - like meeting a friend from school or completing a piece of work - to begin the process of returning to school.

• Work with the child or young person on a return to school pupil support plan, detailing the support they can expect when they come back to school. Again, share this with all parties.

Do

• Maintain good communication with the family and pupil during the return to school - for example, supporting the completion of school work at home and sharing feedback on the work.

• Consider developing specific family support groups based around EBSA, so that parents and carers with children having difficulties can meet and support one another.

Review

• Monitor the progress made and adjust the plan for the next steps.

• Further consultation with other agencies may be needed.

7.7. What support is available

With thanks to Trafford Educational Psychology Service

Attendance
• Reduced or erratic attendance (please comment on patterns in notes section below). • Expresses upset/distress to leave home in the morning. • Late for school. • Expresses distress/reluctance to attend certain lesson (any specific triggers and patterns that lead to avoiding partial or full days of absences please note below). • Missing lessons/truancy. • Expresses upset/distress on return to home. • Reluctance to return to school after a school holiday.
Would the child/YP benefit from: ➢ A personalised timetable to enhance attendance, which may include differentiated entry time. ➢ Relaxing activity with a trusted member of staff in the mornings or on entry to school. ➢ Opportunities to talk to a trusted adult and engage in relaxing activities at the end of each day. ➢ A transition plan and session on the first day of each half term ➢ Detailed action plan with small steps, e.g., just putting on uniform without going to school, going for a walk with uniform on, and build upon any successes. ➢ Ensure joined up pastoral care is in place where needed and consider whether a time-limited phased return to school would be appropriate, for example for those affected by anxiety about school attendance. ➢ Input from **Cheshire East Attendance Team or the Educational Psychology Service.**

Loss and Change
• Death of carer, parent, relative, friend. • Death of a pet. • Sudden or traumatic event: could include family member(s) experiencing job redundancy or change and financial pressures. • Sudden separation from a family member (including family member working away from home/area). • Moving to a new house, school, key stage, area (including international new arrivals, a late start or in-year transfer into a new school). • Came from a smaller primary school and/or outside the catchment area. • Loss of a classmate or sibling e.g., left for college/university. • Changes in after-school care. • Other.

Would the child/YP benefit from: ➢ Support with bereavement: https://www.winstonswish.org/supporting-you/supporting-a-bereaved-child/ or https://www.onceuponasmile.org.uk/ ➢ More regular and predictable contact with family member working away/no longer living with them. ➢ A buddy system, opportunities to engage in after school activities with peers and a key adult to support them with the transition or change to friendship circle. ➢ Planned quality time with parent/caregiver. ➢ Therapeutic input through **ELSA, school counsellor, CAMHS, Kooth, etc.**

Family Dynamic
• Carer/parents requiring advice and support. • Birth of a new child. • Family separation. • Family conflict including low level difficulties e.g., working through disagreements and different cultural considerations. • Practical problems bringing the child to school. • Child acting as a carer to family member(s) with medical, mental health and/or substance dependency needs. • Family member(s) who have had difficult experiences of school or who have avoided school. • Anxious to leave carer/parent (separation anxiety).
Would the child/YP benefit from: ➢ Parent-school meetings/communication with a supportive staff member able to listen and advise. ➢ Financial or respite support for parent/carer. ➢ Planned morning routines that may better support the child/YP to come into school. ➢ Support at the school gates from a trusted adult. ➢ Advice to parent about how reassure child e.g., co-developing an Emotion Coaching script (please discuss with Educational Psychology if this approach is unfamiliar). ➢ A different entry time or entrance area. ➢ Input/advice from parent support services: **Cheshire East Parent Carer Forum, Social Care, Cheshire Without Abuse, Young Carers.**

Curriculum/Learning Issues (Needs)
• Low levels of progress. • PE and/or games issues. • General learning difficulties e.g., literacy. • Specific subject difficulties and low confidence. • Exam or test anxiety. • Difficulties with relationships with school staff and/or particular teacher/adult. • Negative view of school. • Problems keeping up in lessons. • Fear of failure, making mistakes and not meeting expectations. • Homework challenges. • Passive learning approach.
Would the child/YP benefit from: ➢ Differentiated and supported classroom learning and/or interventions (refer to the Cheshire East SEND Toolkit for Cognition and Learning for further ideas) ➢ Pre-teaching of key vocabulary or information ➢ Effective Feedback and Growth Mind-set teaching methods, focussing of self-recognition of progress (please seek advice from your Educational Psychologist if this approach is unfamiliar) ➢ Highlighting and focus on preferred learning activities in the school timetable / reduced timetable ➢ Ensure child/YP is clear what their day will look like, e.g., what, where, when, who using visual resources such as a visual timetable ➢ Access arrangements in exams ➢ An end of day to record what has gone well and what they are looking forward to share with parents/carers ➢ Access to Homework Club or a reduction in homework demands ➢ Opportunities to explore the benefits of learning in relation to things they are motivated by e.g., a skill that will help them be able to do something for themselves/ a future job ➢ Using child/YP interests and strengths to engage them in learning ➢ An assessment of barriers to learning through school-based assessments, **Educational Psychology Service** where needed. ➢ An increased level of support in school, up to and including an **Education, Health and Care Plan (EHCP).**

Social and Personal
• Has been or is being bullied and/or expresses worries about the threat of being bullied. • Appears to have few friends/friendship issues. • Difficulties with communication and language. • Difficulties and issues with play/break times (socially isolated and or lonely). • Fewer leisure interests in school and/or home.
Would the child/YP benefit from: ➢ Create opportunities for the child/YP to re-establish contact with peers and key staff (in or outside of school). ➢ Ensuring key staff are available to check in with the child/YP regularly. ➢ Ensuring support is not overly 'visible' to others. ➢ A whole class or group intervention to support relationships e.g., Circle of Friends (please discuss with Educational Psychology if these approaches are unfamiliar). ➢ Well supported restorative opportunities to support friendships (please discuss with Educational Psychology if these approaches are unfamiliar). ➢ Opportunities to develop key social skills through activities, games and adult and peer role modelling each day. ➢ Structured activity and/or access to quieter spaces at break and lunch times. ➢ Supported opportunities to engage in enrichment/extra-curricular activities of interest. ➢ A **Speech and Language Therapy** assessment, should they meet criteria. ➢ Support from **Educational Psychology Service** in relation to Social Communication.

Wellbeing
• Often appears tired or expresses feeling tired and difficulties with sleep routine. • Has a medical condition and or previously serious illness/operation(s). • Sensory sensitivities and/or difficulties in specific sensory environments e.g., dislike of or distress in relation to: school uniform or touch, noisier spaces like the canteen, busy spaces and times in the school day, food and smells etc. • Low self-esteem and confidence. • Appears and expresses low mood. • Appears anxious and/or expresses feeling worried e.g., tearful, tense face and body posture, sweating, vocal/tics, complains of feeling unwell, stomach-ache etc, needs to visit the toilet frequently, continence needs. Self-soothing behaviours e.g., rocking, fiddling with objects. Rigid need for order and routine. • Keeps feelings to themselves. • Expresses negative thoughts about self, others and/or life generally.

- Has emotional episodes at home and/or school.

Would the child/YP benefit from:

- Establish strategies for removing the in-school barriers these pupils face, including considering support or reasonable adjustments for uniform, transport, routines, access to support in school and lunchtime arrangements
- A School Nurse or GP appointment to rule out cause
- A well-planned sleep hygiene routine and/or contacting The Sleep Charity helpline. National Sleep Helpline | Cheshire East Market Place
- A more accessible and enabling school context and opportunities to engage in all activities with peers
- Advice from **Paediatrics, Occupational Therapist** regarding adjustments regarding medical condition or operation
- A sensory audit and seek support from Sensory Processing Occupational Therapy Support Service (SPOTSS). Sensory Processing Occupational Therapy Support Service (SPOTSS) | Live Well Cheshire West (cheshirewestandchester.gov.uk)
- An emotional literacy intervention to learn about feelings and stress regulation (please discuss with **Educational Psychologist** where needed).
- Exposure to Emotion Coaching narratives if dysregulated (please discuss with **Educational Psychology** if such approaches are unfamiliar).
- A trusted person to 'check in with' each day and talk to about school.
- A toileting routine, toilet pass and/or access to a different toilet.
- A daily routine support with an interactive visual timeline and pre-warning and support around change.
- Daily access to sensory activities.
- The option to eat in a classroom/access the canteen at a different time.
- Non-verbal tools to communicate how they are feeling.
- Safe calm spaces to access if emotionally dysregulated.
- If an ongoing sources of distress, therapeutic input through ELSA, school counsellor, **CAMHS, Kooth, Young Minds etc.**
- A Risk Assessment wherever behaviours are high risk considered in relation to school and home situations.

Other
• Has a diagnosis or awaiting a diagnosis/EHCP or undiagnosed needs. • Appears unsettled in school and/or not their first choice.
Would the child/YP benefit from: ➢ A higher level of support in school, such as provision of mentoring, careers advice, college placements, 1-2-1 tuition or out of hours learning, or where appropriate an education, health and care plan or alternative provision. ➢ New or reviewed involvement from **Educational Psychology Service** ➢ Further assessment through **Paediatrics or other relevant professionals**, where they meet criteria for involvement

Parents
• Sources of support which parents/carers of the young people may find useful.
Would the child/YP benefit from: ➢ **Cheshire East Family Information Service (FIS**) provide free, impartial, confidential information and advice to for families with children and young people aged 0-25 on a range of subjects. Family Information Service (cheshireeast.gov.uk) ➢ **Cheshire East Information, Advice and Support Team (CEIAS)** provide free, confidential support and information to children and young people with SEND, their parents and or their carers. Cheshire East Information Advice and Support ➢ **Cheshire East Parent Carer Forum** are a voluntary group of Cheshire East parents and family carers who support parents and carers of children and young people with special educational needs and disabilities. Cheshire East Parent Carer Forum | Cheshire East MarketPlace ➢ **Not Fine in School**: a resource for the growing numbers of families with children experiencing school attendance barriers. https://notfineinschool.co.uk/families ➢ **Cheshire East Local Offer** is an online resource providing information and advice for children and adults on topics such as education, staying healthy, care and support and community activities, along with a directory of services. Local offer (cheshireeast.gov.uk)

Teachers Ideas bank
• Sources of support which teachers of the young people may find useful.
➢ https://www.educationsupport.org.uk/ - UK charity dedicated to supporting the mental health and wellbeing of teachers and education staff in schools, colleges, and universities.

Advice of relevance to neurodiverse groups
• Spectrum Gaming
➢ Spectrum Gaming is an online community for autistic young people, which focuses on building friendships, increasing self-acceptance and advocacy. Please note, this is currently only available to autistic children and young people in Greater Manchester. However, this may expand in the near future.

8. Neurodiversity

Dictionary definition:

The range of differences in individual brain function and behavioural traits, regarded as part of normal variation in the human population.

8.1. Context and data

It is currently estimated that around 1 in 7 people in the UK have some form of neurodifference. This is more than 15% of the population.

The Department for Education data for January 2023 estimated that 15-20% of all children in the UK were neurodivergent.

Special educational needs in England, Academic year 2022/23

8.2. What is neurodiversity

Neurodiversity refers to lifelong differences in the way people think, communicate and in how they process sensory information. This means that neurodivergent people understand, learn and respond to the world in a different way to their neurotypical counterparts.

There are a range of forms of neurodivergence, such as:

- Autism
- ADHD / ADD
- Tourette's syndrome
- Dyslexia
- Dyscalculia
- Developmental Coordination Disorder

Some children and young people may have a diagnosis, and some may have no diagnosis at all.

8.3. Neurodiversity and the education environment

The education environment can be a difficult place for some neurodivergent children and young people to achieve their potential and thrive. They can face challenges in some or all the following ways:

- Sensory processing differences
- Flexibility, information processing and understanding.
- Social understanding and communication

Education settings are primarily designed for neurotypical children and young people. The goal is to create learning environments that meet the needs of our modern neurodiverse student population in order to achieve their best possible outcomes and to recognise that differences exist between individuals, rather than deficits.
This will require reasonable adjustments to uniform and behaviour policies, classroom environments and the structure of the day,

adaptations to communication methods and curriculum delivery. Whole school staff who are confident and skilled in teaching and supporting neurodivergent students is essential.
Alongside this, peer acceptance and understanding are key elements to Inclusion and a sense of belonging for neurodivergent students.

8.4. Neurodiversity and Mental Health

Neurodivergent individuals often face mental health challenges. These can be related to their condition associated social stigma and to the challenges of coping within day to day environments designed for the neurotypical population. Some of the most common mental health challenges that neurodivergent individuals may experience include anxiety, depression, stress and low self-esteem.

Neurodivergent individuals are also more at risk of having mental illnesses or poor wellbeing. The stigma around neurodivergent conditions can lead to decreased self-worth, social isolation, and higher rates of mental ill health.

A high percentage of neurodivergent individuals experience poor mental health during their lifetime.

Many neurodivergent children and young people rely on masking or masquerading to enable them to get through the school day. When someone needs to constantly, on a daily basis, mask or masquerade this becomes exhausting and leads to a loss of self-identity and even 'burnout'.

Early identification and intervention to meet need can be a protective factor against mental illness. As good practice all schools should have a mental health first aider, opportunities within the curriculum should be available to learn about mental health and how to develop a personal toolkit of wellbeing strategies.

Any child may struggle with their mental health periodically, but all school and college staff should be particularly alert to the potential need for early identification and intervention for a neurodivergent child or young person. Where school suspect a young person is having mental health difficulties, they should not delay putting support in place. The school's role in supporting and promoting mental health and wellbeing is strategically overseen by the settings Senior Mental Health Lead and includes both universal and targeted provision.

8.5. What support is available for schools and settings

The Inclusion Toolkit which is the Cheshire East Graduated Approach is the first port of call for strategies and support.

The Sensory Processing Occupational Therapy Support Service (SPOTSS) are also able to offer support. Universal Training

Cheshire and Wirral Partnership NHS Foundation Trust (CWP) ADHD and ASC team for young people in the North locality consider referrals for a diagnosis and ADHD medication monitoring (only). The referral to this service is via the following link ADHD and Autism Team (AAT) Cheshire :: Cheshire and Wirral Partnership NHS Foundation Trust (mymind.org.uk)

In the South locality this is done through the community paediatricians for 4–18-year-olds.

Speech and Language can support with training and advice.

Training link: https://www.eventbrite.co.uk/o/east-cheshire-nhs-childrens-speech-and-language-34125214993

Referral link: https://services.eastcheshire.nhs.uk/childrens-speech-and-language-therapy

The Cheshire East Autism Team (CEAT) are able to support schools and settings with training as part of the AET Hub. They also offer Consultation and Individual support for complex children and young people.

Resources for professionals (cheshireeast.gov.uk)

There are a range of volunteer organisations and commercial providers which have information and resources to support professionals and settings in the inclusion of neurodivergent children and young people.

The following are recommended:

PDA Society – Pathological Demand Avoidance

Home - ADHD Foundation : ADHD Foundation

British Dyslexia Association (bdadyslexia.org.uk)

Can I tell you about ADHD?: A guide for friends, family and professionals https://amzn.eu/d/5qvt82w

ADHD Is Our Superpower: The Amazing Talents and Skills of Children with ADHD https://amzn.eu/d/2hwluHU

Advice for education professionals (tourettes-action.org.uk)

9. Reasonable Adjustments

Chapter 5 – The Public Sector the public sector duty
5.1 the Equality Act 2010 introduced a single Public Sector Equality Duty (PSED) (sometimes also referred to as the 'general duty') that applies to the public bodies, including maintained schools and academies, and extends to certain protected characteristics – race, disability, sex, age, religion or belief sexual orientation pregnancy and maternity and gender reassignment. This combined equality duty came into effect in April 2011 it has three main elements. In carrying out their functions, public bodies are required to have due regard to the need to:

- eliminate discrimination on other conduct that is prohibited by the act.
- advance equality of opportunity between people who share a protected characteristic and people who do not share it.
- foster good relations across all characteristics between people who share a protected characteristic and people who do not share it.

5.4 With the PSED, as with the previous general duties, schools are subject to the need to have due regard to the three elements outlined above. What having 'due regard' means in practice has been defined in case law and means giving relevant and proportionate consideration to the duty. For schools this means:

- Decision makers in schools must be aware of the duty to have due regard when making a decision or taking an action and must assess whether it has been particular implications for people with particular protected characteristics.
- Schools should consider equality implications before and at the time they have developed policy and take decisions not as an afterthought and they need to keep them under review on a continuing basis.
- the PSED has to integrate into the carrying out of school functions on the right analysis necessary to comply with the duty has to be carried out seriously vigorously and with an open mind it is not just a question or ticking boxes following a particular process.
- schools cannot delegate responsibility for carrying out the duty to anyone else.

9.1. What are Reasonable adjustments?

For a disabled child, schools must remove the barriers they face because of their disability so they can access and participate in education in the same way, as far as is possible, as someone who's not disabled. This responsibility applies to practices or rules the school has and to the need to provide an aid to a pupil who reasonably needs it. The Equality Act calls this the duty to make 'reasonable adjustments'.

9.2. When schools must make reasonable adjustment

The duty to make adjustments applies to all of the school's activities and the decisions that are made by teachers and staff including:

- admissions
- exclusions
- access to school trips at school
- help and support in school.
- learning activities and materials

Schools must make adjustments if:

- a child is disadvantaged by a practice or rule because of their disability or the failure to provide an aid and it's reasonable to make the changes or provide the aid to remove the disadvantage

9.3. Some examples of Reasonable Adjustments

(not exhaustive by any means) that may be made to support a child with a disability. (Please bear in mind that all schools MUST have an Accessibility Policy)

Whole School Policies	Whole School environment	Teaching and Learning
Allowing a pupil to wear a different item of uniform, different material or not to wear a certain item of uniform at all	The addition of a ramp to stairs to ensure accessibility	Classroom positioning – e.g. front or rear of classroom according to need
Depart from standard behaviour policy e.g. making changes to a behaviour policy to support children who may be anxious and show this in their 'fight, flight or freeze' reaction	Access to classrooms on the ground floor if in a wheelchair and no lift is available	Provision of sensory resources e.g. fidget toy, wobble cushion, TheraBand, chewing gum etc.

Enabling access to all school trips for all pupils Health and safety on educational visits - GOV.UK (www.gov.uk)	Providing access to a small room for testing (access arrangements) Reader, scribe and extra time (testing for access arrangements)	Allow touch typing, dictation, scribe, assistive Technology instead of handwriting
Reduced time or no homework to reduce anxiety	Provide a pass to allow for early lunch / toilet pass/ early exit / time out card to navigate busy corridors and reduce sensory overload	Sloping boards, pencil grip, raised line paper, coloured paper, different writing instruments. Provide spare sets of books and equipment
Provide a facility for homework to be done at school	Provide a calm, designated space for respite and/ or regulation or for eating lunch if required	Copies of Power Points, handouts available Font sizes and types
Allow high calorie or sweet snacks if required	Arrange structured activities during break/ lunch times	Copy parents into work/ organisation / trip emails and communications
Adjustment to medical needs policy Supporting pupils at school with medical conditions (publishing.service.gov.uk)	Provide opportunities for pupils to develop relationships with trusted adults	Allowing use of phones / ipads etc rather than copying from the board (e.g. to record homework) Homework slips sent home to explain homework and WAGOLLS given to explain
School exclusions and attendance Working together to improve school attendance (publishing.service.gov.uk)	Allow use of ear defenders/ headphones to minimise distraction	Provide a privacy partition if required, or a designated space in class
		Do not expect pupil to give eye contact or verbal responses if this is an area of difficulty

10. Early Identification and Census

The SEND Code of Practice (January 2015 Section 6) (also Section 20 of the Children and Families Act 2014) stipulates all schools should have a clear approach to identifying and responding to SEN. The benefits of early identification are widely recognised – identifying need at the earliest point and then making effective provision improves long-term outcomes for the child or young person.

10.1. How do we identify a Child/ Young Person has SEND?

Where a child or young person's learning difficulty or disability calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age. Making higher quality teaching normally available to the whole class is likely to mean that fewer pupils will require such support. Such improvements in whole-class provision tend to be more cost effective and sustainable.

Schools should assess each pupil's current skills and levels of attainment on entry, building on information from previous settings and key stages where appropriate. At the same time, schools should consider evidence that a pupil may have a disability under the Equality Act 2010 and, if so, what reasonable adjustments may need to be made for them.

Class and subject teachers, supported by the senior leadership team, should make regular assessments of progress for all pupils. These should seek to identify pupils making less than expected progress given their age and individual circumstances. This can be characterised by progress which:

- is significantly slower than that of their peers starting from the same baseline
- fails to match or better the child's previous rate of progress.
- fails to close the attainment gap between the child and their peers.
- widens the attainment gap.

It can include progress in areas other than attainment – for instance where a pupil needs to make additional progress with wider development or social needs in order to make a successful transition to adult life.

The first response to such progress should be **high quality teaching** targeted at their areas of weakness. Where progress continues to be less than expected the class or subject teacher, working with the SENCO, should assess whether the child has SEND. While informally gathering evidence (including the views of the pupil and their parents) schools should not delay in putting in place extra teaching or other rigorous interventions designed to secure better progress, where required. The pupil's response to such support can help identify their particular needs.

For some children, SEND can be identified at an early age. However, for other children and young people difficulties become evident only

as they develop. All those who work with children and young people should be alert to emerging difficulties and respond early. In particular, parents know their children best and it is important that all professionals listen and understand when parents express concerns about their child's development. They should also listen to and address any concerns raised by children and young people themselves.
Professionals should also be alert to other events that can lead to learning difficulties or wider mental health difficulties, such as bullying or bereavement. Such events will not always lead to children having SEND but it can have an impact on wellbeing and sometimes this can be severe. Schools should ensure they make appropriate provision for a child's short-term needs in order to prevent problems escalating. Where there are **long-lasting** difficulties, schools should consider whether the child might have SEND.

Slow progress and low attainment do not necessarily mean that a child has SEND and should not automatically lead to a pupil being recorded as having SEND. However, they may be an indicator of a range of learning difficulties or disabilities. Equally, it should not be assumed that attainment in line with chronological age means that there is no learning difficulty or disability. Some learning difficulties and disabilities occur across the range of cognitive ability and, left unaddressed may lead to frustration, which may manifest itself as disaffection, emotional or behavioural difficulties.

Persistent disruptive or withdrawn behaviours do not necessarily mean that a child or young person has SEND. Where there are concerns, there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with communication or mental health issues. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour a multi-agency approach, supported by the use of approaches such as the Early Help or Threshold of Need assessment, may be appropriate. In all cases, early identification and intervention can significantly reduce the use of more costly intervention at a later stage.

Identifying and assessing SEND for children or young people whose first language is not English requires particular care. Schools should look carefully at all aspects of a child or young person's performance in different areas of learning and development or subjects to establish whether lack of progress is due to limitations in their command of English or if it arises from SEN or a disability. Difficulties related solely to limitations in English as an additional language are not SEND.

There is a wide range of information available on appropriate interventions for pupils with different types of need, and associated training which schools can use to ensure they have the necessary knowledge and expertise to use them.

The purpose of identification is to work out what action the school needs to take, not to fit a pupil into a category. In practice, individual children or young people often have needs that cut across all these areas and their needs may change over time. For instance speech,

language and communication needs can also be a feature of a number of other areas of SEND, and children and young people with an Autistic Spectrum Disorder (ASD) may have needs across all areas, including particular sensory requirements. A detailed assessment of need should ensure that the full range of an individual's needs is identified, not simply the primary need. The support provided to an individual should always be based on a full understanding of their particular strengths and needs and seek to address them all using well evidenced interventions targeted at their areas of difficulty and where necessary specialist equipment or software.

It is important to build up a deeper understanding of the individual child's interests and aspects of development and learning that may need further investigation and support through continuously pulling information together. This information and observations will be combined to give a picture of the 'whole child' and their family context. The growing picture of how well the child is making progress towards the agreed outcomes is essential in considering whether or not the child may have SEND. A delay in learning and development may or may not indicate that a child has SEND, that is, that they have a learning difficulty or disability that calls for special educational provision to be made. It is preferable to investigate any concerns at an early stage, than to think that 'they might catch up'; early intervention will not do any harm and could have a positive impact on a child's learning and development.

10.2. Census Identification and Codes

The 0-25 SEND Code of Practice (2015) identifies 'four broad areas of need and support':

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

The School Census

Although Government wishes to move away from assumptions about pupils' needs based upon their difficulty or disability, they still need information about specific categories of need to allow them to predict levels of future resource. This is collected through the statutory 'School Census'. Statutory census is carried out three times a year (January, May and October).

The main census codes are E, K and N.

E is used for any child with an Education, Health and Care Plan

K is used for any child who is receiving 'additional to or different' support but does not have EHCP

N is used for a child who has no identified SEND need.

Census categories of special educational needs include:

- Specific learning difficulties (SpLD);
- Moderate learning difficulty (MLD);
- Severe learning difficulty (SLD);
- Profound and multiple learning difficulty (PMLD);
- Speech, language and communication needs (SLCN);

- Social, emotional and mental health (SEMH);
- Autistic spectrum disorder (ASD);
- Visual impairment (VI);
- Hearing impairment (HI);
- Multisensory impairment (MSI);
- Physical disability (PD);
- 'SEN support' but no specialist assessment of type of need (NSA).

10.3. Broad Areas of Need – Breakdown of Codes

Communication and Interaction

Children and young people with speech, language and communication needs **(SLCN)** have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives. Children and young people with Autistic Spectrum Disorder **(ASD)**, including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.

Cognition and Learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation/adapted teaching. Learning difficulties cover a wide range of needs, including moderate learning difficulties **(MLD)**, severe learning difficulties **(SLD)**, where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties **(PMLD)**, where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment. Specific learning difficulties **(SpLD),** affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.

Social, Emotional and Mental Health difficulties

Children and young people may experience a wide range of social and emotional difficulties **(SEMH)** which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder (ADD), attention deficit hyperactive disorder (ADHD) or attachment disorder.

Sensory and/or Physical Needs

Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment

(VI), hearing impairment **(HI)** or a multi-sensory impairment **(MSI)** will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Some children and young people with a physical disability **(PD)** require additional ongoing support and equipment to access all the opportunities available to their peers.

Settings are expected to identify a type of need for all children a SEN Support. There is no requirement for a pupil to have a specialist assessment to be recorded in the main SEND types. The No Specialist Assessment code **(NSA)** should only be used in those very rare instances where a pupil is places on SEN Support (code K) but the setting is still assessing what the primary need is. This might occur for example, where a child on SEN Support has transferred into the setting shortly before school census day.

11. The Graduated Approach for Early Years

11.1. Introduction

This section should be used by early years practitioners supporting children in the Early Years Foundation Stage in PVI, maintained and childminder settings. Using the Graduated Approach means recognising there is a continuum of need and that needs are met through the addition of increasingly specialist interventions as the level of need increases. The EYFS September 2023 (Statutory framework for the early years foundation stage (publishing.service.gov.uk) states:

Providers must have arrangements in place to support children with SEN or disabilities. Maintained schools, maintained nursery schools and all providers who are funded by the local authority to deliver early education places must have regard to the Special Educational Needs Code of Practice64. Maintained schools and maintained nursery schools must identify a member of staff to act as Special Educational Needs Co-ordinator (SENCO) and other providers (in group provision) are expected to identify a SENCO. Childminders are encouraged to identify a person to act as a SENCO and childminders who are registered with a childminder agency or who are part of a network may wish to share the role between them.

11.2. What is Quality First Teaching / Ordinarily Available Inclusive Practice

Support for all children in early years settings starts with **Quality First Teaching**. This is summarised here:

Such teaching will, for example, be based on:

- Experiences and activities for all children as set out in the areas of learning.
- Focus on the Prime areas for the youngest children to build a strong foundation for learning.
- An effective key person approach to ensure children individual needs are met.
- A secure routine.
- A rich learning environment.

Approaches like these are the best way to reduce, from the start, the number of children who need additional help with learning and behaviour.

What does Quality First Teaching (OAIP/OAIP/QFT) look like?

Four guiding principles should shape practice in early years settings:

- every child is a unique child, who is constantly learning and can be resilient, capable, confident and self-assured.
- children learn to be strong and independent through positive relationships.
- children learn and develop well in enabling environments with teaching and support from adults, who respond to their individual interests and needs and help them to build their learning over time. Children benefit from a strong partnership between practitioners and parents and/or carers.
- importance of learning and development. Children develop and learn at different rates. (The Characteristics of effective learning).

More detailed examples and information about what Quality First Teaching looks like for the different areas of need is provided at the beginning of each area of need in the graduated approach charts

Early Years

Ordinarily Available Inclusive Provision

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we and who should be doing it*	Strategies *What can we put in place?*
Children may not be accessing all areas of provision in the setting. • May display fleeting attention in adult directed activities and group times. • Interests can be limited and is reluctant to try out new things. • There is a slight delay in one or more of the prime areas. • May check the room for what others are doing.	• Key persons to observe the children in provision areas on a day- to -day basis (this does not require a writing anything down). • Review routine and ensure children are not sitting for too long or left waiting for an adult to. • Discuss child's key interests with parents and plan for this. • Complete 2-year check with parents for 2-3 year olds. • Managers and leaders giving practitioners opportunities to talk about key children in supervisions and discussing any concerns. • Practitioners to engage in training opportunities to develop their practice and understanding of child development.	• Play alongside the child and scaffold their learning. • Develop interest bags to use in small groups. • Deliver small group story times focusing on books linked to key interests, adding props and puppets to gain attention. • Enhance provision areas reflect the current interests of the children. • Adults to audit both the indoor and environments regularly to ensure the quality of provision and to see how things look from a child's perspective and check they are not overcrowded and cluttered. • Consider the daily routines to ensure they are child friendly, for example how long do children spend on the carpet for group times? Are group times kept free form distractions like tidying up and cleaning. • Introduce floor books to help children to re-visit learning and to share experiences with families.

Early Years

First Concerns

Cognition and Learning

EYFS Link – Mathematics, Understanding the world, Expressive Arts and Design

		• Use peer to peer observations to support each other's practice in your setting.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Evidence of some delay in meeting expected milestones. • 1 development band below chronological age. • Some evidence of repetitive play, restricted interests and limited imaginative play. • May move quickly from one activity to another and may need an adult to ensure learning through play occurs.	• Key Person to liaise with the setting SENCO. • Setting SENCO to support in identifying differentiated activities and strategies for the child. • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process: My Plan and My Diary and review this regularly. • Add "First Concerns" indicator on Tracking Children's Progress Tool.	• Use Characteristics of Effective Learning to assess how children are choosing to learn and where they like to go both indoors and outdoors • Consider how the child plays and explores, is motivated to learn, thinks critically etc. • Find out what gains the child's interests and attention and use this information to plan next steps for learning • Consolidate learning by ensuring that the activities that the child enjoys remain available and are easily accessible • Extend and adapt activities as children's interests and thinking develop and change

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to track and monitor the child's progress. • Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2. • Setting to liaise closely with the linked Health Professional (see Handbook for further information). • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family.	• Consider the environment. Help the child to focus by keeping distractions to a minimum, e.g. support play in a quiet area within the setting • Provide developmentally appropriate activities and ensure that the child is able to access them at his/her own pace, thereby enabling the child to achieve success • Provide activities which are stimulating and encourage children to use all their senses • Stimulate the child's curiosity by introducing new activities or changing familiar activities, e.g. Lego in the sand tray, cars in the play dough etc. • Provide treasure baskets with contents regularly changed for the children to explore. • Encourage the child to explore both indoors and outdoors and develop a sense of curiosity, e.g. muddy puddles etc. • Develop sustained shared thinking • Encourage problem solving by asking questions, e.g. 'what will happen if…?' Allow the child time to respond. • Use simple language at a level that the individual child is able to understand and respond to.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• For additional support, advice and guidance, consider the SENCO surgeries organised by the Early Years and Childcare Team. • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers.	• Support language with visual props e.g. story sacks, puppets etc. **Further Information** • Cognition and Language Good Practice Guidance **Further Information to share with parents** • Parenting Journey – Development Leaflets

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Cognition and Learning

EYFS Link – Mathematics, Understanding the world, Expressive Arts and Design

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant delay in reaching milestones. • 2 development bands below chronological age in 2 or more aspects within the prime areas (secure). • Evidence of frequent repetitive play, restricted interests and significant difficulties with imaginative play. • Evidence that the child has difficulties in retaining concepts over time. • New learning needs to be broken down into small steps, and repetition and over learning is required for progress to occur and outcomes to be met. • Child beginning to lose skills. • Significant difficulties with attention. Requires a high level of support to maintain	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan • Continue to liaise with the setting's linked Health Professional, as appropriate • SENCO to support the key person in planning differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process.	Continue with any relevant strategies from First Concerns level, plus: • Consider what gains the child's interests and high levels of involvement and wellbeing • Ensure that at each session attended, the child accesses an individually supported learning opportunity, small group time and support during child initiated play, as based on the SEN Support plan • Ensure there are plenty of opportunities to repeat activities • Encourage children to use a range of stimulating open ended resources that encourage children to use all their senses • Continue to create interesting experiences that develops a child's curiosity and motivation to explore • Develop 'joint attention' by following the child's interests, joining them in their play,

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
focus and promote learning through play. Limited play interests.	• Ensure that any suggested specialist advice is incorporated into the child's SEN Support Plan • Ensure any advice, support and guidance given by the Early Years Team is incorporated into your planning for the child • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Add "SEN Support" indicator on Tracking Children's Progress Tool • Hold regular Child Centred Planning Meetings • Consider SEND training opportunities for staff members • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on*	and modelling language appropriate to the child's level of development • Provide opportunities to explore and manipulate play equipment and materials • Develop a bank of clearly marked sensory resources that can be used at different times to develop the child's awareness and exploration of the senses • Introduce unexpected objects, place toys in unusual places, and/or introduce treasure boxes of interesting objects for children to explore

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Thresholds of Need ' document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • For additional support, advice and guidance consider the SENCO surgeries organised by the Early Years and Childcare Team • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team whether the setting requires support from the Early Years Complex Needs Team	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Cognition and Learning

EYFS Link – Mathematics, Understanding the world, Expressive Arts and Design

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Persistent and significant difficulties in reaching milestones • 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging) • Evidence of persistent repetitive play, restricted interests and severe difficulties in imaginative play • Evidence that the child has significant difficulties in retaining concepts over time • Child consistently losing skills • Child requires a very high level of individual support to access an individually tailored curriculum	• Key Person to liaise with the setting SENCO • SENCO to support in identifying differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Ensure that any suggested specialist advice is incorporated into the child's SEN Support Plan • Ensure any advice, support and guidance given by the Early Years Complex Team is incorporated into your planning for the child	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team • If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan • Incorporate moving and handling plans and care plans into planning, as advised by professionals

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Hold regular Child Centred Planning meetings and invite the child's health visitor • If the child's needs are significant and concerns remain, consideration should be given at the Child Centred Planning Meeting as to whether an EHC Needs Assessment is to be requested • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate • Consider the use of Early Support materials • Ensure that all staff have SEND training to support the child within the setting • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If a child is new to the setting, give consideration to the child's transition from the home/previous setting	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning OR – for a child with an EHC Plan: • EHC Plan (reviewed annually, and updated if appropriate)

Early Years

Ordinarily Available Inclusive Provision

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Children may be working just below age-related expectations. **Social interaction** • Limited back and forth interactions with adults and other children • May appear anxious at transition times during the routine • Choices in play can be restricted and repetitive • Chooses to play alongside peers rather than join in • Not engaging in familiar role play such as small world and home corner **Communication**	• Discuss with parent attending Talking Walk In at the Family Hub or children's centre • Well Comm screen if you have access to the resources • Discuss observations with the family and consider making a chatter box • Practitioners Cheshire East Chatters training • Provide opportunities for back-and-forth interactions with adults and other children	• Develop opportunities for all children to talk in the setting, such as conversation starters, Chatter Boxes and floor books. • Play alongside and model interactions and turn taking • Comment on what children are doing in their play • Give children time to respond-10 seconds • Extend sentences by adding new words • Peer to peer observations • Use I Can packs to plan for small group times to develop communication and language and share ideas with parents • Use visuals within the routine to support all children, such as traffic lights, now and next and a visual time- line and objects of reference

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Watches what other children are doing to pick up cues; For example, collecting coats or washing hands for snack • Hand guides adults to what they want • Points when requesting for example at snack time • Will copy actions at rhyme time without joining in with the singing		• Plan story times to reflect children's interests. Read books consistently again and again with props. • Provide experiences that promote children's interests within the environment

Early Years

First Concerns

Communication and Interaction

EYFS Link – Communication and Language and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• 1 development band below chronological age **Social Interaction** • Some difficulties following social norms, for example, eye contact, conversation, sharing and turn taking • Some difficulties speaking with adults outside of the family • Some withdrawal from the company of others • Limited ability to tolerate social interaction (age to be taken into account) • Higher than usual levels of anxiety at times of change or transition (routine/environment/people) • Some difficulties following adult directed activities • Some restricted play interests and/or child sticks to preferred activities e.g. vehicles, computer etc. • Child may engage in solitary play	• Key Person to liaise with the setting SENCO • Setting SENCO to support in identifying differentiated activities and strategies for the child. • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process: My Plan and My Diary and review this regularly • Add "First Concerns" indicator on Tracking Children's Progress Tool. • Continue to track and monitor the child's progress. • Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2	• Use the Communication and Language Good Practice Guidance. • Place yourself where children can see your face clearly and you can see them. • Keep all distractions to a minimum. • Allow extra time for processing information, answering and completing tasks. • Allow for frequent practice through recall and repetition. • Give a warning when an activity is coming to an end and to support the transition (this may need to be a visual warning, e.g. Traffic Light System) • Introduce new activities and experiences sensitively and in smaller amounts, e.g. small tray of sand presented individually • Support development of sharing and turn taking in small groups and on individual basis if required. • Offer child choices, e.g. from two songs, stories, drinks - support choice making visually with objects/pictures/symbols

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Child enjoys and responds better to visual information rather than auditory/language based. • Child may have some preferences in foods, clothing and become anxious when encouraged to try new experiences. • If upset, child may take longer to settle and reassure than peers. **Communication** • Child's expressive and/or receptive language is showing some delay (age to be taken into account) and child requires some additional input to facilitate progress. • Speech and Language Therapy (SALT) may be involved and a SALT care plan in place. • Immature speech sounds. • Requires repetition, slow pace of language and use of key words. • Speech is intelligible to familiar adult. For information: Speech and Language Referral Criteria	• Setting to liaise closely with the linked Health Professional (see Handbook for further information). • Practitioners could screen with the WellComm Toolkit. Screening results help to identify relevant activities to support individual and these can be shared with parents. • For educational settings in South Cheshire – Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY.) Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893. • Consider SEND training opportunities for staff members, including any appropriate training from SALT. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres	• Use specific praise (labelled praise), e.g. "good sitting" or "good drinking" etc. • Carry out the ECaT Enabling Environments Audit and provide the necessary resources to promote communication and language • Create a predictable and consistent environment, ensuring routines are followed. • Have visual prompts on display. • Support child initiated activities focussing on communication and language by joining in with child chosen activities, following their lead and playing alongside. • Keep language clear and unambiguous. • Model language. • Plan differentiated small group activities and resources, e.g. ICAN: Babbling Babies, Toddler Talk, Chatting with Children • Give time to children who have difficulty speaking or who need time to process thinking - Use strategies from the Early Language Development Programme (ELDP) Training and Adult Interactions and use of Language. • Plan story times that encourage the children to join, e.g. use short, well-illustrated stories and props, story sacks etc.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	e.g. groups organised by speech and language. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers.	• Provide resources that are clearly labelled with pictures or objects of reference and display visual timetables. **Further Information** • Stages of Communication Development and When to Refer • The Communication Trust: An Early Identification Framework for Speech, Language and Communication Needs **Further Information to share with parents** • ICAN • Talk to Your Baby • The Communication Trust • Talking Point • Parenting Journey – Development Leaflets

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Communication and Interaction

EYFS Link – Communication and Language and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Significant delay in reaching milestones. • 2 developmental bands below chronological age in 2 or more aspects within the prime areas (secure). **Social Interaction** • Frequent and significant difficulties following social norms and expectations, for example: reduced eye contact, turn taking/sharing difficulties etc. • Distress evident if encouraged to share. • Significant difficulties understanding social boundaries and expectations in play and other activities. • Persistent and significant difficulties in tolerating social interaction and/or inappropriate attempts at interaction and/or actively withdraws over a period of time.	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan. • Continue to liaise with the setting's linked Health Professional as appropriate. • SENCO to support the key person in planning differentiated activities and strategies to support the child. • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process.	Continue with any relevant strategies from First Concerns level, plus: • Put in place the interventions and strategies from any Speech and Language Therapy Care Plans. • Identify times and areas of targeted individual support. • Strong emphasis on, and consistent use of, visual support which is appropriate to the child's level of language abilities and cognitive development e.g. objects of reference/photographs/symbols. • Daily small group session to focus on development of social skills. • Daily individual session to follow targets set out in SEN Support Plan. Delayed and Disordered Speech Development • **Strategies**

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant, frequent high levels of anxiety at times of change and transition (routine/environment/people). • Frequent and significant difficulties in following adult directed activities. • Child spends a considerable amount of time on self-directed activity and finds it difficult to cease or move on (may result in anxiety and/or challenging behaviours). • Child may show more interest in objects than people. • Child may lead adult by hand/arm to get whatever he/she wants or use adult's hand as a tool to make toys or equipment work. • Significant difficulties with attention and may move quickly from area to area and from activity to activity with limited engagement and learning taking place. • Child may handle play equipment inappropriately or use equipment differently to their peers. • Child seeks or avoids sensory experiences to the extent that learning is limited or compromised. **Communication** • Child's expressive and/or receptive language is showing significant delay	• For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY.) Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893). • If required, refer to Speech and Language Therapy and implement advice, strategies and care plan from SALT (as appropriate for individual child or young person). • Use the WellComm Toolkit whilst waiting for SALT assessment/advice. • If appropriate, complete initial sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and/or environmental audit checklist) to highlight sensory issues impacting on communication and interaction with others • Ensure any advice, support and guidance given by the Early Years Team is	○ Continue with the Early Language Development Programme (ELDP) strategies and in particular remember to talk about what is happening, so that the child hears language that relates to actions as they happen, the activities they are involved in and the objects they are using. • **Activities and Games** ○ Provide opportunities for communication – use a toy to excite their curiosity. • **Role of adults / Routines /Environment** ○ Observe how the child communicates, who they communicate with and where they communicate. Speech sound difficulties • **Strategies** ○ Continue with the Early Language Development Programme (ELDP) strategies – in particular, pause to give plenty of time for the child to say what they want to communicate with you and remember to allow the child plenty of time to finish what they are saying; maintain eye contact to

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
and/or disorder requiring support from Speech and Language Therapy (SALT), for example little or no speech or signing (age and first language to be taken into consideration). • Additional support required to teach and manage alternative communication systems which may involve support from outside agencies. • Additional support required to provide daily SALT programme of activities - both on an individual basis and in small group where appropriate. • Loss of previously demonstrated communication skills, specifically spoken or signed. For information: Speech and Language Referral Criteria.	incorporated into your planning for the child. • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Add "SEN Support" indicator on Tracking Children's Progress Tool. • Hold regular Child Centred Planning Meetings. • Consider SEND training opportunities for staff members, including any appropriate training from SALT. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of	communicate that you are listening to them. • **Activities and games** ○ See the Cheshire East website for ideas of useful games and activities to support and develop speech sound production. • **Role of adults / Routines /Environment** ○ Model correct pronunciation for the child – avoid correcting their efforts.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	support for the child or young person and their family. • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team whether the setting requires support from the Early Years Complex Needs Team.	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Communication and Interaction

EYFS Link – Communication and Language and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Persistent and significant difficulties in reaching milestones. • 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging) **Social Interaction** • Persistent and severe difficulties following social norms and expectations. • Severe communication difficulties which require intensive support and clear identified strategies for the child to communicate (diagnosis of Autistic Spectrum Condition or Social Communication difficulties which are pervasive in nature). Child will have significant difficulties in social communication which impact on all aspects of the child's development and ability to access the EYFS curriculum.	• Key Person to liaise with the setting SENCO • SENCO to support in identifying differentiated activities and strategies to support the child. • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process. • Ensure any suggested specialist advice (e.g. from the Speech and Language Therapist) is incorporated into the child's SEN Support Plan. • Ensure any advice support and guidance given by the Early Years Complex Team is	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team • If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan • Consider using sign to support language. • All support and strategies must be used consistently. All staff should know,

• No understanding of social boundaries in play or other activities, including social interaction • Unable to tolerate any social interaction other than in meeting own basic needs • Child may be frequently overwhelmed by sensory stimuli to the extent that learning is significantly compromised. A high proportion of time may be spent seeking/avoiding sensory experiences • Significant and persistent difficulties in following adult directed activities • Child will have significant delay in communication and understanding • Significantly restricted interests and strong evidence of repetitive interests and stereotypical play • Child's level of anxiety impedes significantly upon behaviour and ability to access EYFS curriculum • Attention on any activity is very short – although child may persist with some sensory seeking behaviours e.g. spinning wheels • Child may show little or no sense of danger and require close supervision to ensure their safety, e.g. climbing, mouthing objects, running, throwing etc. **Communication**	incorporated into your planning for the child. • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Hold regular Child Centred Planning Meetings and invite the child's health visitor. • If the child needs are significant and concerns remain, consideration should be given at the Child Centred Planning to an EHC Needs Assessment request. • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate. • Consider the use of Early Support materials. • Ensure that all staff have SEND training to support the child within the setting, including any appropriate training from SALT. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres.	understand and agree on strategies to be used. **Further Information** • Autism Education Trust • National Autistic Society • SPACE4AUTISM (parent support)

• Child's expressive and/or receptive language is showing severe delay requiring support from Speech and Language Therapy (SALT) and progress is slow (despite interventions). • Limited functional communication skills that require individual alternative and/or augmentative communication strategies to allow access to learning opportunities. • Child has limited understanding of what is said or signed (age and first language to be taken into account). • Intensive support required to teach and manage alternative communication systems involving outside agencies. • Sustained loss of previously demonstrated communication skills, specifically spoken or signed.	• Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If a child is new to the setting, give consideration to the child's transition from the home/previous setting.	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

SEN Support Plan

- Professionals who support me
- All about me
- All about me by my parents / carers
- Assessments
  - Individual Record of Development in the Prime Areas
  - Individual Record of Development in the Specific Areas
  - Progress check at age 2
  - Characteristics of effective learning
- Plan, Do, Review
- Supporting my learning

Or for a child with an EHC Plan:

- EHC Plan (reviewed annually, and updated if appropriate)
- Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly.

Early Years

Ordinarily Available Inclusive Provision

Social, Emotional and Mental Health

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Child may be working just below age related expectations in PSED • May sometimes find it difficult to separate from parent/carer and takes time to settle. • May need to bring in a transitional object from home. • May sometimes finds it difficult to self-regulate. • May need to be encouraged to try new activities and experiences.	• Ensure there is an effective key person system in place and parents know who their child's key person is. • Access training on supporting children's emotional well- being and to understand the behaviour of young children. • Complete what my behaviour is trying to tell you observations. • Discuss children's well-being as part of supervision. • Clear behaviour policy that the staff team are familiar with that is reviewed regularly. • Allow parents/carers into the setting at drop and pick up times to help child to settle. • Consider the home and setting links and sharing experiences from both without this impacting on adults taking time away from children. For example; sharing a photograph, a leaflet or found treasure (conker, shell, feather).	• A consistent routine supported with visuals and other prompts • Allow opportunities for children to follow interests both in adult directed and child-initiated learning • Adults to play alongside children to scaffold and model responses and interactions • Praise specific and offered to all children at an appropriate level • Practitioners have realistic expectations of children based on their stage of development • The environment allows for children to move into cosy spaces both indoors and out • Use stories and puppets to talk about big feelings and to give them names. • Celebrate children's achievements through floor books and displays

Early Years

First Concerns

Social, Emotional and Mental Health

EYFS Link – Personal, Social and Emotional Development and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Evidence of some delay in meeting expected milestones. • 1 development band below chronological age • Difficulties with separation from parent or carer which are greater in comparison than peers. • Some short term unexpected behaviours that require adult intervention. Impulsive behaviours that demonstrate lack of inhibition • Some behaviours cause concern. • Struggles to respond to appropriate boundaries when encouraged and supported. • Needs adult encouragement/support to participate in group activities.	• Key Person to liaise with the setting SENCO. • Setting SENCO to support in identifying differentiated activities and strategies for the child. • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process : My Plan and My Diary and review this regularly. • Add "First Concerns" indicator on Tracking Children's Progress Tool. • Continue to track and monitor the child's progress. • Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2	• Use Characteristics of Effective Learning to assess how children are choosing to learn and where potential difficulties in this area might be. • Consider how the child plays and explores, is motivated to learn, thinks critically etc. • Consider the environment and provide an environment in which the child feels safe and secure; carry out an Environment Audit. • Consider the layout, noise levels etc. within the setting. • Ensure there is a quiet, calm space available at all times for the child to access, e.g. large cushions, cosy area. • Consider your daily routine and whether there are any times in which the child may need additional support, e.g. at greeting time • Observe you and your staff's interactions with the child. Would you consider these to be of high quality? See Observing teaching and learning in your setting

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Some difficulties regulating own emotions and recognising those of others which may be evidenced by some difficulties in taking turns, sharing and social interaction (age to be taken into consideration). • Short term withdrawal from activities and/or changes in behaviour and play and/or increase in anxiety levels. • Seeks frequent reassurance from adults. • Reluctant to explore activities or try new ideas.	• Setting to liaise closely with the linked Health Professional (see Handbook for further information). • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers.	• Encourage the child to bring something from home as part of the settling in process, e.g. favourite toy. • Consider using visual support to help the child understand the daily routine, e.g. objects of reference to show the child what is going to happen next, such as nappy for changing. • Provide resources, materials and activities which the child enjoys and engages with. Use these to inform future planning for the child. • Support play with other children by modelling simple play scenarios and language that can be used through play. • Gradually introduce small group time, initially with 2 children and gradually introducing more. • Promote positive behaviour. Stand back and observe the child to gain a good understanding of what is happening and why. • Give clear guidance and ensure that you give consistent messages. **Further information** • Social, Emotional and Mental Health Good Practice Guidance

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		• DFE Social and Emotional Aspects of Development • Sustained Shared Thinking (SSTEW) **Further information to share with parents** • Parenting Journey – Developmental Leaflets • Being, Becoming, Belonging (Surrey)

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Social, Emotional and Mental Health

EYFS Link – Personal, Social and Emotional Development and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Significant delay in reaching milestones. • 2 development bands below chronological age in 2 or more aspects within the prime areas (secure) • Significant separation difficulties that persist. • Reluctance to engage with activities, shown by withdrawing or through challenging behaviour. • Significant and frequent unusual behaviours requiring adult intervention. • Significant difficulties regulating own emotions and recognising those of others which may be evidenced by persistent significant difficulties in turn taking, sharing and social interaction.	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan. • Continue to liaise with the setting's linked Health Professional as appropriate. • SENCO to support the key person in planning differentiated activities and strategies to support the child. • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process.	Continue with any relevant strategies from First Concerns level, plus: • Develop 'joint attention' by following the child's interests, joining them in their play, and modelling language appropriate to the child's level of development. • Encourage the children to make choices and to play independently. • Model friendly, caring behaviour in play that support successful interaction, e.g. 'Can I have a go?', 'Do you want some playdough?' etc. • Use clear concise language, giving the child time to process. • Ensure the setting has a quiet low stimuli area for the child to access adult led activities. • Support sharing and taking turns. Initiate turn taking with an adult and when the child is ready, gradually introduce play with one other child.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Frequently withdraws and does not participate in activities. Significant changes in behaviour and/or play, and frequent increase in anxiety level. • Attachment to key carers not securely established. • Significant concerns raised regarding poor growth, weight gain/loss, and/or social, emotional and mental health that require advice from outside agencies and are impacting on the child's development.	• Ensure that any suggested specialist advice is incorporated into the child's SEN Support Plan. • Ensure any advice support and guidance given by the Early Years Team is incorporated into your planning for the child. • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Add "SEN Support" indicator on Tracking Children's Progress Tool. • Hold regular Child Centred Planning Meetings. • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's	• Ensure that there are plenty of opportunities to repeat activities. • Ensure there is adequate uninterrupted time for the child to explore at their own pace and in a space they feel comfortable. • Provide opportunities for children to talk about their feelings and needs often, using the children's own experiences. • Support children in communicating with and recognising and responding to the feelings of others. • Support children to develop friendships and confidence in their social interaction and give lots of expressive, specific, positive praise e.g. "I saw you help put the car away". • Where possible, try not to respond to unwanted behaviours designed to gain adult's attention unless they are harmful to the child or others. • Develop the child's curiosity by hiding objects, using treasure boxes etc. • Help the child to build trust, confidence and independence e.g. self-regulation. When conflict arises, encourage children to problem solve and find solutions together. **Further Information** • Social and emotional wellbeing: early Years – NICE Guidance

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team as to whether the setting requires support from the Early Years Complex Needs Team.	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Social, Emotional and Mental Health

EYFS Link – Personal, Social and Emotional Development and Literacy

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Persistent and significant difficulties in reaching milestones. • 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging). • Severe attachment difficulties affecting development. • Unable to sustain activities without significant, consistent adult attention and intervention. • Persistent, unpredictable extremes of demanding behaviour which affects the child's safety and that of others. • Persistently presents a significant danger to self and others and damages equipment or materials.	• Key Person to liaise with the setting SENCO. • SENCO to support in identifying differentiated activities and strategies to support the child. • Monitor and review the SEN Support plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process. • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan. • Ensure any advice, support and guidance given by the Early Years Complex Team is incorporated into your planning for the child.	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team. • Ensure a positive handling plan is in place if required. • Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning. • Consider if support is needed to scaffold/support social interaction in play. • Consider if targeted support is needed to support the child's daily routine.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Totally withdrawn from activities over a period of time and demonstrates severe changes in behaviour and frequent high anxiety levels. • Severe and persistent difficulties regulating own emotions and recognising those of others which may be evidenced by long term severe difficulties in social interaction that prevent learning. • Child may have suffered from acute trauma, or abuse which renders them extremely vulnerable and is impacting on the child's development. Needs a high level of multi-agency involvement over a sustained period.	• Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Hold regular Child Centred Planning Meetings and invite the child's health visitor. • If the child needs are significant and concerns remain, consideration should be given at the Child Centred Planning to an EHC Needs Assessment request. • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate. • Consider the use of Early Support materials. • Ensure that all staff have SEND training to support the child within the setting. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on*	• If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan. **Further Information to share with parents** • A Practical Approach at Home for Parents and Carers - Autistic Spectrum • A Practical Approach at Home for Parents and Carers Making Sense of Sensory Behaviour

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Thresholds of Need' document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If a child is new to the setting, give consideration to the child's transition from the home/previous setting.	

Evidence of Graduated Approach
How do we track and record progress and outcomes?

SEN Support Plan

- Professionals who support me
- All about me
- All about me by my parents / carers
- Assessments
  - Individual Record of Development in the Prime Areas
  - Individual Record of Development in the Specific Areas
  - Progress check at age 2
  - Characteristics of effective learning
- Plan, Do, Review
- Supporting my learning

Or for a child with an EHC Plan:

- EHC Plan (reviewed annually, and updated if appropriate)
- Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly.

Early Years

Ordinarily Available Inclusive Provision

Sensory and Physical

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
Children may be working just below age related expectations in PD with the development of fine and gross motor skills • May be reluctant to join in messy play experiences. • May seek out sensory experiences. • May lack spatial awareness and purposeful play.	• Make sure children are given sufficient time to move around in line with advice poster. • Audit outdoor area and look at what spaces are available and what resources are available. • Consider how often children have access to the outdoors. • Check the adult role outdoors and how they interact with children to extend and enhance their learning. • Check that outdoor learning has clear learning intentions?	• Offer children dough gym and other opportunities to develop fine motor skills through play. • Plan circle times, people games and parachute play to help children develop large motor skills. • Offer daily messy and dry sensory experiences to promote confidence, scaffolding for children as needed, for example sensory pouches and zip bags. • Use snack times as an opportunity for handling utensils such as cutting and pouring. • Provide mark making opportunities across all areas of provision. For example: a mark making box in the construction area, notebooks and pen in role play. • Offer different level and opportunities to climb, jump, roll and balance.

Early Years

First Concerns

Sensory & Physical Needs
Sensory
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

• The child may seek sensory information.
• The child may retreat from sensory information.
• May be evidence of delay in meeting expected milestones.
• Child may display a lack of concentration and find it difficult to maintain attention - this may vary throughout the day.
• Child may fidget and may find it difficult to find a comfortable position.
 	
Seeking sensory information
• Enjoys banging toys and equipment; hands on tables/radiators.
• Enjoys loud noises/music.
• Likes reflective/spinning toys.
• Enjoys experiencing sensory play e.g. squeezing playdough, smearing, repetitive pouring etc.
	• Key Person to liaise with the setting SENCO.
	• Setting SENCO to support in identifying differentiated activities and strategies for the child.
	• Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process : My Plan and My Diary and review this regularly.
	• Add "First Concerns" indicator on Tracking Children's Progress Tool.
	• Continue to track and monitor the child's progress.
	• Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2
		• *Note: it is important to note that difficulties interpreting sensory information can have an impact on how we feel, how we think and how we behave e.g. sitting for long periods of time, a busy, noisy classroom etc.*
		• Look at how the child responds to your environment and make changes as appropriate e.g. lighting, noises, smells
		• In discussion with parents, talk about the child's likes and dislikes.
		• Ask the parents about the materials that the child enjoys at home and provide these in the setting.
		• Have a corner with sensory activities that the child can go to at any time.
		
		Seeking sensory information
		• If the child has become overstimulated and this is making them anxious and impacting on their behaviour, consider some of the following strategies:
		  ○ Squeezing a small fidget toy
		  ○ Providing a small calm, quiet space, e.g. a small pop up tent.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Licks or mouths play equipment or furniture **Avoiding sensory information and experiences** • Fear of loud or sudden noises. • Dislikes bright lighting. • Prefers bland food. • Overreacts to smells. • Dislikes Messy Play. • Can react negatively to another's touch. • Will avoid wearing certain clothing because of how it feels e.g. jumper too scratchy.	• Setting to liaise closely with the Linked Health Professional (see Handbook for further information). • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers.	○ Ask the child to help with heavy manual tasks e.g. putting bikes in the shed, digging in the garden. ○ Putting on a heavy coat or a heavy blanket. **Avoiding sensory information** • Plan individual/small group activities focusing on sensory play. • Build up tolerance to sensory plan activities slowly e.g. start off with dry sensory play and slowly add liquid. • If children are unwilling to touch, offer alternatives such as tools, zipper bags filled with messy play, cling film over tables etc. • Talk to children about what and why things happen, e.g. noises like the phone ringing, fire alarm. **Further Information** • Making Sense of Sensory Behaviour **Further Information to share with parents** • Parenting Journey – Developmental Leaflets

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Sensory & Physical Needs
Sensory
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant delay in reaching milestones. • 2 development bands below chronological age in 2 or more aspects within the prime area (secure) • Children may be experiencing a greater degree of difficulty with sensory integration and this may be having a significant impact on their ability to access the EYFS curriculum • The setting may be finding it more challenging in managing the child's behaviour. • The child may display high levels of anxiety. • The child's sensory difficulties may be part of a wider developmental disorder e.g. Autistic Spectrum Condition.	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan. • Continue to liaise with the setting's linked Health Professional, as appropriate. • SENCO to support the key person in planning differentiated activities and strategies to support the child. • Monitor and review the SEN Support plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process.	Continue with any relevant strategies from First Concerns level, plus: • Implement strategies and advice given by professionals e.g. Occupational Therapists and the Early Years Team. **Further information** • Understanding Sensory Processing Issues **Further Information to share with parents** • Making Sense of Sensory Behaviour

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• The child may react more extremely to sensory input in the environment e.g. loud noises. • The child may take a longer time to calm down once they become anxious. • It may be difficult to distract the child with usual techniques.	• If appropriate, complete initial sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and/or environmental audit checklist) to highlight sensory issues. • Ensure any suggested specialist advice suggested is incorporated into the child's SEN Support Plan (e.g. from the Occupational Therapist). • Ensure any advice support and guidance given by the Early Years Team is incorporated into your planning for the child. • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Add "SEN Support" indicator on Tracking Children's Progress Tool. • Hold regular Child Centred Planning Meetings. • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on*	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Thresholds of Need' document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team as to whether the setting requires support from the Early Years Complex Needs Team.	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Sensory & Physical Needs
Sensory
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Persistent and significant difficulties in reaching milestones • 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging) • Difficulties may affect the child's ability to access the Early Years Foundation Stage (EYFS) curriculum for the majority of the time in the setting • Constantly mouthing or chewing objects or materials which affects child's safety and wellbeing. • The child requires a very high level of supervision and a highly individualised curriculum • At this level the sensory difficulties are highly likely to be part of a wider special educational need/disability	• Key Person to liaise with the setting SENCO • SENCO to support in identifying differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan (e.g. from Occupational Therapists; CAMHS LD etc.) • Ensure any advice, support and guidance given by the Early Years Complex Team is incorporated into your planning for the child	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team. • If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan • Incorporate Moving and handling plans and care plans into planning, as advised by professionals

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Hold regular Child Centred Planning Meetings and invite the child's health visitor • If the child needs are significant and concerns remain, consideration should be given at the Child Centred Planning to an EHC Needs Assessment request • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate • Consider the use of Early Support materials • Ensure that all staff have SEND training to support the child within the setting • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published	• Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning **Further information** • Understanding Sensory Processing Issues **Further Information to share with parents** • Making Sense of Sensory Behaviour

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If a child is new to the setting, give consideration to the child's transition from the home/previous setting	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning Or for a child with an EHC Plan: • EHC Plan (reviewed annually, and updated if appropriate) • Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly

Early Years

First Concerns

Sensory & Physical Needs
Visual Impairment
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Evidence of some delay in meeting expected milestones. • May be 1 development band below chronological age. • Developing concerns regarding child's eyesight. • May need encouragement to wear glasses. • May need to wear an eye patch. • The child may find difficulties in negotiating obstacles and/or pathways around the environment etc. • The child may look closely at objects. • May have less interest in activities than their peers.	• Check that vision tests are up to date. • Key Person to liaise with the setting SENCO. • Setting SENCO to support in identifying differentiated activities and strategies for the child. • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process: My Plan and My Diary and review this regularly. • Add "First Concerns" indicator on Tracking Children's Progress Tool. • Continue to track and monitor the child's progress. • Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2	• If the child wears glasses, encourage the child to bring them and wear them as appropriate. • Adapt the environment to ensure that the child is able to move around the setting safely e.g. clear paths between areas and different levels within the setting are marked with florescent tape • Consideration given to lighting. • Ensure the child is supported to follow a consistent routine. • Ensure all children value the importance of tidying up after themselves, e.g. pushing chairs under the table, putting cushions back in the cosy area etc. • Make sure that you say the child's name before speaking to them and ensure that you are at the child's level and face to face. • Ensure that the child is close to the practitioners during activities and use visual cues such as story props, puppets etc. • When setting up activities, use trays, non-slip matting, shallow containers etc. to

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

• May complain of headaches and/or may rub eyes.
 	
• Child may tire and lose concentration more quickly than peers.
 	
  • Some difficulties with self-help skills, for example, dressing, mealtimes etc.
 	
  • EYFS Indicators First Concerns (VI)
	• Setting to liaise closely with the linked Health Professional (see Handbook for further information)
	
	• Consider SEND training opportunities for staff members.
	
	• Support children and their families to access universal and targeted services as appropriate in their local children's centres.
	
	• Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family.
	
	• Advise parents to discuss concerns with Health Visitor and/or GP.
	
	• If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers.
		ensure that the child has safe access to the resources they have chosen.
		• Provide a range of sensory activities. Encourage the child to investigate different textures, sounds, smells, tastes and sights.
		
		Further Information to share with parents
		• Parenting Journey – Developmental Leaflets.

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Sensory & Physical Needs
Visual Impairment
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Child must have a recognised visual impairment and/or an assessed visual deficit which is not fully corrected by lenses or glasses • Significant delay in reaching milestones • May be 2 or more development bands below chronological age in 2 or more aspects within the prime areas (secure) • Moderate multi-sensory loss requiring adult support from outside agencies to teach and manage learning • Physical/medical difficulties that require varied and extensive equipment, adapted resources and regular support • Physical independence is impaired and requires input or programmes from relevant professionals	• Check that vision tests are up to date • Establish whether the child is seen by an ophthalmologist • Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan • Continue to liaise with the setting's linked Health Professional, as appropriate • Contact Sensory Inclusion Service (SIS) for advice and information • Environmental audits by Sensory Inclusion Service (SIS) may be required, particularly at Key Transitions	Continue with any relevant strategies from First Concerns level, plus: • Follow specific advice and guidance from the Sensory Inclusion Service, including the use of any specialist equipment loaned to the setting • Discuss with parent and observe how the child with vision impairment makes the most of the sight they have. For example: do they tilt their head, focus on bright colours and mirrors, stare at sunlight or artificial light, move more confidently in bright or dim light, look at objects and faces? This will help to build knowledge of the child's vision and assist with providing the correct approaches and resources to support the child • Create a calm, quiet area that the child can have as a safe area which they can return to when they need to

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• EYFS Indicators SEN Support (VI)	• SIS to provide advice, ongoing visits and specialists assessment, including assessments for specialist equipment, in line with service criteria • SENCO to support the key person in planning differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan, with particular reference to the Sensory Inclusion Service (SIS) • Ensure any advice, support and guidance given by the Early Years Team is incorporated into your planning for the child • Ensure close partnership working with parents. This includes sharing SEN support	• When the child is feeling confident with their surroundings, encourage them to learn their way to different areas in the setting • Try to keep the physical environment as consistent as possible • Encourage the child to touch and explore different aspects of the environment explaining what they are exploring and talking about what is in each area • Provide a range of multi-sensory experiences that encourage the child to investigate different textures, sounds, smells, tastes and sights. Some children will find this overwhelming and will need to be introduced sensitively • Encourage the child to access sensory rooms at their local Children Centre etc. • Help the child to make sense of what they hear in noisy situations e.g. 'Arna is banging the pots with a spoon to make that sound, do you want a go?' • Provide plenty of opportunities for singing songs and rhymes and help the child to form actions by physically guiding them as needed • Use books with illustrations that have good contrasts between colours and features and interesting textures to explore

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	plans, and strategies and interventions to use in the setting and at home • Add "SEN Support" indicator on Tracking Children's Progress Tool • Hold regular Child Centred Planning Meetings • Consider SEN training opportunities for staff members • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team	• In a group story session, make sure the child has a good sight-line to the pictures and use big books and story props that the child can hold • Enlarge images and print as necessary • Follow and implement recommendations regarding strategies and adaptations from the Sensory Inclusion Service (SIS) resulting from any specialist environmental audits carried out by SIS **Additional Information** • Visual Impairment – Good Practice Guidance

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	whether the setting requires support from the Early Years Complex Needs Team	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*
 **SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning Additional documents (if relevant/appropriate for individual): • SIS environmental audit • SIS advice sheets • SIS records of visit

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Sensory & Physical Needs
Visual Impairment
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Persistent and significant difficulties in reaching milestones • May be 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging) • Severe visual loss which requires continuous support for mobility, self-help skills and access to learning experiences • Significant reduced access to visual materials • Severely reduced opportunities for incidental learning • Reduced ability to see and copy actions or movements of other children and of adults • An impact on the development of play	• Key Person to liaise with the setting SENCO • SENCO to support in identifying differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Continue to liaise with Sensory Inclusion Service (SIS), who will carry out further specialist assessments and write reports, as required • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan, with particular reference to the Sensory Inclusion Service (SIS)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team • Ensure a positive handling plan is in place if required • Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning • Consider if targeted support is needed to support the child's daily routine • If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

• Impact on social skills due to inability to see facial expressions or body movements
 	
• A reduced ability to recognise faces
 	
• The child may require targeted support for their safety and wellbeing
	• Ensure any advice, support and guidance given by the Early Years Complex Team is incorporated into your planning for the child
	
	• Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home
	
	• Hold regular Child Centred Planning Meetings and invite the child's health visitor
	
	• If the child's needs are significant and concerns remain, consideration should be given at the Child Centred Planning Meeting to an EHC Needs Assessment request
	
	• Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate
	
	• Consider the use of Early Support materials
	
	• Ensure that all staff have SEND training to support the child within the setting, as appropriate, including:
		• Follow and implement recommendations regarding strategies and adaptations from the Sensory Inclusion Service (SIS) resulting from any specialist environmental audits carried out by SIS
		• Targeted interventions as advised by Sensory Inclusion Service may include:
		  ○ Development of visual skills
		  ○ Pre braille skills
		  ○ Social skills
		  ○ Independent living skills
		  ○ Mobility
		
		Additional Information
		• Royal National Institute for Blind People
		
		Additional Information to share with parents
		• Story Sacks - Guidance and ideas
		• RNIB Play Guide

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	○ Producing adapted/tactile resources for children ○ Supporting pre braille skills ○ Developing independence in children with severe visual loss • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If a child is new to the setting, give consideration to the child's transition from the home /previous setting	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

SEN Support Plan

- Professionals who support me
- All about me
- All about me by my parents / carers
- Assessments
  - Individual Record of Development in the Prime Areas
  - Individual Record of Development in the Specific Areas
  - Progress check at age 2
  - Characteristics of effective learning
- Plan, Do, Review
- Supporting my learning

Or for a child with an EHC Plan:

- EHC Plan (reviewed annually, and updated if appropriate)
- Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly

Additional documents (if relevant/appropriate for individual):

- SIS environmental audit
- SIS advice sheets
- SIS records of visit

Early Years

First Concerns

Sensory & Physical Needs
Hearing Impairment
EYFS Link – Communication and Language

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Evidence of some delay in meeting expected milestones • May be 1 development band below chronological age • History of fluctuating hearing loss • Mild hearing loss (with or without aids) • Unilateral hearing loss i.e. the child has normal hearing in one ear and impaired hearing in the other ear • History of conductive hearing loss/mild hearing loss • The child may have frequent coughs and colds • The child may fail to respond to their name	• Establish if the child has a hearing loss • Key Person to liaise with the setting SENCO • Setting SENCO to support in identifying differentiated activities and strategies for the child • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process : My Plan and My Diary and review this regularly • Add "First Concerns" indicator on Tracking Children's Progress Tool • Continue to track and monitor the child's progress	• If the child uses technology such as a hearing aid, make sure they wear it that it is clean and the batteries are not flat • Use the child's name to gain their attention • Ensure that they are listening before you start speaking to them • Make sure the child can see your face when you speak to them and your face is not in shadow • Maintain eye contact and remember the child will be responding to your facial expressions and gestures • Speak clearly to the child, making sure you don't speak too fast and that you use expression in your voice • Consider the setting environment and adapt as appropriate • Consider the acoustics of the setting, i.e. background noise etc. • Enable to child to access quieter areas for focused activities/interventions

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• The child may find it hard to follow simple instructions • The child's speech may be unclear • The child may watch other children to pick up cues in the environment e.g. everyone moving to the snack table • The child may lack concentration e.g. at story time • EYFS Indicators First Concerns (HI)	• Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2 • Setting to liaise closely with the linked Health Professional (see Handbook for further information) • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • Parents to be encouraged to seek advice from Health visitor and/or GP • Consider SEND training opportunities for staff members. Also, access any appropriate training from SALT • Support children and their families to access universal and targeted services as appropriate in their local children's centres	• Use visual supports such as objects, photos, pictures, and visual timetables to support what is said and familiarise children with routines • Consider where the child places themselves throughout the daily routine and support them to be in close proximity of the practitioner/child as appropriate e.g. at large group time etc. • Implement advice from SALT Advice Line, if required **Further Information to share with parents** • Parenting Journey – Developmental Leaflets

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Sensory & Physical Needs
Hearing Impairment
EYFS Link – Communication and Language

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***

• Significant delay in reaching milestones
• May be 2 developmental bands below chronological age in 2 or more aspects within the prime areas (secure)
• Child has a diagnosed hearing loss
• Child has hearing aids or cochlear implants
• In addition the child may have one or more of the following:
  ○ A late diagnosis
  ○ A progressive hearing loss
  ○ A moderate to severe hearing loss
  ○ Auditory neuropathy
• Early Years Foundation Stage Indicators (EYFS) SEN Support (HI)
	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan
	• Continue to liaise with the setting's linked Health Professional, as appropriate
	• SENCO to support the Key Person in planning differentiated activities and strategies to support the child
	• Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process
		Continue with any relevant strategies from First Concerns level, plus:
		• Make sure that the lighting in the setting is good so that children who are lip reading or rely on facial cues can see you
		• Always check the child has followed what you have said and that they have understood any instructions
		• Keep background noise to a minimum
		• Give the child time working with an adult by themselves or in small groups
		• Enable children to access quiet areas for focussed activities where possible
		• If the child is using British Sign Language (BSL), learn key signs. If not, the child may benefit from Makaton/Singalong to support spoken language
		• Provide a range of multi-sensory experiences that encourage the child to investigate using different senses

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

	• For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893)
	
	• If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss)
	
	• Contact the Sensory Inclusion Service (SIS) for advice and information
	
	• SIS to carry out specialist assessments of listening and language, following the service criteria
	
	• If required, SIS to provide, on loan, specialist auxiliary equipment, following the service criteria
	
	• Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan with particular reference to the Sensory Inclusion Service (SIS)
		• Use language alongside every activity and ensure that the child is exposed to a language rich environment
		• Repetitive rhymes, singing and musical instruments can be used to provide some children with valuable auditory experiences whilst taking care not to overwhelm them with sounds
		• Follow any recommendations from relevant professional (e.g. Specialist Teacher for the Deaf) regarding listening skills and language development activities
		• Small group individual interventions as advised by the Sensory Inclusion Service (SIS) may focus on -
		  ○ Development of listening skills
		  ○ Language development, including vocabulary
		  ○ Extended discussion and experiences around stories and areas of interest to the child
		  ○ Social interaction
		• Use specialist equipment as advised by the Sensory Inclusion Service
		• Provide a suitable area for STOD visits
		
		If required:
		• Implement advice from SALT Advice Line
		• Implement SALT Care plan

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure any advice, support and guidance given by the Early Years Team is incorporated into your planning for the child • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Add "SEN Support" indicator on Tracking Children's Progress Tool • Hold regular Child Centred Planning Meetings • Consider SEND training opportunities for staff members, including training from the Specialist Teacher of the Deaf (such as deafness awareness training, and training regarding the use and management of specialist equipment) and any appropriate training from SALT • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres	• Liaise with Speech and Language Therapist **Further Information** • Good practice guidance - Approaches to support hearing needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team as to whether the setting requires support from the Early Years Complex Needs Team	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Sensory & Physical Needs
Hearing Impairment
EYFS Link – Communication and Language

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

• Persistent and significant difficulties in reaching milestones.
 	
• May be 2 or more development bands below chronological age in 2 or more aspects within the prime (emerging).
 	
• The child has a diagnosed, permanent, bilateral hearing loss.
 	
• The child will also have observed, persistent, and significant difficulties with one or more of the following:
  ○ Delayed language development.
  ○ Accessing undifferentiated activities.
  ○ Accessing activities/provision without a high level of adult support.
  ○ Accessing activities in a large group.
  ○ Developing social skills.
  ○ Communicating with staff and other children.
	• Key Person to liaise with the setting SENCO
	
	• SENCO to support in identifying differentiated activities and strategies to support the child
	
	• Monitor and review the SEN Support plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process
	
	• For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893)
		Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus:
		
		• Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family e.g. SIS and the Early Years Complex Needs Team
		• Child may need intensive hearing, speech and language rehabilitation following hearing aid fitting or cochlear implant surgery
		• Child may need support with developing a manual/alternative communication system
		• Ensure a positive handling plan is in place if required, as explained in the setting's policy
		• Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning
		• Consider if targeted support is needed to support the child's daily routine

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• The child may also have additional learning difficulties and/or disabilities. • High levels of adult support for self-care needs. • The safety and wellbeing of the child may be at risk and require a high level of support. • Monitoring adults may need specialist training to support physical/medical needs.	• If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss). • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan with particular reference to the Sensory Inclusion Service (SIS). • Ensure any advice support and guidance given by the Early Years Complex Team is incorporated into your planning for the child. • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home. • Hold regular Child Centred Planning Meetings and invite the child's health visitor and Teacher of the Deaf • If the child's needs are significant and concerns remain, consideration should be given at the Child Centred Planning	• If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan. • Enable frequent contact with SIS to access support as required. If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist **Further Information** • National Deaf Children's Society (NDCS) • Glue ear: Hearing Support Service guide to glue ear and how it is managed **Further information to share with parents** • Being prepared for clinic appointments: information for parents • Information about deafness and hearing loss

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Meeting to an EHC Needs Assessment request. • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate. • Consider the use of Early Support materials. • Ensure that all staff have SEND training to support the child within the setting. Also, access any appropriate training from SALT. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If a child is new to the setting, give consideration to the child's transition from the home/previous setting.	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

SEN Support Plan

- Professionals who support me
- All about me
- All about me by my parents / carers
- Assessments
- Individual Record of Development in the Prime Areas
- Individual Record of Development in the Specific Areas
- Progress check at age 2
- Characteristics of effective learning
- Plan, Do, Review
- Supporting my learning

Or for a child with an EHC Plan:

- EHC Plan (reviewed annually, and updated if appropriate)
- Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly.
- Record of any external support, contact or advice, which has been implemented and reviewed.
- Includes documents from SIS, e.g. Record of visits etc., and/or records of liaison with SALT

Additional documents (if relevant/appropriate for individual):

- SALT care plan (including any review/evaluation)

Early Years

First Concerns

Sensory & Physical Needs
Physical
EYFS Link – Physical Development

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
• Evidence of some delay in meeting expected milestones. • 1 development band below chronological age. • Physical difficulties/delay that may require some adult assistance. • Delay in toilet training (age to be taken into consideration). • Lack of coordination of physical skills in comparison to peers e.g. the child may bump into things, fall over easily etc. • The child may find it difficult to keep up with peers in physical play, which may impact on self-confidence and ability to make friendships.	• Key Person to liaise with the setting SENCO • Setting SENCO to support in identifying differentiated activities and strategies for the child. • Work in partnership with the parents in planning for the child in the setting and at home, and start the 'Assess, Plan, Do, Review' process: My Plan and My Diary and review this regularly. • Add "First Concerns" indicator on Tracking Children's Progress Tool. • Continue to track and monitor the child's progress. • Discuss the child's development recorded in the Red Book and/or through the Integrated Review at age 2.	• Ensure that the setting has an Intimate Care policy in place and that it is followed by all staff. • Provide appropriate indoor and outdoor equipment that provides children with the appropriate level of support, risk and challenge focussing on gross and fine motor skills: **Gross Motor Skills** • Ensure there is sufficient floor space and provide the child with plenty of opportunities to walk, run and crawl on different surfaces – grass, carpet, vinyl. • Provide outdoor equipment that encourages children to balance, climb, jump, slide, lift, pull, push, hang, spin and swing; for example steps, logs, planks, wheelbarrows, tyres, tunnels, large balls, large blocks etc. • Create a path with things to step onto (carpet mats for no height or blocks/logs)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• The child may not have developed hand dominance. • The child may have difficulties with fine motor skills e.g. holding a crayon, pencil etc. • The child may avoid activities which involve fine motor control e.g. using tweezers, small pegs etc. • Muscles in the child's hands may appear to lack strength and control is delayed. • Child may lack co-ordination during two handed activities. • Child loses skills previously mastered. • Some difficulties with self-help skills, for example, dressing, mealtimes etc.	• Setting to liaise closely with the linked Health Professional (see Handbook for further information). • Consider SEND training opportunities for staff members. • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • If concerns continue, the Key Person and the SENCO to discuss whether the child needs specific SEN support and to share this with the parents/carers. *Note: If the child loses skills previously mastered, advise parents to contact Health Visitor or GP*	and paths with defined sections to step into (hoops, ladder on ground, tiles) • Introduce an obstacle course with items at different heights and promote a range of movements such as climbing, crawling, tummy wriggling, rolling and sliding. • Provide opportunities to use bikes. As the child builds skill and confidence in riding a bike, introduce obstacles to peddle round and traffic lights to encourage stopping and starting. • Play parachute games and chasing games such as Musical Statues and 'What's The Time Mr. Wolf?' **Fine motor skills** • Provide builder's trays with a range of messy play opportunities and large surfaces to mark with paint, water and shaving foam using brushes and hands. • Provide a range of resources to build hand coordination, control and dexterity such as playdough, clay, finger and brush painting, tape, ribbons, string, rope and pulleys, water play equipment, pegs, threading, construction equipment and small world resources. • Introduce 'Start Stop' games to develop fine motor skills with musical instruments

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		(fast/slow, loud/quiet): drumming using two hands and alternate hands, spoons and sticks on pots. **Further Information** • Physical Development Good Practice Guidance **Further Information to share with parents** • Move with me leaflets - physical development tips for parents of 0-5s • Physical activity for early year's infographic. • Change4Life • Parenting Journey – Developmental Leaflets

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Discussions about me – My Diary • First concerns – My Plan In addition to: • Individual Record of Development in the Prime Areas • Individual Record of Development in the Specific Areas • Progress Check at Age 2

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Early Years

SEN Support

Sensory & Physical Needs
Physical
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant delay in reaching milestones • 2 developmental bands below chronological age in 2 or more aspects within the prime areas (secure) • Physical difficulties that require equipment and adapted resources and a higher level of support • Physical independence is impaired and requires input and/or programmes from relevant professionals • Physical difficulties that require close monitoring to ensure wellbeing and safety	• Key Person to liaise with the setting SENCO and parents to share concerns, and then begin the SEN Support Plan. Record parent views in the "All about me by my parents/carer" section of the SEN Support Plan • Continue to liaise with the setting's linked Health Professional, as appropriate • SENCO to support the key person in planning differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process	Continue with any relevant strategies from First Concerns level, plus: • Follow the strategies advised by the child's Physiotherapist and/or Occupational Therapist • Provide an environment that supports a child's developing independence e.g. position furniture to enable children to access resources, activities etc. **Further Information** • Approaches to support physical needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan (e.g. from Physiotherapist and/or Occupational Therapist) • Ensure any advice, support and guidance given by the Early Years Team is incorporated into your planning for the child • Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Add "SEN Support" indicator on Tracking Children's Progress Tool • Hold regular Child Centred Planning Meetings • Consider SEND training opportunities for staff members • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If child's development continues to cause concerns and progress is slow, setting SENCO to discuss with the Early Years Team as to whether the setting requires support from the Early Years Complex Needs Team	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	**SEN Support Plan** • Professionals who support me • All about me • All about me by my parents / carers • Assessments – Individual Record of Development in the Prime Areas – Individual Record of Development in the Specific Areas – Progress check at age 2 – Characteristics of effective learning • Plan, Do, Review • Supporting my learning

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX/SPECIALIST and consider a request for an EHC needs assessment

Early Years

Complex / Specialist

Sensory & Physical Needs
Physical
EYFS Link – Physical Development

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Persistent and significant difficulties in reaching milestones • 2 or more development bands below chronological age in 2 or more aspects within the prime areas (emerging) • Physical difficulties that require specialist equipment, adapted resources and position changes and a high level of adult support • High levels of adult support for self-care needs • Physical difficulties that put the safety and wellbeing of the child at significant risk and require intensive support • Continuous loss of physical skills	• Key Person to liaise with the setting SENCO • SENCO to support in identifying differentiated activities and strategies to support the child • Monitor and review the SEN Support Plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Ensure any suggested specialist advice is incorporated into the child's SEN Support Plan (i.e. from Physiotherapist/Occupational Therapist) • Ensure any advice, support and guidance given by the Early Years Complex Team is incorporated into your planning for the child	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Strategies used when supporting children with high level needs are individualised and it is expected that they would come from the advice given by the specialist services that support the child and the family and from the Early Years Complex Needs Team • If the child has an EHC Plan the setting should ensure that planning and interventions relate to the outcomes set out within the plan. Progress should be monitored in relation to the outcomes specified in the EHC Plan • Incorporate moving and handling plans and care plans into planning, as advised by professionals

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant medical difficulties that require controlled medication and intensive intervention throughout the day	• Ensure close partnership working with parents. This includes sharing SEN support plans, and strategies and interventions to use in the setting and at home • Hold regular Child Centred Planning Meetings and invite the child's health visitor and therapists • If the child's needs are significant and concerns remain, consideration should be given at the Child Centred Planning Meeting to an EHC Needs Assessment request • Add "SEN Support" or "EHC Plan" indicator on Tracking Children's Progress Tool, as appropriate • Consider the use of Early Support materials • Ensure that all staff have SEND training to support the child within the setting • Support children and their families to access universal and targeted services as appropriate in their local Children's Centres	• Ensure a positive handling plan is in place if required, as explained in the setting's policy • Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If a child is new to the setting, give consideration to the child's transition from the home/previous setting	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

SEN Support Plan

- Professionals who support me
- All about me
- All about me by my parents / carers
- Assessments
  - Individual Record of Development in the Prime Areas
  - Individual Record of Development in the Specific Areas
  - Progress check at age 2
  - Characteristics of effective learning
- Plan, Do, Review
- Supporting my learning

Or for a child with an EHC Plan:

- EHC Plan (reviewed annually, and updated if appropriate)
- Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record which is updated regularly.

12. The Graduated Approach in school

12.1. Introduction

This section should be used by school staff supporting children working towards key stages 1 - 4. Schools who take children from age 2 should also use the Early Years section. Due to funding arrangements and eligibility criteria for a number of services, this school section should also be used for young people in school sixth forms (although consideration should also be given to the post-16 section for these young people). Using the Graduated Approach means recognising there is a continuum of need and that needs are met through the addition of increasingly specialist interventions as the level of need increases. In line with *The SEND Code of Practice (January 2015)*, mainstream schools must designate a teacher to be responsible for co-ordinating SEN provision (the SEN Co-ordinator or SENCO) and must inform parents when they are making special educational provision for a child.

12.2. What is Quality First Teaching / Ordinarily Available Inclusive Provision?

Support for all children and young people in schools starts with **Ordinarily Available Inclusive Provision/ Quality First Teaching.**

This describes what should be on offer for all children: i.e. the effective inclusion of all pupils in high quality, every day, personalised teaching.

Such teaching will, for example, be based on:

- clear objectives shared with the children
- careful explanation of new vocabulary
- lively interactive teaching styles

Approaches like these are the best way to reduce, from the start, the number of children who need additional help with learning and behaviour.

What does Ordinarily Available Inclusive Provision (OAIP) look like?

As a simple overview, OAIP involves the following:

- Well organized classroom with labels and picture symbols
- Clear lesson structure with objectives presented orally and visually
- Instructions given in small chunks with visual clues
- Understanding is checked by asking children or young people to explain what they must do
- Children demonstrate understanding in a variety of ways
- Peer groupings are varied and fluid
- Interspersed Activities and listening to allow for varied 'kinaesthetic' approaches
- Praise is specific and named
- Memory supported by explicit demonstration and modelling
- Classroom support planned for and used to maximise learning
- Children or young people are clear what is expected and good examples are used when necessary

More detailed examples and information about what OAIP looks like for the different areas of need is provided at the beginning of each area of need in the graduated approach charts.

The Graduated Approach and Preparing for Adulthood

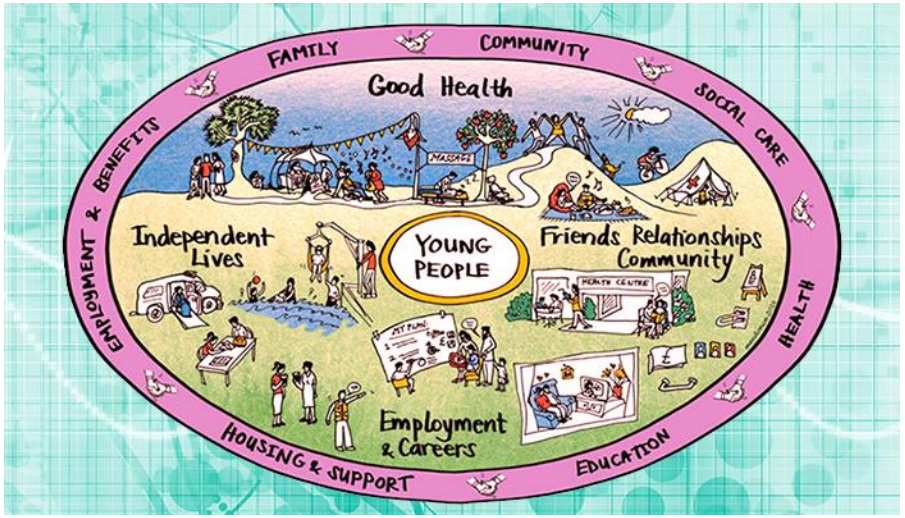
Preparing for Adulthood (PfA) is an approach to keeping the child or young person at the centre of our work and valuing their hopes, aspirations and ambitions from early years to adulthood. The PfA approach looks at **outcomes** and focusses on the child or young person to steer and drive the provision that needs to be put in place to support their aspirations. We have taken a practical approach to the PfA **outcomes** and identified resources and strategies to support all educational phases to integrate PfA into their work through the 4 broad areas of need. Further information on Preparing for Adulthood can be found on the website for the national programme: https://www.preparingforadulthood.org.uk/

The following tables provide examples which will enable professionals to think about what preparing for adulthood outcomes might be across the curriculum and the continuum of need. It also shows how children and young people can be supported in understanding themselves and can be built upon as the individual develops through their education, career and beyond.

PfA also supports children and young people through empowering them to make realistic and individual choices about their futures by providing them with the appropriate information and skills in order for them to achieve their aspirations.

There are 4 national Preparing for Adulthood outcomes:

1. **Employment and Higher Education**
2. **Independent living**
3. **Participation in society**
4. **Being as healthy as possible in adult life**



0-25 Years

Preparation for Adulthood

Cognition and Learning

EDUCATION AND EMPLOYMENT	INDEPENDENT LIVING	PARTICIPATION IN SOCIETY	HEALTHY LIVING
COGNITION Write lists or story maps Break down work into shorter tasks Sequence instructions and ideas Take regular breaks Chunk information Reread things Think before responding to questions Use of AI Pay attention to what is going on around you Prioritise what is important to me Show tolerance towards tasks/activities they don't like for a short period **LEARNING** Recognise signs and symbols in their environment Infer/ find information in text Use assistive technology to gain or create information Write or type name & addresses	**COGNITION** Use a timetable or calendar Write lists or reminders Follow step by step instructions or routines Complete tasks in smaller steps Keep a diary, journal or planner ICE – in case of emergency know who to contact or have a trusted adult Know where to get familiar resources from To transition between areas with support Manage own time management Know what to do if my routine changes **LEARNING** Recognise signs and symbols Find information in text Use IT technology to gain information	**COGNITION** Participate within a social exchange Identify they belong to certain groups /communities e.g. family, school Use key phrases with unfamiliar adults Identify environments that impact on concentration and focus Use lists and images to help identify places and people Be able to leave a favoured activity knowing they will go back Know who cares for them and who they should care for **LEARNING** Understand appointment letter and correspondence Access community events through websites, newsletters, and social media	**COGNITION** Drink and eat from a range of food groups regularly to help with attention and focus Identify when your body needs a recharge to help with concentration and focus Communicate to your trusted adult if you feel unwell Get dressed/undressed following specific sequence Understand what to do to keep them healthy Identify if clothes are wet or dirty. **LEARNING** Know and name body parts Wear appropriate clothing for the weather Learn correct hygiene process – washing, brushing hair and teeth

Write in clear sentences Write for purpose and audience Write clearly with basic punctuation Understand and use: Comparative language; smaller longer Time; Know different times of the day and order events Time passing, planning and time management Calendar; planning and management Money; budgeting, paying, payment methods Measurement; weight, capacity, distance Calculate using the four operations Problem solving strategies Visual data tables and graphs IT systems Understand deadlines and planning towards them Understand the difference between fiction and reality Share attitudes/skills needed for work/ employment	Follow food recipes and ingredients, Interpret instructions, and warning labels, Follow signs, maps and directions Understand life documents, bills, insurance, banking Write and address correspondence Email and password management Shopping and ingredient lists Form filling Weigh out ingredients Budget and payment methods Use a calendar, time, and event management Distances, timetables, and fares Understand temperature and controls e.g. heating system, water Learn how to use mobile phone correctly Know What to do if my timetable changes How to open a range of containers and food items Learn how to keep room/ home tidy and clean and clothes/bedding Know how to cross the road safely	Understand how to keep safe online and recognise scams, and phishing Know what services are available and how to access them Make emergency calls and identify which service is appropriate Access and understand voting system Clubs and groups Plan routes to access key places Be able to send emails to professionals and services How to look after environment e.g. recycling/litter Identify differences of opinions or how to make a complaint Negotiate transport- paying for bus, tram, train tickets To take on different roles within their community with support Learn that there are people with similarities and differences with regards race, religion, gender, age, ability, culture etc	Learn how my body grows and changes as I grow up Know the difference between private and public behaviours What to do if you have an accident and who to contact for help Medical and appointment information including prescriptions Dietary information of food stuffs Access to leisure facility sessions Access health services and appointments Manage medication and prescriptions Understand and classify different food groups for a balanced diet Weigh and measure ingredients and portions Follow time patterns to know when it is breakfast, lunch and dinner time Understand how to keep safe within relationships Understand contraception and sexual health

	Pack equipment needed for school/work/pleasure independently		

School

Ordinarily Available Inclusive Provision

Cognition and Learning

Impact on Learning ***What are we seeing?***	**Response** ***What should we and who should be doing it***	**Strategies** ***What can we put in place?***
Children may present with some of the following in the whole class teaching/environment: • Sometimes has an inconsistent recall of learning • Possible task avoidance or non-finishing or finishing quickly • Slow to begin tasks or looking for support to start • Instructions may only be partially followed • Takes time to think before starting a task or following an instruction • Checks around the room for what others are doing • Copies peers' work or task. • Missing the right resources or no resources to start a task • Constant repetition of task instruction e.g. write the date • Difficulties with copying or place keeping when writing	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual pupils, is the starting point in responding to pupils who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for children and young people with SEN.	• Differentiated curriculum planning, multi-sensory activities, delivery, and outcome • In-class targeted teacher support and modelling • Increased visual aids – timetables, images, timer, strategy reminders 3B4ME etc • Illustrated/ACE dictionaries/working walls • Match understanding to difficulty and level of text • Literacy/Alphabet/Vocabulary Mats/writing frames • Pre-teaching/ revision/ ongoing retrieval of subject vocabulary and knowledge • Use of individual name to focus attention • Instructions broken down into manageable chunks and given in sequence and time to process • Teach sequencing as a skill e.g. sequencing stories, alphabet, instructions etc. • Encourage pupils to explain what they need do to check task understanding

Impact on Learning *What are we seeing?*	Response *What should we and who should be doing it*	Strategies *What can we put in place?*
• Shares ideas immediately i.e. shouts out • Looks anxious when starting an activity • Fidgeting Fidgets or gets up to move around • Can be distracted or distracts others • Difficulties with recognising and applying related facts • Requires learning to be presented the same way consistently • Doesn't easily link learning or each aspect of learning is isolated	"Good planning of well-sequenced and manageable lessons and class work coupled with effective pedagogical choices, and robust assessment for learning – which was used to change instruction so all learners could achieve – was the first step in reducing underachievement." Teachers' standards: overview (publishing.service.gov.uk)	• Resources, equipment, homework diaries make use of consistent symbols and colour coding • Make links to prior learning explicit • Review key learning points at appropriate times during and at end of lesson • Alternative ways to demonstrate understanding e.g. diagrams, mind maps, use of voice recorders • Mark writing for content - encourage pupils to highlight one or two words themselves that may be incorrect to be looked at later • Use IT programs and apps to reinforce and revise what has been taught • To support short term memory, have small whiteboards and pens/ paper available for notes, to try out spellings, record ideas etc. • Texts which reflect interest and age range - good range of 'hi-lo' (high interest, low reading age) available • Present Text clearly - uncluttered, use bullet points and clear font • Accompany text with diagrams and pictures to support comprehension • Cloze procedure exercises to vary writing tasks and demonstrate understanding • Don't ask pupil to read aloud in class unless you know they have pre-prepared and are comfortable with this

Impact on Learning *What are we seeing?*	Response *What should we and who should be doing it*	Strategies *What can we put in place?*
		• Numeracy/number/symbol Mats/100 square etc • Use different coloured pens to support learning spellings, identifying different sections of text, one colour for each sentence etc. • Mark starting point for each line with a green dot or highlight each line • Minimise copying from the board - provide copies for pupil if necessary

School

First Concerns

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Low general attainment and progress and/or gap beginning to widen • Difficulty in understanding abstract concepts and applying prior learning • Speech and language difficulties • Attention and concentration span difficulties, e.g. easily distracted or short attention span • Literacy difficulties, e.g. reluctance to read or poor sight vocabulary • Numeracy difficulties • Untidy handwriting/clumsy • Poor organisation • Discrepancy between oral and written work • Difficulty following instructions • Tiredness due to excessive concentration levels needed • Social and behavioural difficulties arising from low self-esteem and frustration	• Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary • Discuss concerns with SENCO	• Identify gaps in learning and provide focussed teaching • Place yourself where children/young people can see your face clearly and you can see them • Ensure text and print is displayed using appropriate font and/or colour background • Keep all distractions to a minimum • Have clearly differentiated success criteria • Allow extra time for processing information, answering and completing tasks • Allow for frequent practice through recall and repetition • Use a variety of strategies for recording • Present new information in small chunks keeping language simple • Ensure that targets are SMART and achievable • Have visual prompts on display • Use colour highlighting for word patterns, prefixes, suffixes etc. • Introduce new material in a multi-sensory way – show it, listen to it, look at it, hear it, say it, write it

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place child or young person on a 'First Concerns' Register • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support)	• Use technology to support learning • Encourage Peer support • Provide visual and practical resources to present key information • Encourage the use of spelling strategies, for example: mnemonics, words within words, base words and suffixes etc. • Use writing scaffolds to support planning • Use concept maps to plan and identify overall themes and the relationships between ideas • Use the marking criteria as a stimulus when redrafting work • Provide occasional opportunities to work with a scribe – perhaps within a small group to produce a piece of writing for 'publication'

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.). • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • The gap between the child or young person and that of his/her peers may be significantly wider than would be expected for children or young people of his/her age • May also be socially or emotionally immature and have limited interpersonal skills • Attention and concentration span difficulties, leading to poor motivation and resistance to learning • Difficulties with sequencing, visual and/or auditory perception, coordination, or short term working memory • Difficulties in the acquisition of reading, writing, oral or number skills, which do not fit his/her general pattern of learning and performance • Difficulties with other areas, e.g. motor skills, organisation skills, behaviour, social or emotional skills and multi-agency advice may be required	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Seek external advice from appropriate educational agencies such as Cheshire East Autism Team (CEAT) and Educational Psychologist (EP) Clusters • Seek external advice from health professionals such as: School Health, Speech and Language Therapy (SALT); Child and Adolescent Mental Health Service (CAMHS) or Learning Disability (LD) CAMHS	Continue with any relevant strategies from First Concerns level, plus: • Provide appropriate small group interventions and resources specific to need with measurable SMART targets • Provide regular, specific focused teaching which is increasingly individualised from teacher or teaching assistant • Ensure pre and post assessments are completed for each intervention • Implement, monitor and review advice from external agencies • Try a range of coloured overlays and/or reading rulers • Use calendars and checklists to structure classroom/homework tasks and enable child or young person to meet deadlines • Teach keyboard skills

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Very specific difficulties (e.g. diagnosis of dyspraxia or dyslexia etc.) affecting literacy skills, spatial and perceptual skills and fine and gross motor skill	• Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support). • Further investigate gaps in learning to identify specific needs or barriers • Carry out and review further assessments as required and/or as advised by outside agencies • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD)	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• SEN Support Plan, which should include: • Record of parental views • Record of child or young person's views • Collated assessment data from a range of sources (e.g. class teacher and SENCO) • Record of desired outcomes for child or young person • Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) • NOTE: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map) • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, e.g. CEAT or EP action plan • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Will have low attainment reflected in levels, typical of two thirds of chronological age with the gap possibly continuing to widen • Difficulties in the acquisition of reading, writing, oral or number skills, which require high levels of tailored support • Inability to concentrate even with targeted support or resources leading to poor motivation and resistance to learning • Frustration in inability to access learning leading to complete disengagement with learning or problematic behaviours which are unmanageable in a mainstream setting even with high levels of support and tailored, individual and skilled interventions • Limited social, emotional and interpersonal skills, requiring high level of tailored support	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Continue to identify gaps in learning • See EHCP for specific outcomes and break outcomes into smaller, SMART targets and review frequently • Create a personalised curriculum tailored to the child or young person's needs (this may require consultation with all professionals involved with the child or young person) • Incorporate external advice • Liaise with support to ensure learning outcomes are facilitated and resources are readily available • Put behaviour management programme in place, if appropriate

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Complex difficulties with sequencing, visual and/or auditory perception, coordination, organisation, concentration or short term working memory	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child/young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support)	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	- plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD)	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
 • EHC Plan (reviewed annually, and updated if appropriate) Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following: • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) • Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, which has been implemented and reviewed • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to SPECIALIST

School

Specialist

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Won't meet age related expectations in all areas of learning throughout their education and not expected to exceed P-levels or National Curriculum Level 1 by Year 11 in mainstream education and/or needing access to alternative accreditation and/or lower level GCSEs	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement	• Individual education programmes/plans put in place • Individualised curriculum closely tailored to identified long and short term outcomes for the child or young person, and likely involving pre-subject based learning and functional life skills training • High ratio of staff to pupils • Specially trained teaching staff and teaching assistants • Small class sizes (smaller than 10) • Multi-Disciplinary Team interventions on or off-site • Multi-sensory teaching • High level of appropriate 'catch-up' interventions put into place to try and accelerate progress • Assessment using a 'small steps' measure such B Squared/PIVATS

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) • Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice (including reports or assessments) which has been implemented and reviewed • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

0-25 Years

Preparation for Adulthood

Communication and Interaction

EDUCATION AND EMPLOYMENT	INDEPENDENT LIVING	COMMUNITY & INCLUSION	HEALTHY LIVING
COMMUNICATION Communicate information through chosen methods – verbal, PECS etc Speak in sentences to explain ideas Respond to instructions and recall information to complete tasks Communicate your skills to help gain experience and different roles e.g. class council, school leadership team, college / university placements and jobs. Select answers or resources from open ended questions Be able to infer from information given **INTERACTION** Know who it is safe to talk to at school/work Know how to talk to different people e.g. friends, family, teachers, tutors, employers etc Take turns in conversations with peers, adults or co workers	**COMMUNICATION** Be able to communicate needs and wants from adults, peers in school, people in shops or in the community to ask for items etc Be able to ask the way and say when you are lost to an appropriate person Understand and follow instructions e.g. hoe to cook something, follow a map, use technology Know who to go to for help if you a struggling to communicate your needs /wants **INTERACTION** Know who it is safe to talk to e.g. police, key workers etc Know how to talk to different people e.g. friends, family, businesses etc Take turns in conversations when asking for things	**COMMUNICATION** Greet someone when you meet them Communicate information through chosen methods – verbal, PECS etc Recognise safe and appropriate people to talk to in school /community Apply appropriate strategies to resolve conflict or differing of opinion Share opinions and views to appropriate people in school, college, community Know how to communicate safely in different environments and online with unfamiliar people **INTERACTION** Follow setting/community rules – walk slowly, pick up litter, no swearing Playing games with peers in a small group outside taking turns	**COMMUNICATION** Be able to express likes/ dislikes, welcome/ unwelcome Know who to tell when unwell Know how and when to seek emergency and/ or medical help Recognise and communicate when hungry, thirsty, need the toilet etc Know who is appropriate to talk to about feelings and emotions Make voice heard in health and social care provision **INTERACTION** Recognise own and others personal boundaries Access clubs and events that support health and wellbeing e.g. sport Be able to speak about how you are feeling To know what is public and what is private behaviours

Talk about things of interest to others Identify own and others personal space within school or workplace	Talk about things of interest to others Identify own and others personal space when out and about	Going for a walk in the local park with friends Participate within a social exchange within an activity Accept ideas of others Take on a different role within a group with support	Maintain good personal hygiene Understand contraception and sexual health

School

Ordinarily Available Inclusive Provision

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Children may present with some of the following in the whole class teaching/environment: • At times, may misunderstand the unspoken rules of social communication e.g. waiting to speak • Does not always listen to instructions • Overshares information or goes off topic • May not contribute or contribute too much in paired / shared work • Gives too much or too little eye contact • Misreads situations and acts inappropriately • Difficulties with understanding body language and facial expressions • Shares inappropriate information or use of inappropriate voice tone and intonation • Misinterprets intention when someone speaks e.g. It's cold outside means go and get your coat • Difficulty understanding vocabulary especially new information • Difficulty using correct word in correct context	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual pupils, is the starting point in responding to pupils who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for children and young people with SEN. "Good planning of well-sequenced and manageable lessons and class work coupled with effective pedagogical choices, and robust assessment for learning – which was used to change instruction so all learners could achieve	• Display photographs of staff and pupils in foyer and classrooms • Display, teach, model, and regularly reinforce 'Rules' of good listening • Ensure pupils are aware of pre-arranged cues for active listening (e.g. symbol, prompt card) • Emphasise key words/vocabulary when speaking and display visually with picture cues • Use a range of multi-sensory approaches to support spoken language e.g. symbols, pictures, concrete apparatus, artefacts, role-play • Break down instructions into manageable chunks and give them in the order they are to be completed by • Provide conversation starters and finishers • Teach idioms in context • Classify groups of words e.g. animals • Slow down delivery of information and give time to allow processing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• May struggle to follow a set of instructions • May forget unfamiliar words • Uses nonspecific vocabulary e.g. '*thingy, whatsit*' • Overuse of gesture to support verbal communication • Doesn't always understand jokes or sarcasm • Difficulties understanding semantic links e.g. which things go together- shoe and foot • Uses limited languages or closed answers • Fidgets and has a need to move around • Difficulty following or completing instructions • Flits between conversations topics or activities • Relies on nonverbal communication methods • Anxiety increases when asked to speak in front of others • May appear to ignore others	– was the first step in reducing underachievement." Teachers' standards: overview (publishing.service.gov.uk)	• Give pupils a demonstration of what is expected • Use a system of visual feedback to show if something has been understood • Encourage and show pupils how to seek clarification • Use narrative frame prompt cards (who, where, when, what happened etc.) to support understanding of question words • Encourage responses through talking buddies or similar peer influences • Support pupils to ask and answer questions • 'Word walls', mats or similar, to develop understanding of new vocabulary • Advise parents of new vocabulary so it can be reinforced at home • Minimise use of abstract language • Set a clear role and purpose in group work • Use names to communicate individual instruction or regain attention • Give a synopsis or 'gist' of what's coming e.g. when reading a story • Consider possible warning or provide questions in advance

School

First Concerns

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: **Difficulties relating to others** • Inability to interpret social cues correctly • Poor social timing • Lack of social empathy • Lack awareness of personal space • Difficulty maintaining appropriate eye contact • Lack of appropriate social conversational skills • Literal use and interpretation of language • Inability to see other people's point of view • Resistance to change and difficulties with transitions • Removal of self from certain environments • Solitary play and unusually focused special interests • Difficulties taking part in conversation • Inappropriate use of facial expression **Language**	• Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Consider any relevant health records that have been shared/provided (e.g. school health) • Observe and compare potential barriers to learning and participation across a range of contexts	• Place yourself where children or young people can see your face clearly and you can see them • Keep all distractions to a minimum • Have visual prompts on display (to reinforce the rules of good listening, good sitting and turn-taking) • Consider where children and young people are seated within the learning environment to enable them to see visual prompts etc. • Have clearly differentiated success criteria • Allow extra time for processing information, formulating a response and completing tasks • Allow for frequent practice through recall and repetition • Use a variety of strategies for effective communication, including visual support and/or encouraging the child or young person to say in a different way or show • Encourage child or young person to use gestures to support speech

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Limited vocabulary knowledge, learning and using new words • Difficulty understanding words that are said to them or verbal instructions • Attention and concentration skills • Limited spoken language for their age • Poor organisation and sequencing • Echolalia (repetition of noises or words spoken by another person) • Difficulty in understanding abstract concepts and applying prior learning • Difficulty with receptive and expressive language **Speech** • Monotone speech • Unclear speech • Stammer and/or difficulties getting words out • Nasal quality to speech in the absence of a cold • Unusual accent not linked to environment **Sensory** Experiences sensory processing difficulties, which may be observed by the following (this is not an exhaustive list): • Actions such as rocking, stroking, flapping and/or hands over ears	• Carry out further assessments as necessary • Discuss concerns with SENCO • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place child or young person on a 'First Concerns' Register • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support) • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT)	• Encourage the child or young person to tell you if they have not understood something • Create a predictable and consistent environment, ensuring routines are followed • Keep language clear, concise and unambiguous • Use the child or young person's name at the start of any instruction or information giving • Present new information in small chunks, using simple language that is relevant to the child or young person • Ensure that targets are SMART and achievable • Introduce new material in a multi-sensory way – show it, listen to it, look at it, hear it, say it, write it • Use technology to support learning • Encourage Peer support • Use visual timetables and calendars • Use concept maps to plan and identify overall themes and the relationships between ideas • Recap relevant vocabulary. Ensure knowledge of vocabulary before introducing a new topic. • Use clear adult models of speech and language, and repeat, emphasise and expand, as needed

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• A self-limiting diet • Difficulty with body temperature regulation, e.g. coat on and hood up on a hot day or t shirt with no jumper or coat on a cold day **Other** • Poor self-esteem • Frustration/anxiety due to social and communication difficulties • Social and/or behavioural difficulties arising from low self-esteem, frustration, or communication difficulties	Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893	• Use adult modelling of appropriate social phrases in context • Make use of direct Playground Game teaching/ Personal, Social, Health and Economic (PSHE) education opportunities. Plan daily opportunities to teach specific skills such as sharing etc. • Make use of resources such as: - Move 'n' sit cushions - Buzy legs - Movement breaks - Fiddle toys • Explain words and phrases that have more than one meaning or may be misconstrued e.g. pull your socks up • Encourage discussion and prediction about stories • React to what the child or young person says, not how clearly they speak • Don't pretend to understand

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: **Difficulties relating to others** • Inability to interpret social cues correctly • Poor social timing • Lack of social empathy • Unawareness of others' personal space • Difficulty maintaining appropriate eye contact • Lack of appropriate social conversational skills • Literal use and interpretation of language • Rigidity and inflexibility of thought processes • Inability to see other people's point of view • Resistance to change and difficulties with transitions • Solitary play and unusually focused special interests • Difficulties taking part in conversation • Inappropriate use of facial expression	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child or young person on register as SEN Support (Code K) • Seek external advice from educational agencies such as Cheshire East Autism Team (CEAT) and Educational Psychologist (EP) Clusters • Seek external advice from health professionals such as School Health, Child and Adolescent Mental Health Service (CAMHS) or Learning Disability (LD) CAMHS	Continue with any relevant strategies from First Concerns level, plus: • Use a variety of strategies for effective communication – e.g. Picture Exchange Communication System (PECS), Widget, visual supports • Create an individualised timetable which is predictable and consistent, and includes unstructured times e.g. lunch • Use individual visual timetables, now and next boards, calendars and task lists to structure activities • Use social stories and comic strip conversations to aid understanding of social situations • Withdrawal facilities provided for times of stress or anxiety • Specific small group interventions • Differentiated curriculum, resources and success criteria. • Implement strategies from outside agencies

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Language • Limited vocabulary knowledge, learning and using new words • They don't understand words that are said to them or verbal instructions • Attention and concentration skills • Poor organisation and sequencing • Limited spoken language for their age • Echolalia (repetition of noises or words spoken by another person) • Difficulty in understanding abstract concepts and applying prior learning • Difficulty with receptive and expressive language **Speech** • Monotone speech • Unclear speech • Speech or sound production difficulties and/or differences • Stammer, difficulties getting words out and/or dysfluency (i.e. disruptions in forward flow and timing of speech) • Nasal quality to speech in the absence of a cold • Unusual accent not linked to environment	• For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • If required, refer to Speech and Language Therapy and implement advice, strategies and care plan from SALT (as appropriate for individual child or young person) • If appropriate, complete initial sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and environmental audit checklists) • Carry out and review further assessments as required and/or as advised by outside agencies • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family	• Provide access to a quiet, distraction free work station if needed • Ensure that preferred methods of communication (as well as level of eye-contact) known by all staff within school • Build access to activities which meet the child's sensory needs into the day, for example: timetabled movement breaks, quiet area to access in classroom, egg chair or pop up tent • Consider access to a workstation and/or set up a low stimulation workstation, privacy board on group table or personal table with few distractions but informative visual information and support

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Sensory Sensory needs still affecting learning, for example: • Difficulties with large indoor and outdoor spaces (such as assembly/P.E/lunch hall) • Issues with background and/or white noise • Issues with certain scents and perfumes • Aversion to everyday touch • May touch/stroke others to self soothe/regulate **Other** • Poor self-esteem • Frustration / anxiety due to social and communication difficulties • Social and behavioural difficulties • Behavioural difficulties arising from low self-esteem, frustration, communication • Inconsistent behaviour between home and school	• Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support). • Ensure all staff involved in the teaching of the individual child are aware of their speech, language, social and communication difficulties. • Ensure class teacher and teaching assistants receive relevant Continuing Professional Development (CPD), including any specific training as advised by Speech and Language Therapy service	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• SEN Support Plan, which should include: - Record of parental views - Record of child or young person's views - Collated assessment data from a range of sources (e.g. class teacher and SENCO) - Record of desired outcomes for child or young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map) • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, e.g. CEAT or EP action plan, SALT care plan etc. • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • The gap in the child or young person's communication skills continues to widen and is significantly lower than would be expected for children or young people of his/her age • The child or young person's impaired social development, communication, language and speech difficulties, rigidity of behaviour and thought are enduring, consistently impeding his/her learning and leading to significant and complex difficulties in functioning • Revision of the differentiated classroom provision for the child or young person's education has not resulted in the expected progress towards achieving learning, pastoral and social interaction targets • In respect of receptive and expressive communication and social interaction, evidence of the child or young person's	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Continue to identify gaps in learning • See EHCP and/or SALT care plan for specific outcomes • Create a personalised curriculum (class teacher with SENCO support) • Liaise with support to ensure learning outcomes are facilitated and resources are readily available • From the sensory assessment checklist(s) devise a bespoke sensory diet and implement • From completion of Autism Education Trust's environmental audit make environmental changes as appropriate to meet child/young person's need

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
need for a systematic programme to develop his/her understanding of verbal and non-verbal communication • Evidence of significant difficulties persisting for the child or young person as a result of his/her inflexibility and/or intrusive obsessional thoughts • Evidence of a high priority having to be given to the management of the child or young person's language and communication difficulties in the planning of most classroom activities and the organisation of his/her learning environment	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child or young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary, including Speech and Language Therapy (SALT) care plan if necessary • Carry out and review further assessments as advised by outside agencies • Complete a sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and environmental audit checklists) • Implement strategies (including provision of targeted support and/or resources) up to	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support) - plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), including any specific training recommended by SALT	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• EHC Plan (reviewed annually, and updated if appropriate) Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following: • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) • Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

- Record of any external support, contact or advice, which has been implemented and reviewed
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- SALT care plan

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Access to the curriculum is only meaningful through use of a communication aid(s) and could not be used in a mainstream setting • Needing a fully inclusive approach across the whole educational setting, including a total communication environment with a variety of different high tech communication mediums which would not be expected in a mainstream setting (e.g. timelines, schedules, eye gaze system) • Interaction with others is minimal and inconsistent and impacts on curriculum access. Interactions occur only when facilitated and/or prompted by an adult. Child or young person would be totally isolated in a mainstream setting • Child or young person needs a high level of modification to the learning environment and organisation to their curriculum to avoid daily, high-level problematic behaviour and to keep them engaged in the learning environment	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement	Implement and use: • Alternative augmentative communication assessment and appropriate aids • High tech low tech systems • Use a variety of specialist strategies for effective communication – e.g. Picture Exchange Communication System (PECS), Widget, visual supports, Makaton, objects of reference, symbols, signs, proloquo2go, switches, voice output communication aids, eye gaze systems • Facilitate access to speech and language therapy • Carry out sensory assessments/audits and implement appropriate modifications • Use social interaction programmes/small group work as an integral part of the curriculum (e.g. Talking Partners, Circle of Friends, buddy systems) • Provide specialist communication sessions

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• High level of social anxiety or profound lack of social engagement leads to inability to communicate with others without support	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies, e.g. Speech and Language Therapy (SALT); sensory assessments/audit • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required, including any appropriate training from SALT	• Put behaviour modification programmes in place, if appropriate

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) • Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice (including reports or assessments) which has been implemented and reviewed • Including SALT care plan, if appropriate • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

0-25 Years

Preparation for Adulthood

Social, Emotional and Mental Health Difficulties

EDUCATION AND EMPLOYMENT	INDEPENDENT LIVING	COMMUNITY & INCLUSION	HEALTHY LIVING
SOCIAL Share information and knowledge with peers and professionals Communicate your skills to help gain experience and different roles e.g. class council, school leadership team, college / university placements and jobs. Know who it is safe to talk to Know how to talk to different people e.g. friends, family, teachers, tutors, employers etc Share if you feel peer pressure or bullying from peers Express personal preference for an activity or task Understand your ambitions and interests **EMOTIONAL** Be proud of something you have done	**SOCIAL** Learn and implement strategies to build resilience over time Have strategies for coping in different situations Know about a range of community services i.e. doctor, emergency Follow collective group rules and routines Follow social etiquette of peers e.g. sit appropriately at the table to eat and use cutlery Keep communal areas/bedroom tidy and clean Know how to call / text friends and family appropriately **EMOTIONAL** Identify emotions and strategies to self-support/ self sooth	**SOCIAL** Take turns and share in activities Access extra-curricular activities according to interest Know the qualities of a good friend; how to build and maintain relationships Understand there are rules to follow within all schools and communities Use appropriate strategies to resolve conflict Recognising appropriate people to talk to in the community Know how to access support if you are a victim of bullying or abuse Work collaboratively with peers on things of interest **EMOTIONAL** Identify if your environment is overwhelming and have strategies in place to help regulate	**SOCIAL** Know how to respect and respond to others' thoughts and feelings Be aware of inappropriate communication such as grooming or on social media e.g. phishing Manage healthy peer relationships Understand the perimeters for appropriate personal space, touching and sexual consent Participate in outdoor play/ sports clubs Wash hands after going to the toilet Recognise others should treat you with care **EMOTIONAL** Recognise feeling when unwell Know who to share you are unwell

Identify when you feel overwhelmed and need a break or rest Adapt and control emotions in new & different environments Use a bank of strategies to help regulate Know who to go to for help if you a struggling with your emotions Recognise things you are good at Identify kind and unkind behaviours **MENTAL HEALTH** Ask for help if unsure of task or instruction Have strategies to anticipate and deal with unexpected situations Ability to attend and respond to challenging situations Manage work pressures using a bank of strategies Identify strengths and how they can inform my future choices /activities To identify a good work/life balance	Identify and understand feelings/triggers and strategies to help Make appropriate choices and decisions Identify activities to engage in to help improve your mood or that will help with regulation Know how to deal with strong feelings Manage pressure and strategies to help e.g. exam preparation **MENTAL HEALTH** Adopt good routines for managing stress and anxiety Motivate yourself to organise and complete tasks Know who to talk to if you are feeling sad or upset etc Have a range of things to access / do to improve your mindset or emotions Recognise own personal boundaries linked to well being Identify safe spaces and areas to help regulate	Recognise your own acceptable or unacceptable behaviours Understand behaviours have consequences and how our behaviours may affect others Identify people who are special to us Respect other people's feelings and emotions Use behaviours appropriate to relationships **MENTAL HEALTH** Recognise how behaviours can impact on our wellbeing and strategies to help regulate Online safety - Understand the internet is for playing and learning Be able to choose appropriate internet pages and websites Manage social media in relation to personal perspective Know what action to take when discovering something inappropriate	Recognise and name emotions Understand others' emotions and how to respond Communicate emotions to others Identify stronger feelings e.g. fright or worry and what to do in a crisis How to deal with disappointment and rejection Identify what makes you happy and how to plan these things e.g. going to the cinema or gym **MENTAL HEALTH** To know some coping strategies are unhealthy and identify where to get help Manage bedtime routines Eat a balanced diet Recognise the importance of good hydration and diet to emotional well being Understand the effects of drugs and alcohol and consequences Recognise how things impact mental health; both positively and negatively To know how technology can impact self-image and self esteem

School

Ordinarily Available Inclusive Provision

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Children may present with some of the following in the whole class teaching/environment: • Difficulty with recognising and managing own emotions • Disproportionate response to situations e.g. not sharing equipment • Difficulty identifying and responding to others' emotions • Observed mood changes • Finds it challenging to accept compliments or praise • Overcritical of self or negative scenarios • Lack of confidence/ self-worth • Unable to make decisions • Reluctant to try new things in case of failure • Limited contact or engagement with peers • Avoids adult or peer interaction • Over reliant on adult or peer interaction • May want to lead or control things • Appears anxious or on edge • May be reluctant to try new things • May share feelings of being ill e.g. headache, tummy ache more frequently	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual pupils, is the starting point in responding to pupils who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for children and young people with SEN. "Good planning of well-sequenced and manageable lessons and class work coupled with effective pedagogical choices, and robust assessment for learning – which was used to change instruction so all learners could achieve	• Ensure Maslow's hierarchy of need is met • Take time to find pupil's strengths and praise these – ensure that the pupil has opportunities to demonstrate their skills to maintain self-confidence • Play calming music where appropriate • Provide lots of opportunities for multi-sensory learning e.g. practical activities, experiential learning, multi-sensory resources • Use interactive strategies e.g. pupils have cards/whiteboards to hold up answers, come to the front to take a role etc. • Make expectations for behaviour explicit by giving clear targets, explanations and modelling • Model pair/share or use post-it notes for questions and ideas rather than interruptions • Ensure that equipment and/or tools are easily accessible and available for use • Give a set time for written work and do not extend into playtime to 'catch up'

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Gives in easily • Gets frustrated • Limited facial expression, eye contact • Unusual reactions and states of arousal • Doesn't seek or ask for help	– was the first step in reducing underachievement." Teachers' standards: overview (publishing.service.gov.uk)	• Make use of different seating and grouping arrangements for different activities • Communicate in a calm, clear and positive manner • Teach emotional regulation and strategies • Possible safe flight path or exit strategy • Organise classroom to promote pupils to regulate, reflect and reconnect • Provide a class wellbeing worry monster, sensory box or mental health first aid kit • Adults model its ok to make mistakes or to apologise and talk through how to recover from making mistakes • Keep pupils in mind – 'did you enjoy going to the Zoo this weekend • Clear, appropriate success criteria that can be reviewed by pupils to develop positive self esteem • Positive affirmations • Planned quiet times during the day • Scaffolded activities and turn taking – turn taking dial, teddy • Apply social routines – familiar words to greet or a happy glance or rehearsed chat – what did you do today? • Model social etiquette • Provide clear, consistent boundaries • Provide and talk through breakdown of the day with visuals to support

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		• Provide pre warnings for when tasks are to finish • Break down transition times to reduce anxiety and overload

School

First Concerns

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention and/or participate in social groups • Involved in low level distractions which hinder own concentration and that of others due to a lack of social understanding, task avoidance and/or with intent to gain attention • Verbal challenges to peers or adults which do not cease with verbal intervention and requires adult intervention and/or time out from the situation • Is withdrawn and isolated, generally seeking too little or too much adult attention with limited or selective communication. Regularly appears on the fringe of activities • May not communicate feelings appropriately • Difficulty in controlling own emotions, feelings of frustration or distress in	• Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and record 'impact on learning' (using a behaviour log, if appropriate) across a range of contexts across school day to understand whether need is contextual/situational and to inform strategies needed • Carry out further assessments as necessary	• Use emotional resilience resources available • Consider seating and grouping of children and young people • Provide safe area for child or young person to calm down or concentrate when required • Have a range of simple, accessible activities that the child or young person enjoys using as 'calming' exercises • Make tasks short, with frequent breaks and opportunities to access physical or sensory activities • When child or young person is exhibiting signs of stress, make instructions short and language clear, and provide low-challenge tasks and increased structure and predictability. Adjust timescale and output expectations for tasks. • Use an anxiety scale during post incident reflection to measure and track level of anxiety at times of heightened emotion • Use of visual support such as traffic lights, symbols, photos etc. to reinforce classroom instructions and routine

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
response to social or environmental situation that requires a reflective response with the child or young person • Foreseeable signs of distress to usual social situations or activities, e.g. withdrawing, refusing, avoiding, lack of engagement that requires adult acknowledgement and a need for space or time out • Behaviour that can be challenging and/or upsetting towards peers or adults, that is perceived to be intentional • Some anti-authoritative behaviour • Anxiety and/or low mood impacting on ability to participate, engage and maintain attention requiring regular adult support and reassurance, which may be situationally dependent • Some self-esteem and/or resilience difficulties leading to avoidance of new experiences/fear of failure • Some controlled, low levels of self-harming behaviours	• Discuss concerns with SENCO • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place child or young person on a 'First Concerns' Register • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support) • Arrange appropriate training for staff through the Emotionally Healthy Schools Links Team (including mental health awareness and facilitated reflection; see the	• Use child or young person's name when addressing them or gaining attention • Provide access to 'fiddle toys' or similar items • Explicitly teach the child or young person specific social and communication skills e.g. how to ask for help • Use available adults to model, coach and reinforce group work skills when the child or young person is working collaboratively with others • Utilise positive behaviour strategies, such as praising desired behaviour, separating behaviour from child or young person and reminding of expectations, e.g. - Say what you want him or her to do, rather than what you don't - Label the behaviour but not the child or young person - Remind child or young person of a rule rather than telling them off, or make a point of praising a child or young person who is keeping the rule • Remind child or young person of the consequences of the various behavioural choices open to them • Make an effort to 'catch the child or young person being good' and praise them

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	'Getting Advice' quadrant of the Thrive Model)	• Teach child or young person how to reward themselves • Devise a private signal system to let the child or young person know when they are off task or behaving inappropriately • Involve child or young person in development of a planned reward system for appropriate behaviour • Teach strategies and make adaptations to support child or young person to achieve, thereby strengthening self-esteem and avoiding frustration if child or young person is struggling with tasks • Take steps to build child or young person's self-confidence, for example: - Provide opportunities to share interests and skills - Give them responsibilities or ask the child or young person to help others - Have them keep records of new things they learn and can do - Photocopy good pieces of work for them to take home • Make time and extra effort to develop a relationship with the child or young person and let them know they are held in mind when not teaching them

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		• Help the child or young person identify an appropriate adult that they feel comfortable sharing concerns with • Build in time for 'emotional check-ins' during the day, and listen without judgement • Use a buddy or mentoring system with another child or young person • Provide opportunities for supported peer interaction to further strengthen social and communication skills

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile Additional documents (if relevant/appropriate for individual): • Boxall Profiles • Behaviour log and/or records e.g. ABC forms/Tally sheets

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention, participate in social groups and distracts other children or young people, or self • Verbal aggression to peers or adults which does not cease with de-escalation techniques and/or requires time out from the situation • Is withdrawn and isolated, generally seeking too little or too much adult attention, which may often be negative attention • Will not communicate feelings appropriately • Difficulty in controlling own emotions and feelings of frustration or distress in response to social or environmental situation that requires emotional containment	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12-month period If necessary: • Obtain and record updated parents' views. • Obtain and record updated child or young person's views. • Complete an observation and analysis of frequency and pervasiveness of incidents over a range of contexts and across a number of lessons/activities using an ABC framework. • Consider child or young person's learning context, motivational factors, and social and emotional competencies. • Seek external advice from educational agencies such as Cheshire East Autism Team (CEAT), Educational Psychologist (EP) Clusters and the outreach services from	Continue with any relevant strategies from First. Concerns level, plus: • Provide a plan and support for unstructured and/or transition times. • As far as possible, take steps to increase stability and predictability of environment. • Provide individual task lists to enable child or young person to complete tasks to deadlines and reduce anxiety and/or anger. • Differentiate language and responses to take account of stage of social functioning and emotional development. • Adapt curriculum and allocate resources (adult support, or physical resources, e.g. ICT or sensory items) to meet individual SEMH need. • Implement an appropriate and individualised behaviour management programme. • Use appropriate emotional awareness and regulation workbooks or programmes

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Unforeseeable frustration and distress in response to personal, social or environmental situation which may result in danger or damage to self, people or property • Emotional responses that are not typical of the majority of the age group • Behavioural difficulties that have not been addressed by differentiated learning opportunities or by the strategies described above in 'First Concerns' • High levels of disruption causing break down in group activities, and requiring planned and targeted intervention and/or removal from the activity • Harmful or unsocial behaviour in different settings, which may pose a risk to self or others • Reduced ability to acknowledge or accept responsibility for his/her own actions in a heighted emotional state • Anti-authoritative behaviour • Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in multiple situations and requiring more sustained and recorded adult intervention and support	Adelaide School and Oakfield Lodge (Oakfield Plus – an outreach support facility which can be provided as a means to preventing exclusion). (See the 'Getting Advice' quadrant of the Thrive Model) • Seek external advice from health professionals such as school nurse or via an Emotionally Healthy Schools Links Team consultation session (who may recommend referral to a local mental health service as outlined in the Local Offer) (see the 'Getting Advice' and 'Getting Help' quadrants of the Thrive Model) • If appropriate, refer to Cheshire East self-harm pathway • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Carry out and review further assessments as required and/or as advised by outside agencies, for example:	within individual or a small group, such as Anger Gremlin, Anxiety Gremlin, 'think good, feel good' or 'no worries' programme. • Implement an individual or small group tailored social skills intervention. • Signpost young person to 'Reading Well' resources available at local libraries (list of books which cover common mental health conditions and available to borrow free of charge. The list is aimed at 13-18 year olds) • Use an anger scale with the child or young person, such as 5 point anger scale. • Individual or small group use of low-level emotional health interventions such as: relaxation exercises, safe place imagery, positive affirmations, thinking errors, positive events log, anxiety scale, worry charts, motivational rewards, celebration book etc. • Use appropriate interventions from self-harm pathway on an individual basis such as: personal safety plan, self-harm passport etc. • Assist child or young person to identify a member of staff who is able to carry out close liaison between home and school to ensure consistency across settings

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Low levels of self-esteem and/or resilience leading to avoidance of new experiences/fear of failure, despite strategies and additional support described at "first concerns" • Controlled, low levels of self-harming behaviours.	- a strengths and difficulty questionnaire (e.g. from www.sdqinfo.org) to strengthen understanding of need. - Environmental audit of classroom and/or outside space etc. - Risk assessment(s) relating to behaviour, self-harm etc. as appropriate. • Complete a SEN Support Plan, in conjunction with appropriate professionals, and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Complete a Reducing Anxiety Management Plan (RAMP) if required and appropriate. • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support) • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD) and	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	training, e.g. emotional containment; de-escalation techniques; conflict resolution and positive handling. Contact the Emotionally Healthy Schools Links Team for training on mental health awareness etc. (see the 'Getting Advice' quadrant of the Thrive Model) • Ensure protocols are in place for the positive management of specific behaviours and emotions which are consistent across all areas of school	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

- SEN Support Plan, which should include:
  - Record of parental views
  - Record of child or young person's views
  - Collated assessment data from a range of sources (e.g. class teacher and SENCO)
  - Record of desired outcomes for child or young person
  - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
  - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map)

- Log of meetings with parents - minimum of 3 meetings within a 12-month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, e.g. CEAT or EP action plan.
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets
- Risk Assessment
- Reducing Anxiety Management Plan (RAMP)
- Completed strengths and difficulty questionnaire (SDQ)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment.

School

Complex

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Withdraws or chooses not to participate in any interactions to a degree that requires continuing adult support within and outside the classroom context, e.g. a more personalised curriculum paying regard to specific areas of interest or strength and difficulty and differentiated appropriately. • Difficulties in forming and maintaining reciprocal peer and adult relationships leading to significant social isolation and disengagement. • Verbal and/or physical aggression to peers or adults which does not cease with de-escalation techniques and/or requires time out from the situation. • Will not communicate feelings appropriately. More likely to be communicated through negative behaviours.	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12-month period If necessary: • Obtain and record updated parents' views. • Obtain and record updated child or young person's views. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Develop a whole school approach that provides a consistent reward and sanction structure. • Implement an appropriately differentiated curriculum; this may incorporate a personalised/ alternative curriculum and/or timetable (facilitating SEMH skill development) • Short term and focused alternative provision within school where appropriate. • Use reflective practice to support positives and successes and develop a 'social toolkit'. • Provide access to appropriate key adult support. • Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce social anxiety.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Extreme emotional responses that are not age or situationally appropriate leading to an inability to engage with any formal learning situations and taking a significant amount of time and support to calm from • Complete disengagement and withdrawal in a classroom setting requiring high levels of adult support to re-engage with and access learning. • Risk taking behaviour that has the potential to harm. Positive handling is necessary to safeguard the child/young person and others. • Limited ability to acknowledge or accept responsibility for his/her own actions in a heighted emotional state. • Consistent support required to minimise high levels of disruption. • Anti-authoritative behaviour • Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in the majority of situations and requiring specific and targeted interventions. May already have referral to mental health service. • Very poor self-esteem and/or resilience which is pervasive (impacts all areas of life) • Emotional functioning affected to a level where regular self-harm is occurring and	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child or young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement. - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. Regularly update with strategies as they are tried. - Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary (see the 'Getting More Help' quadrant of the Thrive Model) • Carry out and review further assessments as advised by outside agencies (see the 'Getting More Help' quadrant of the Thrive Model) • Implement strategies (including provision of targeted support and/or resources) up to	• Discuss social boundaries for forthcoming activities explicitly to support social communication difficulties. • Use social stories to explore choices of actions and potential consequences. • Implement specific lessons in social interaction that cover conversation, mealtime etiquette, personal safety, manners etc. (It may be necessary to review facial expressions and body language as part of this). This should include giving and receiving compliments. • Make communication skills and behavioural expectations a core focus - this should include ways to show you are listening etc. • Teach self-help strategies to minimise hypervigilance, such as not sitting next to or facing doors or windows, using noise cancelling headphones to block out sound etc. • Support maintaining focus in a non-confrontational way at regular intervals using strategies such as using the child or young person's name, touching the desk in front of them or their book, passing post-its of instruction, using an agreed card system such as traffic lights. • Monitor your own body language, facial expression and tone to project calm and

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
necessitating specialist mental health services. • Difficulties requiring admission to inpatient services which requires joint working between LA educational and health professionals to agree a bespoke package to be delivered through a mainstream setting upon discharge.	agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support) - plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD)	consideration, and avoiding aggression or agitation associated with frustration. • Teach good mental health strategies either through Social and Emotional Aspects of Learning (SEAL), mindfulness or similar therapeutic activities to calm and clear the mind. • Utilise nurture group ethos and strategies. • Provide a safe and supervised area for calming and time away from triggers

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- EHC Plan (reviewed annually, and updated if appropriate)

Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following:

- Record of parental views
- Record of child or young person's views
- Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO)
- Smaller, SMART targets for child or young person based on outcomes described in EHC Plan
- Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)
  - Includes specific amounts (times and costs) – e.g. costed provision map.

- Log of meetings with parents - minimum of 3 meetings within a 12-month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, which has been implemented and reviewed.
- Records of any completed observations or evidence which supports observed impact on learning (e.g., class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets
- Completed strengths and difficulty questionnaire (SDQ)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed difficulties requiring consistent high levels of specialist interventions with the following: • Cannot participate in any interactions without a specialist degree of adult support within and outside the classroom context. e.g. a bespoke curriculum, differentiated appropriately, to incorporate social and emotional strategies as well as academic. • Extreme difficulties in forming and maintaining reciprocal peer and adult relationships leading to significant social isolation and disengagement or total apathy. • Unable to communicate feelings appropriately, resulting in negative behaviours such as verbal and physical aggression which requires frequent specialist de-escalation and positive handling. • Erratic and potentially unsafe emotional responses leading to an inability to engage with any formal learning situations and	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12-month period If necessary: • Obtain and record updated parents' views. • Obtain and record updated child or young person's views. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement.	Continue with any relevant strategies from First Concerns, SEN Support and/or Complex levels, plus: • Specialist nurture provision across the school • Specialist therapeutic interventions, e.g. play therapy, art therapy, interest based activities that facilitate reflective practice etc. • Support for parents to understand mental health and guidance on appropriate techniques and skills to use, e.g. using BASC3 monitoring and intervention structure. • Signpost parents to support for parent mental health. • Specific specially trained staff to meet individual need. • Emotion coaching from trained staff. • Sensory based therapies and workouts • Trauma and grief therapy • School work with medical staff to provide holistic package of care and intervention.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
taking a significant amount of time and support to calm from • Complete disengagement and withdrawal requiring consistent, specialist adult support to attend, participate or to re-engage with and access learning. • Regular and/or targeted risk-taking behaviour that is likely to harm without specialist intervention. Positive handling plan is necessary to safeguard the child/young person and others. • Child or young person displays complete apathy or desensitisation towards all situations. • Inability to acknowledge or accept responsibility for his/her own actions. • Anti-authoritative behaviour in all environments • Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in the majority of situations and requiring specific and targeted interventions. May already have referral to mental health service. • Very poor self-esteem and/or resilience which is pervasive (impacts all areas of life), causing high levels of distress and an inability to engage with learning without a	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary. • Carry out further assessments following advice and guidance from outside agencies. • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required. • Refer child or young person for specialist psychotherapy as required with continuing support as prescribed (part of the 'Getting More Help' quadrant of the Thrive Model)	• Targeted behavioural modification programmes with family support and training. • Individualised support that will include curriculum content, length of day, group dynamic, supported access to additional medical appointments

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
bespoke package incorporating a specialist environment and services. • Difficulties requiring admission to inpatient services (part of the 'Getting Risk Support' quadrant of the Thrive Model) which LA educational and health professionals agree will require ongoing mental health services and specialist interventions that can only be met in a specialist setting once discharged.	• Where an admission is required to Child and Adolescent Mental Health Service (CAMHS) in-patient unit (part of the 'Getting Risk Support' quadrant of the Thrive Model), maintain communication with health professionals and contribute to discharge planning	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

- EHC Plan (reviewed annually, and updated if appropriate)

- Record of parental views
- Record of child or young person's views
- Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO)
- Smaller, SMART targets for child or young person based on outcomes described in EHC Plan
- Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)
  - Includes specific amounts (times and costs) – e.g. costed provision map.
  - May include intervention reflection sheets.

- Log of meetings with parents - minimum of 3 meetings within a 12-month period to support assess, plan, do and review cycle.
- Record of any external support, contact or advice (including reports or assessments) which has been implemented and reviewed.
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets
- Completed strengths and difficulty questionnaire (SDQ)
- Risk Assessment
- Reducing Anxiety Management Plan

0-25 Years

Preparation for Adulthood

Sensory & Physical Needs

EDUCATION AND EMPLOYMENT	INDEPENDENT LIVING	COMMUNITY & INCLUSION	HEALTHY LIVING
SENSORY PROCESSING Cope and manage emotions in noisy and busy environments Understand own sensory needs and communicate them.	**SENSORY PROCESSING** Have resilience or adaptations around sensory difficulties involving smells, noises, lighting etc. Take supplements where a balanced diet is a barrier.	**SENSORY PROCESSING** Identify where positive socialisation spaces are to support with acoustics or sensory needs. Engage in sensory activities which support regulation.	**SENSORY** To express and understand what healthy is and what is meant by being healthy. Be willing to try a wide variety of food types to access a balanced diet.
HEARING IMPAIRMENT Follow instructions / calendars / times on clock to help identify patterns and processes. Use equipment such as ear defenders, hearing aids, glasses and tell someone if they are not working. To ask for confirmation if not heard what is said. To be able to follow small group conversation and use strategies to support participation. Identify roles they can apply for in line with their strengths.	**HEARING IMPAIRMENT** To understand and follow the rules of conversation. To identify different environmental sounds and what they mean. Begin to manage their own equipment. Communicate they may need help due to HI/VI needs. To use texting/ internet effectively ensuring they are aware of how information could be interpreted. Independently make appointment such as G.P./Audiologist	**HEARING IMPAIRMENT** To identify and used appropriate vocabulary with different. groups of people Join different groups outside school/work environment. To know there are different methods of communication and to know how to alert a deaf person appropriately. Know which areas and community spaces include hearing loop connectivity or quiet spaces.	**HEARING IMPAIRMENT** To name and identify different emotions via facial expression and body language. To know how to look after their bodies and people who can help them e.g. Audiologist. Identify parts of the ear and equipment such as hearing aid or cochlear implant To know what information to access for maintaining own personal health including different services.

VISUAL IMPAIRMENT Explore resources such as braille, access to large print, touch typing, talk to text to help access learning or information. Consider techniques to help with workload and study skills. Support to develop writing skills. **PHYSICAL** Have adaptive resources to support learning in school or the workplace. Know the planned route to move around the building. Participate in movement or exercise breaks. Identify how to adapt to and keep safe in new environments.	Know which areas and community spaces include hearing loop connectivity or quiet spaces. **VISUAL IMPAIRMENT** Recognise coins and their values. Learn about road safety and traveling specific routes, identifying landmarks, steps and stairs etc. Understand personal safety and needs linked to VI. Opportunities to practice cutting, pouring, measuring skills. Independently make appointment such as G.P./Optometrist **PHYSICAL** Understand how to keep safe considering allergies and reactions. Know what tools will help you to develop independence e.g. specialised cutlery, scissors, chairs, mobility aids etc for skills development. Identify risks or routes for access for those using wheelchairs or ramps.	**VISUAL IMPAIRMENT** Participate in extra curricula / social activities sharing how to best support. Identify how to use technology to support with social engagement. Support with social interaction in small groups **PHYSICAL** Understand how to keep safe on the streets- responses to dark, lights, sounds & crowds. To identify risk and personal safety in social settings	**VISUAL IMPAIRMENT** Encourage trial of new tastes and textures Support with dressing and personal hygiene Know which foods are good for a healthy diet and make things for themselves. **PHYSICAL** Have the freedom to mobilise and move around your environment. Know who to access - key health services to support physical needs, health maintenance & checks eg. Dentist Make adaptations to ensure physical activity is maintained in order to keep healthy.

School

Ordinarily Available Inclusive Provision

Sensory & Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
We may be seeing some of the following in whole class teaching/environment: **Visual Impairment:** • Some pupils may be able to see quite small print on the page but be unable to see at a distance, while for others the opposite may be true. • May have difficulty with tasks involving reading, writing or close observation. • May struggle to clearly visualise things of varying colour or busy backgrounds. • May struggle to adapt with changes to lighting within the environment. **Hearing Impairment** • May struggle to hear in noisy classroom or if sat at the back of the classroom. • Unable to follow whispered conversations. • May have difficulty following group conversations. • May disengage with conversations or misinterpret discussions.	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual pupils, is the starting point in responding to pupils who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for children and young people with SEN. "Good planning of well-sequenced and manageable lessons and class work coupled with effective pedagogical choices, and robust assessment for learning – which was used to change instruction so all learners could achieve	**Visual Impairment** • Give as many first hand 'real' multi-sensory experiences as possible. • Ensure correct seating in relation to board, whiteboard, Smartboard. • Consider lighting such as natural and artificial – which is most comfortable? • Avoid shiny surfaces which may reflect light and cause dazzle. • Always uses verbal explanations when demonstrating to the class. Read out aloud as you write on the board. • Provide accessible materials to reduce copying from board etc. • Consider using neutral backgrounds for displays and presentations or board work. **Hearing Impairment** • Keep background noise to a minimum. • Speak clearly and slow down speech rate a little, but keep natural fluency. • Model and teach careful listening along with signals when careful listening is required.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Environmental noises may impact on focus. **Sensory Processing** • Child may appear clumsy or bump into things. • Fidgets or fiddles with objects • Hums • Chews pencils or clothing • Unaware of own and others personal space • General discomfort in uniform • May struggle to sit still or lean against others or objects. • Likes or dislikes certain smells. • May have same snacks and lunches. • May need toilet last minute or not identify when too hot etc. **Physical** • Difficulty holding pencils, scissors, cutlery, or smaller equipment. • May find buttons or zips etc tricky. • Too much or little pressure when writing. • Poor core strength – appears floppy. • Struggles to navigate space. • Struggles with climbing or balancing.	– was the first step in reducing underachievement." Teachers' standards: overview (publishing.service.gov.uk)	• Occasionally check that oral information/instructions have been understood. • Face the pupil when speaking. • Divide listening time into short chunks. • Ensure new vocab is pre taught. • Provide visuals linked to auditory information. • Use of subtitles on videos • Consider environmental audit. • Place children near the front **Sensory Processing** • Adjust classroom lighting. • Clear uncluttered displays and classroom environment • Resources to support reduction or meet sensory need e.g. headphones, fidget items, sensory box, short breaks, • Provide food choices and snacks. • Avoid strong smells. • Multi-Sensory experiences • Variation of school uniform – don't make shirts to be tucked in • Hold things to support transition. • Discrete toilet / break out words. **Physical** • Consider organisation of classroom

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		• Ensure that left and right-handed pupils are not sitting next to each other with writing hands adjacent and • Provide appropriate equipment e.g. pencils, scissors etc. • Seating should allow pupil to rest both feet flat on the floor – check chair heights. • Desk should be at elbow height. • Position so pupil can view the teacher directly without turning the body – close enough to see and hear instructions. • Seat where there are minimal distractions e.g. away from windows and doors. • Mark starting point for each line with a green dot. • Equipment clearly labelled and kept in same place in class.

School

First Concerns

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The child or young person has: • A recognised visual impairment and/or an assessed visual deficit, which is not fully corrected by glasses/lenses • Access to standard learning resources • Access to computers The child or young person has observed **emerging** and/or **fluctuating** difficulties or deterioration in the following areas: • Deteriorating handwriting – may be unusually small or large, or letters may be poorly formed • Difficulty copying accurately either from board or close to. • Remembers and understands things which have been verbally explained rather than what has been read or seen • When reading may skip letters, lines and words and may cover an eye when reading or performing close tasks	Talk to parents and/or child/young person in order to: • Establish whether the child or young person is known to have a visual impairment • Check to see if all vision checks are up to date and establish if having similar issues at home • Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative	• Follow guidelines on individual condition and access strategies as advised by STVI in 'Advice to School'. e.g. positioning, use of magnifier • For most children and young people, class or subject teacher will be able to use resources and strategies available in the classroom • Try out different paper or Smartboard colours to try to find best contrast • Take advice from specialist teams related to font style and size • Intersperse short spells of visual activity with less demanding activities • Eliminate inessential copying from the board • Where copying is required, ensure appropriate print size photocopy is available • Provide occasional use of enlarged copies, as advised • Avoid standing in front of windows – your face becomes difficult to see • Ensure child or young person has own text or monitor

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Shows signs of poor hand eye co-ordination and over and under reaching • Appears clumsy and may often trip or fall • May have difficulties with height, depth or shadows • Children or young people may tire easily or easily distracted by precision tasks • May thrust head forward to squint when looking at near/far • May hold equipment unusually close or at a strange angle	• Carry out further assessments as necessary. This may include an assessment for a magnifier and subsequent loan of a magnifier • Discuss concerns with SENCO • Signpost child or young person, parents and staff to relevant information and services in the Cheshire East Local Offer for SEND and Live Well Cheshire East, including services related to visual impairment Contact Sensory Inclusion Service (SIS) for advice and information • Completion of Quality First Teaching Inclusive classroom audit (VI) in consultation with Specialist Teacher for Visual Impairment (STVI). Environmental audits by Sensory Inclusion Service (SIS) may be required, particularly at Key Transitions • SIS to provide ongoing visits, assessment and advice. • If the child or young person is assessed by the Specialist Teacher for Visual Impairment (STVI) as 'see on request', school should make contact with the STVI if there are significant changes or concerns regarding child or young person's visual condition/needs. • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves).	• Plan and support opportunities for information sharing and liaison between school staff, SIS, parents, and other agencies, as required • Provide recommended equipment and encourage its use, for example: specific writing implements and/or lined paper • Ensure safe access to physical and practical subjects • Tasks may need to be differentiated by some variation of teaching material and time given to complete tasks • Complete easily made changes to the learning environment

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Place child or young person on a 'First Concerns' Register. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support).	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile Additional documents (if relevant/appropriate for individual): • Completed QFT/OAIP Inclusion Audit – VI/SIS environmental audit • SIS advice sheets • SIS records of visit • Record of Functional Visual Assessment

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
As at First Concerns, the child or young person has: • A recognised visual impairment and/or an assessed visual deficit, which is not fully corrected by glasses/lenses. Additional to impact at First Concerns: The child or young person has: • Reduced access to standard print. • Limited access to whole class presentations. The child or young person has one or more of the following: • Limited access to standard practical activities. • A need to type some work in order to access their own work. • A need for accessibility settings and/or specialist software to access computers. • A need for supervision or support in unfamiliar or hazardous situations.	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Establish whether the child or young person is known to have a visual impairment • Check with parents to see if all vision checks are up to date • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Referral to Sensory Inclusion Service (SIS) • SIS to carry out specialist assessments, including assessments for specialist equipment	Continue with any relevant strategies from First Concerns level, plus: • Provide changes in the learning environment, as advised by the Sensory Inclusion Service (SIS) • Withdrawal sessions for individual or small group work may be necessary to: - Complete tasks made slower by the visual impairment - Prepare child or young person for a class activity/learning experience - Reinforce mainstream work - Provide additional hands on experience of materials or presentations - Provide additional experiences of the environment to remedy a lack of incidental learning - Learn particular skills to improve curriculum access e.g. touch typing or use of magnifiers or other specialist equipment - Learn mobility skills

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
And/or observed **persistent** and **moderate** difficulties with the following: • Difficulty with forming or reading back own handwriting – may be unusually small, large or letters poorly formed. • Difficulty copying accurately either from board or from table top learning materials • When reading may skip letters, lines and words. • Shows signs of poor hand eye co-ordination and over- and under-reaching. • Children or young people may tire easily or be easily distracted from precision tasks. • Move close to items to view them or hold them at an angle. • Adopts a noticeable head tilt or position.	• Service Level Agreement between school and SIS to be drawn up • Seek external advice from educational agencies such as Educational Psychologist (EP) Clusters. • Seek external advice from health professionals such as School Health • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support). • Carry out and review further assessments as required and/or as advised by outside agencies.	• Child or young person may benefit from using specialist equipment, for example: - Sloping reading/writing boards - Magnifiers - Dark pens/pencils - Dark lined books/paper - Large print materials (e.g. reference books) - Laptops/tablets - CCTVs (Closed Circuit TVs, i.e. magnification aid) • Printed material may need to be enlarged and modified, or accessed via magnification, as advised by the Specialist Teacher for Visual Impairment (STVI). School would use their own resources for modification of work. • Follow advice submitted by the SIS to facilitate access to the curriculum, for example: - Use of whiteboard - Accessibility of printed materials - Modification of teaching methods used - Speed of work - Physical position of the child or young person Consider information from parents and other professionals in relation to the above also

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD). Liaise with SIS regarding possible training opportunities.	• Consider whether some support from a teaching assistant/adult is required • Ensure STVI visits are timetabled, and a suitable room is provided for assessment/audiological support and/or teaching sessions • Consider whether typing tuition needs to be provided • Consider access arrangements for external tests and exams, following advice from the STVI

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• SEN Support Plan, which should include: - Record of parental views - Record of child or young person's views - Collated assessment data from a range of sources (e.g. class teacher and SENCO) - Record of desired outcomes for child or young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map) • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

- Record of any external support, contact or advice, e.g. SIS record of visit or report, including assessment of child or young person's functional vision and advice about access arrangements
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- SIS environmental audit
- SIS advice sheets
- SIS records of visit
- Record of Functional Visual Assessment
- SIS Equipment Loan Agreement

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Additional to impact at First Concerns and SEN Support: The child or young person has observed **persistent** and **significant** difficulties with the following: • Access to standard print and needs modified materials, or alternative formats, e.g. braille • Learning from demonstrations and activities in lessons • Recording/retrieving written work efficiently • Organising learning materials • Access to incidental learning and concept development • Moving safely, independently and with appropriate speed The child or young person will also have one or more of the following: • A need to use specialist equipment to provide efficient access to the curriculum	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Employ a differentiated/modified curriculum • Provide support to meet needs as detailed in STVI recommendations, and EHC Plan • Provide significant modification of materials and presentation to facilitate access to the curriculum • Will require targeted support from a teaching assistant and/or preparation of resources to access the curriculum • Provide appropriate learning space – taking into account use of equipment • Ensure that specialist equipment is kept in good working order and inform STVI of any problems. • Provide child or young person with time for pre or post tutoring • Provide alternative physical activities if and when required/advised

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• A need for some individualised programmes of learning • A need for some pre or post tutoring to ensure full access to learning • Slower work rate/ability to process visual information • A need for provision of alternate physical activities • Limited social and self-help skills	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child/young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan. Specialist Teacher for Visual Impairment (STVI) to attend Annual Review • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Continue to liaise with SIS/STVI, who will carry out further specialist assessments as required and write reports for annual review of EHC Plan	• Provide time for joint planning between school staff and STVI • Provide sufficient time for school TAs to acquire specialist skills, e.g. Braille • Actively support the child or young person in using specialist skills as an integral part of the school day SIS involvement may be required as follows: • Specialist Teacher for the Visually Impaired • Defined and time limited programmes of specialist teaching, e.g. - Use specialist equipment. - Social skills - Ongoing, weekly specialist teaching of Alternative Formats, such as Braille, Moon, Audio. - Ongoing specialist teaching for curriculum support - Ongoing support around social and emotional aspects of learning - Ongoing training for school TAs • Specialist Teaching Assistant (VI) - Support TA training by working alongside school TA to model good practice • Habilitation Specialist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support) - plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD)	- Assess skills in mobility - Assess independent life skills - Create and implement a programme of work to develop mobility skills and techniques - Create and implement a programme of work to develop independent life skills to be carried out by SIS, school staff and parents/carers. This may include shopping, food preparation or dressing • Sensory Production Base - Allocated time to support school in the modification of learning resources, following the SIS criteria

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following: • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)

- Includes specific amounts (times and costs) – e.g. costed provision map

- Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, which has been implemented and reviewed
- Includes documents from SIS, e.g. Record of visits etc.
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Additional to impact at First Concerns, SEN Support and Complex, the child or young person may have one or more of the following: • Significant cognitive/health/physical difficulties, plus a visual impairment or visual loss • A very high and complex level of need, specifically related to the visual impairment • Particular and significant social/emotional or medical needs which require sustained specialist provision • Need for access to appropriate sporting activities and opportunities as an intrinsic part of the curriculum • Need for individualised programmes of learning due to a combination of special educational needs and visual impairment • A requirement to be taught within a small group • A requirement for a high level of mobility and independent life skills teaching as an intrinsic part of the curriculum	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement	Additional to strategies at First Concerns, SEN Support and Complex: • Suitable/alternative curriculum, exams, vocational assessments/learning environment • Daily teaching from a STVI/Habilitation Specialist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• A need for an appropriate peer group to support social and emotional wellbeing • A need for access to appropriate social activities • A need for an appropriate peer group to support identity as a person with visual impairment	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan. STVI to attend Annual Review • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • STVI completion of Out of Borough form, if appropriate • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

- EHC Plan (reviewed annually, and updated if appropriate)

- Record of parental views
- Record of child or young person's views
- Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO)
- Smaller, SMART targets for child or young person based on outcomes described in EHC Plan
- Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)
  - Includes specific amounts (times and costs) – e.g. costed provision map

- Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice (including reports or assessments) which has been implemented and reviewed
  - Includes documents from SIS, e.g. Record of visits etc.
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- SIS Out of Borough Visiting Officer Report
- Record of ongoing liaison between STVI, specialist provision, parents and other agencies

School

First Concerns

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Child or young person: • Has a diagnosed hearing loss (which is confirmed by up-to-date information from Audiology) AND • May have hearing aids OR • Is suspected of having a hearing loss and is undergoing clinical assessment Child or young person may exhibit some **emerging** and/or **fluctuating** difficulties with the following: • Receptive and expressive language • Attention and concentration • Understanding verbal (spoken) information • Following instructions • Missing key information • Misunderstanding key information • Processing auditory information, including verbal and non-verbal information	Talk to parents and/or child/young person in order to: • Establish whether the child or young person is known to have a hearing loss/impairment • Ask them to request a referral for a hearing assessment via GP or school nurse • Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative	• Follow advice from the Specialist Teacher of the Deaf (STOD) regarding appropriate classroom management strategies, as detailed in the 'Advice to School' document and/or records of visit • Implement advice from SALT Advice Line, if required • Ensure advised access arrangements for exams are applied for and provided • School to plan and support opportunities for information sharing and liaison between school staff, SIS, parents, and other agencies, as required • Support management of hearing aids • Consider seating arrangements to ensure that the child or young person can see the teacher clearly and also see other speakers • Keep hands away from mouth and avoid standing in front of windows – your face becomes difficult to see • Encourage child or young person to pay close attention to the speaker's face

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Listening in the presence of background noise and/or locating the speaker in large/noisy environments • Acquiring and retaining vocabulary (may be observed as vocabulary gaps or poor language skills where they may have missed early vocabulary) • Often asks for repetition • Volume of voice (i.e. abnormally loud or quiet voice) • Acquisition of phonic skills (which may impact early stages of reading) • Frequent colds/ear infections • Problems with self-esteem, emotional wellbeing and social interaction • Fatigue due to level of concentration required	• Carry out further assessments as necessary Once confirmation of hearing loss is confirmed: • Complete QFT/OAIP Inclusion Classroom Audit ensuring all strategies are included – Hearing Impairment (HI) • Discuss concerns with SENCO • Signpost child or young person, parents and staff to relevant information and services in the Cheshire East Local Offer for SEND and Live Well Cheshire East, including services related to hearing impairment • Contact HI team to request SIS information and advice (Referrals will usually come to the Sensory Inclusion Service (SIS) via Audiology. In the event of no information being received by the school from the SIS, SENCO to contact the SIS – Hearing Impairment team) • SIS - HI Service will provide information and/or a visit, following Service criteria • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by	• Ensure you have child or young person's full attention before important information is given • Allow more thinking and talking time in group discussions • When asking a direct question to the child or young person, use appropriate and simplified language and allow additional time to respond • Repeat contributions from other children – their voices may be softer and their speech more unclear • Provide key words and/or additional visual support as prompts or to reinforce learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place child or young person on a 'First Concerns' Register • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support)	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Consider Continuing Professional Development (CPD) requirements and support for staff, and implement. Access any appropriate training from SALT	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile Additional documents (if relevant/appropriate for individual): • Completed QFT/OAIP Inclusion Audit - HI • SIS Advice to school sheets • SIS records of visit

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The child or young person: • has hearing aids or cochlear implants • is likely to have a personal radio aid system • is unable to access the mainstream curriculum through personal amplification alone within the allowed timescale and at normal teaching pace In addition, the child or young person will have one or more of the following: • A late diagnosis • A progressive hearing loss • A moderate to severe hearing loss • Auditory Neuropathy • Delayed language development • Requires elements of the curriculum to be differentiated • Observed **persistent** and **moderate** difficulties with the following: - Perception of some speech sounds - Accessing linguistic aspects of the curriculum	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Referral to Sensory Inclusion Service (SIS) • SIS to carry out specialist assessments of listening and language, including assessments for specialist equipment, following service criteria • SIS to provide, on loan, specialist auxiliary equipment, following Service criteria	Continue with any relevant strategies from First Concerns level, plus: • Daily checks of personal hearing aids and radio aid systems, as advised the Specialist Teacher of the Deaf (STOD) • Follow recommendations from the STOD for listening skills/language development activities • Some small group or individual interventions may be required for the following: - Development of listening skills - Language development including vocabulary - Pre/post tutoring of subject-specific curriculum vocabulary and/or concepts - Social Emotional skills • SIS to provide specialist equipment check, advisory, or teaching visits, following Service criteria

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
- Accessing speech in TV programmes, DVDs and YouTube clips where lip pattern is not present (e.g. 'hidden narrators' and voiceover) - Accessing speech where there is competing background noise, including music	• Service Level Agreement between school and SIS to be drawn up • School to liaise and plan with the Specialist Teacher Of the Deaf (STOD), other professionals and parents • Seek external advice from educational agencies such as Educational Psychologist (EP) Clusters • Seek external advice from health professionals such as School Health and Speech and Language Therapy (SALT) • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published	• Ensure STOD visits are timetabled, and a suitable room is provided for assessment/audiological support and/or teaching sessions • Use and safe storage of equipment, as advised by the STOD If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family. • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support). • Carry out and review further assessments as required and/or as advised by outside agencies. • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD). School to provide opportunities for INSET from the STOD, including deafness awareness training, and training regarding the use and management of specialist equipment. Also, access any appropriate training from SALT.	

Evidence of Graduated Approach

How do we track and record progress and outcomes?

- SEN Support Plan, which should include:
  - Record of parental views
  - Record of child or young person's views
  - Collated assessment data from a range of sources (e.g. class teacher and SENCO)
  - Record of desired outcomes for child or young person
  - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
  - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map)

- Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, e.g. SIS record of visit or report, or record of liaison with SALT
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- Action for Inclusion meeting minutes
- SIS records of visits, reports and assessment results, including advice about access arrangements
- SIS Equipment Loan Agreement
- SALT care plan (including any review/evaluation)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Sensory Needs (Hearing Impairment)

Impact on Learning ***What are we seeing?***	**Response** ***What should we do next?***	**Strategies** ***What can we put in place?***
The child or young person has a diagnosed permanent bilateral hearing loss The child or young person will also have observed **persistent** and **significant** difficulties with one or more of the following: • Delayed language development • An inability to access the mainstream curriculum through personal amplification alone within the allowed timescale and at normal teaching pace • A requirement for high levels of targeted intervention to facilitate access to a differentiated curriculum • Support with social and emotional aspects of learning • A need for communication support at break-times and lunch times • A requirement for alternative modes of communication • Additional learning difficulties and disabilities	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: Facilitate child or young person's use of the following if required according to their needs (following advice from the Sensory Inclusion Service and/or Speech and Language Therapy): • May need intensive hearing, speech and language rehabilitation following hearing aid fitting or cochlear implant surgery • Use of sign language as their primary mode of communication and to access to learning, or to supplement delayed or limited spoken language • Use of a communication support worker for British sign language, sign supported English or different communication approaches according to the situation (known as total communication) • Provide support to meet needs as detailed in STOD recommendations, and EHC Plan

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Difficulty establishing friendships with hearing peers • May need to focus their visual attention for long periods of time (e.g. to watch a signer or lip read)	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child/young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan. STOD to attend Annual Review • Continue to act on external advice from educational and health agencies as necessary. Specialist teams may include hearing assessment clinic/cochlear implant centre, specialist teacher of the deaf (STOD), educational audiologist, community paediatrician and educational psychologist • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT	• Provide teacher led small group work • Provide access to quiet working spaces for tutorial/small group work and specialist assessment • Use a differentiated/modified curriculum, as required • Reinforcement of curriculum through additional methods, e.g. sign, use of visual resources, pre/post tutoring, small group work • Consider if child or young person requires targeted support from a teaching assistant to facilitate access to the curriculum • Consider acoustic treatment of rooms and Soundfield systems • Facilitate frequent contact with specialist teacher of the deaf (STOD), for example to provide: specialist teaching and assessment, pre and post tutoring, auditory rehabilitation, plus staff training, mentoring and supervision of specialist support workers SIS involvement may be required as follows: • Via Specialist Teacher for the Deaf providing: - Ongoing, weekly specialist teaching of language and literacy skills

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Carry out and review further assessments as advised by outside agencies • Service Level Agreement between school and SIS to be drawn up (if not in place) and/or maintained • Continue to liaise with SIS/STOD, who will carry out further specialist assessments as required and write reports for annual review of EHC Plan • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support) - plus any additional top-up as detailed in the EHC Plan	- Ongoing specialist teaching for curriculum support - Ongoing support around social and emotional aspects of learning - Ongoing training for school Teaching Assistants (TAs) • Via Involvement of a Specialist Teaching Assistant (HI) providing: - Support for TA training by working alongside school TA to model good practice - Additional input to support targets set by STOD If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD). Access any appropriate training from SALT	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*
• EHC Plan (reviewed annually, and updated if appropriate) Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following: • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) - Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, which has been implemented and reviewed - Includes documents from SIS, e.g. Record of visits etc., and/or records of liaison with SALT • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) Additional documents (if relevant/appropriate for individual): • SALT care plan (including any review/evaluation)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
In addition to impact at First Concerns, SEN Support and Complex, the child or young person may have one or more of the following: • An inability to access the mainstream curriculum without additional specialist support • A requirement for a differentiated/modified curriculum • A need to access a d/Deaf peer group • A need for a signing environment and a signing peer group • A requirement for specialist subject teachers of the deaf • A need for the curriculum to be delivered through sign language or alternative modes of communication • A need for small group teaching • A requirement for a specialist TA/HI professionals to facilitate access to a differentiated curriculum (e.g. through sign language) • A requirement for on-site access to speech therapy and other agencies	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement	In addition to strategies at First Concerns, SEN Support and Complex: • Suitable/alternative curriculum, exams, vocational assessments/learning environment • Daily teaching from a Specialist Teacher Of the Deaf (STOD) • Access to a d/Deaf peer group • Curriculum delivered through sign language or alternative modes of communication If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan. STOD to attend Annual Review • STOD completion of Out Of Borough form, if appropriate • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 07825103893) • If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Carry out further assessments following advice and guidance from outside agencies	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required. Access any appropriate training from SALT	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) - Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice (including reports or assessments) which has been implemented and reviewed - Includes documents from SIS, e.g. Record of visits etc. • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- SIS Out of Borough Visiting Officer Report
- Record of ongoing liaison between STVI, specialist provision, parents and other agencies (including SALT, if required)
- SALT care plan (including any review/evaluation)

School

First Concerns

Sensory Processing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The child or young person has observed **emerging** and/or **fluctuating** difficulties in the following areas: • Distracted by loud, sudden noises • Distracted by noises around them • Prefers to be on the move, may take risks when playing in the playground • May be struggling to sit for tabletop work • Tends to lean against children or furniture around them • Appears reluctant to climb on apparatus in PE or in the playground • May appear to struggle to move around and may bump into peers or obstacles • Wary of rough and tumble • May need reminding to dress appropriately for the temperature (e.g. removing fleece in summer, wearing coat in winter) • May express some dislike of uniform or clothing but able to make their own adjustments for comfort	• Be aware: all of us struggle at times with our sensory processing - e.g. we may be more startled by loud noises when we are stressed. Sensory processing issues are more likely in children who are anxious or have other medical diagnoses. • Discuss concerns/observations with parent/carers and obtain and record their views. • Obtain and record child or young person's views. • Check achieved motor milestones are age appropriate and consider physical causes. • Make sure relevant checks on vision and hearing have been made to rule out sensory impairments. • Consider seeking external advice from health professionals such as School Health/GP with the parent/carer. • Contact otsensoryadmin@mcht.nhs.uk for information about local training on sensory processing.	Examples of what might be expected from this level of school support: • Ensure all school staff have an awareness of sensory processing (e.g. 'Making Sense of Sensory Behaviour' by Falkirk Council) • Employ noise reduction strategies in the classroom e.g. felt pads in the bottom of pencil pots, ends of chair and table legs. Utilising carpeted areas. • Increase prediction and control of occurrences of sudden or loud noise e.g. have a signal when a loud noise is likely, the child makes their own noise, takes control of ringing the bell, puts hands over ears. • Whole class brain breaks intrinsic to the school day e.g. YouTube kids yoga or teacher devised movement break. • Whole school approach to graded play with access to rough play areas and quiet play areas.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Reluctance to be physically close to others • Tends to be more tactile towards peers and adults and enjoys being in close to others. • Sometimes doesn't notice when hands or face are dirty • Often wipes hands during messy tasks • Likes to hold/fiddle with objects • Reluctant to join in messy play, or touch certain objects • Notices certain smells • Reluctance to explore food textures, tastes and colours • May chew clothing or objects such as pencils • Lose their place on the page or find it hard to follow text on a whiteboard • Be distracted in busy visual environments	If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records. • Consider past teacher observations and views. • Collate current assessments related to area of concern – qualitative, quantitative and summative. • Discuss concerns with SENCO. • Carry out further assessments as necessary. This may include a Sensory Audit. • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves). • Place child or young person on a 'First Concerns' Register. • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family.	• Whole class PSHE social scenarios covering safe play and dangers in the playground. • Create visuals for personal space e.g. Robot hands, carpet spots, clearly labelled areas. • Consider using social distancing strategies. • Consider sitting in a chair/on a circle for carpet time or allow use of the wall for support. • Encourage a child who likes to have a lot of physical contact to give themselves a hug. • Provide means of communication for the child to say they would prefer to play separately. • Give verbal prompts to encourage young people to wear appropriate clothing e.g. to put their coat on if it's cold. • Be aware of the child/young person's personal sensory adjustments to clothing, such as allowing them to feel labels or wear socks inside out. • Have an awareness that children's sense of smell is often more sensitive than adults and be understanding of their experience. • Consider commercially available chewable pencil toppers, use of sports drink bottle or crunchy snacks such as carrots to provide oral feedback.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support).	• Preparatory discussion for tactile exploration e.g. talk about textures and properties before handing. • Use a graded approach to encourage exploration of new sensory experiences e.g. messy play, new foods or climbing PE equipment. Gentle encouragement when the child is in a relaxed state to take small steps, e.g. touch the foam with a paintbrush then progress to touch with one finger. • Provide Blu Tack or quiet fidget toys to handle. • Take into account environmental considerations, such as the seating, lighting, noise, colour of background or of power points etc. • Reduce visual clutter where possible such as enlarging information on a screen/paper. • Seat child or young person nearer to the whiteboard, make presentations clear and do not overload with images or provide paper copies to use on tables etc. • Consider the position in the classroom so that the young person is not situated close to the door or window where traffic will distract. • Malleable resource to help develop and strengthen fine motor skills.

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• Brief record of parent/carer views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile Additional documents (if relevant/appropriate for individual): • Completed Sensory Environmental Audit

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Sensory Processing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The child or young person has observed **moderate** and/or **persistent** difficulties in some of the following areas: • Active or passive reaction to loud, sudden noises (e.g. telling people to stop, putting hands on ears or freeze reaction). • Struggles to filter background noise. This means they may struggle with completing tasks or following verbal instructions. • Generates own noises e.g. humming, whistling, tapping. • Needs regular movement; struggles to remain seated for table-top activities. • Frequently struggles to navigate around the classroom and bumps into obstacles. • Often avoids and appears wary climbing on apparatus in PE or in the playground. • Seeks fast movement, takes risks when playing in the playground e.g. through spinning, jumping, climbing. • Avoids rough and tumble.	• Class teacher, SENCO, parents/carers and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents/carers within a 12 month period. If necessary: • Establish whether the child or young person is known to have a sensory need • Check with parents/carers to see if all vision and hearing checks are up to date • Obtain and record updated parent/carers' views • Obtain and record updated child or young person's views • Further screening of motor and developmental difficulties • Consider mental health factors e.g. anxiety • Consider any trauma history or ACES (Adverse Childhood Experiences) which may be relevant	Continue with any relevant strategies from First Concerns level, plus: • Small group targeted intervention. • Gentle graded encouragement to make contact with wet textures, try foods or climb PE equipment. Scaffold the task to ensure success e.g. close adult support to model/reassure. • Timetabled movement breaks e.g. errands or sensory activities throughout the day. • Provide alternative lunchtime activities. • Consider seating arrangements and where personal belongings are kept so that normal daily activities in school can be managed and movement around the room is clear and obstacles kept to a minimum. • Allow the young person extra time for transitions especially when these involve negotiating places such as the cloakroom. • Adjustments to school uniform if required.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Often leans against children or furniture around them and often slouches, slumps or sprawls • Unable to tolerate certain items of uniform, clothing or fabrics e.g. wears polo shirt instead of shirt. This may be noticed at home or school. • Often dressed inappropriately for the temperature (e.g. fleece in summer, no coat in winter). • Often upset by minor injuries. • Not noticing when hurt. • May need to hold/fiddle with objects frequently. • Avoids messy play or touching certain objects. • Frequently wipes hands during messy tasks. • Often fails to notice when hands or face are dirty. • Is frequently more tactile towards peers and adults and enjoys being close. • Dislikes being physically close to others and shows a reaction by freezing or moving away. • Reluctant to mark make. • Expresses strong preferences about certain smells. • May refuse to explore certain food textures, tastes and colours.	• Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Seek external advice from educational agencies such as the Cheshire East Autism Team • Contact otsensoryadmin@mcht.nhs.uk for information about local training and targeted support on sensory processing. • Seek external advice from health professionals such as School Health, GP or specialist Paediatric services. • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support).	• De-sensitise hands before messy play by clapping them together or putting deep pressure through hands by pushing them together or against the wall. • Encourage the child or young person to check appearance in the mirror and provide the relevant cleaning materials for the child to use. • Scaffolded teaching of playground games, emphasising gentle physical touch such as 'tig' with a light touch. • Allow a young person to carry a preferred smell with them to self soothe e.g. when going on a school trip to somewhere strong smelling such as a farm. • Consider commercially available chewable items such as Chewelry or cuffs etc. • Reduce visual clutter and superfluous information on the page and employ dyslexia friendly strategies such as a reading window and clear font. • Provide handouts to reduce the volume of copied work. • Consider adding sensory circuits and/or sensory breaks into the child/young person's day depending on their sensory needs. • Look at child/young person's sensory needs using a tool such as a scale (sensory ladder).

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Habitually chews clothing or objects such as pencils. • Persistently loses their place on the page and finds it hard to follow text on a whiteboard. • Is frequently distracted in busy visual environments. • Overly focused on visual details.	• Carry out and review further assessments as required and/or as advised by outside agencies • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), e.g. online learning on sensory differences • Signpost child or young person, parents and staff to relevant information and services in the Cheshire East Local Offer for SEND and Live Well Cheshire East, for local children's services	• Research ideas and strategies on www.theottoolbox.com. • Develop understanding of emotional regulation. • Access simple mindfulness activities (see sites such as Cosmic Kids for examples).

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• SEN Support Plan, which should include: - Record of parent/carers' views - Record of child or young person's views - Collated assessment data from a range of sources (e.g. class teacher and SENCO) - Record of desired outcomes for child or young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map)

- Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, e.g. CEAT or EP action plan
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

Additional documents (if relevant/appropriate for individual):

- Completed Sensory Environmental Audit

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Sensory Processing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The child or young person has observed **persistent** and **significant** difficulties with the following: • Unable to keep their place on the page and cannot follow text on a whiteboard • Unable to participate in learning in a busy visual environment • Unable to focus and complete tasks when there is almost imperceptible background noise (e.g. noise from classroom lighting) • Preoccupied with visual details (e.g. grains of sand, eyelashes, the carpet weave) • Almost always misses verbal directions due to difficulty filtering background noises • Noises interfere with the ability to participate in parts of the school day (e.g. cannot join in with school assembly or sit in the dining hall) • Needs to generate own noises (e.g. humming, whistling, tapping) throughout the day in order to self-regulate	• Class teacher, SENCO, parents/carers and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents/carers within a 12 month period If necessary: • Obtain and record updated parent/carers' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Employ a differentiated/modified curriculum that provides sensory based learning and/or sensory rich environment to meet developmental and sensory needs • Provide support to meet needs as detailed in the EHC Plan • Provide significant modification of materials and presentation to facilitate access to the curriculum • Will require targeted support from a teaching assistant and/or preparation of resources to access the curriculum and meet sensory needs • Provide appropriate learning space – taking into account use of equipment such as angled desk top, sit and move cushion etc. • Provide child or young person with time for pre or post tutoring in a quiet space • Actively support the child or young person in using self-regulation and sensory

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Smells cause strong reactions and interfere with their ability to participate in the school day (e.g. avoids areas of the school due to certain smells) • Diet is restricted to a limited range of food textures, tastes or colours • Almost always chews clothing or objects that compromises personal hygiene or safety • Unable to touch certain objects (e.g. running away or sitting and ignoring or showing distress) • Constantly needs to hold/fiddle with objects • May create sensory feedback to self-regulate (e.g. pick skin, bite fingers or hand) • Almost always fails to notice when hands or face are dirty: significantly out of line with their developmental age • Becomes passively overloaded or actively distressed when unable to move freely • Persistently bumping into people and objects and struggles to navigate around the classroom • Becomes passively overloaded or actively distressed when faced with PE/playground equipment or apparatus • Always on the move, takes risks when playing in the playground with compromise to personal safety or that of others	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child/young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan. • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Contact otsensoryadmin@mcht.nhs.uk for information about local training/targeted support/specialist intervention on sensory processing • Implement strategies (including provision of targeted support and/or resources) up to	strategies as an integral part of the school day • Consider whether the child meets the referral criteria for the Sensory Processing Occupational Therapy Sensory Support Service

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Almost always leans against children or furniture around them to the point of annoying others • Overly tactile (according to developmental age) towards peers and adults and needs to be close and to touch everything • Freezes, shouts or recoils when touched or when others get too close • Persistently avoids mark making • Significantly and frequently upset by minor injuries • May not show pain or be able to register injuries that impact on personal safety • Almost always dressed inappropriately for the temperature (e.g. fleece in summer, no coat in winter) • Unable to wear certain items of uniform, clothing or fabrics e.g. wears polo shirt instead of shirt. This may be noticed at home or school. This is significantly connected to their emotional regulation	agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support) - plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD).	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an <u>ongoing</u> record <u>updated on a termly basis</u> for the following: • Record of parent/carers' views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) - Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, which has been implemented and reviewed - Includes documents from sensory pilot OT, e.g. Record of visits, reports etc. • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Sensory Processing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Significant sensory needs as part of a complex presentation of need or significant vulnerability, requiring a specialist, bespoke package of support. • Cognitive/health/physical difficulties, plus a complex level of need relating to sensory processing. • Particular and significant sensory processing needs which impact on the child's ability to access classroom learning/social skills and participate in the wider community. • Intense sensory seeking and avoiding behaviours that require specific support. • Struggles to connect to peers and social activities. • Struggles to self-regulate their emotions and often shows a high-level stress response.	• Class teacher, SENCO, parents/carers and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parent/carers' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E)	Additional to strategies at First Concerns, SEN Support and Complex: • Suitable/alternative curriculum, exams, vocational assessments/learning environment. • Daily targeted teaching with support from specialist services. • Require sustained specialist provision to support sensory preferences. • Access to appropriate sensory activities and opportunities as an intrinsic part of the curriculum. • Individualised programmes of learning due to Special Educational Needs including sensory processing. • Timetabled sensory breaks and activities to aid self-regulation. • Use of a structured approached to monitor and support intense sensory seeking and avoiding behaviours. • Small group teaching.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan. • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required.	• A high level of independent life skills teaching as an intrinsic part of the curriculum. • Diverse peer group to support social and emotional wellbeing. • Support to access social activities.

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	

	• EHC Plan (reviewed annually, and updated if appropriate)
	• Record of parent/carers' views
	• Record of child or young person's views
	• Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO)
	• Smaller, SMART targets for child or young person based on outcomes described in EHC Plan
	• Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)
	  - Includes specific amounts (times and costs) – e.g. costed provision map
	• Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
	• Record of any external support, contact or advice, which has been implemented and reviewed
	  - Includes documents from Sensory Processing OT e.g. Record of visits, reports etc.
	• Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

School

First Concerns

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Has physical needs and uses specialist aids relating to their disability, e.g. pencil grip or writing slope • Motor control – fine and gross delay • Spatial orientation issues • Minor physical difficulties – hand eye coordination • Problems causing difficulties in throwing, catching, balance safety in Physical Education (PE) • Supervision or support needed for medical conditions, diet and toileting, dressing and/or mealtimes • Lack of progress in the curriculum due to condition • Needs impact on their self-esteem and social relationships • Working at a slower pace due to fatigue	• Discuss concerns/observations with parent(s) • Obtain and record parental information and views • Obtain and record child or young person's views If available and/or appropriate: • Examine Early Years Foundation Stage (EYFS) Data and/or previous school records • Consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative – along with any health records that have been shared • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary	• Consider organisation of classroom and seating plans to ensure free movement and sufficient working space • Consider positioning of child or young person in the classroom to minimise distractions • Use programmes to develop motor skills • Implement an accessibility plan to move around the school • Provide additional classroom resources such as sloping board, adapted cutlery/chairs/scissors and pencil grips etc. • Use differentiation and personalised learning targets • Use a well-structured curriculum plan in PE • Keep withdrawals from class to a minimum • Provide specific skill development and activities in support of targets • Provide adaptations to the pace of lessons to take account of fatigue • Consider timetabling and location of rooms where possible to facilitate movement

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Medication which impairs concentration and may lead to difficulties in the classroom. • Poor engagement during tasks for intermittent periods throughout the day	• Perform an audit/risk assessment of the young person's learning environment, and apply extra consideration to any visits or trips • Discuss concerns with SENCO (and/or school nurse, if appropriate) • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place child or young person on a 'First Concerns' Register • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £3,000 (this is equivalent to approximately 6 hours of additional support) and review impact	• Use technology to support learning • Encourage peer support • Provide alternative lined paper with spaces sufficiently wide enough to accommodate child or young person's handwriting • Attach paper to desk with masking tape to avoid having to hold with one hand and write with the other hand • Eliminate inessential copying from the board • Teach sequencing skills, for example putting on clothes in the right order etc. • Have appropriate height chairs and tables

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), e.g. manual handling etc.	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*	
	• Brief record of parental views (completed Discussion Form) • Brief record of child or young person's views • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

School

SEN Support

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • Has physical needs and uses specialist aids relating to their disability, e.g. seating • Motor control – marked fine and gross functional skills delay • Spatial orientation issues • Physical difficulties – hand eye coordination • Problems causing difficulties in throwing, catching, balance in PE – moderately behind peers • Supervision or support needed for medical conditions, diet and toileting, dressing and/or mealtimes • Lack of progress in the curriculum due to condition • Needs impact on their self-esteem and social relationships • Moderate difficulties in physically accessing the curriculum	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Place child/young person on register as SEN Support (Code K) • Seek external advice from educational agencies such as Educational Psychologist (EP) Clusters • Seek external advice from health professionals such as: School Health; Physiotherapy; Occupational Therapy (OT) OT (referrals to be made through GP or Paediatrician); Child and Adolescent Mental	Continue with any relevant strategies from First Concerns level, plus: • Provide flexible, adult assistance as necessary to access the curriculum, manage their condition, or move with safety around the environment • Flexible support in school to include dressing and undressing, and toileting • Provide extra time to deliver targeted and additional motor skills development • Ensure access to additional and specialised IT equipment, as required • Consider access arrangements for external tests and exams, and apply for/implement as necessary • Use strategies to reduce or provide alternative methods of recording written work • Teach child or young person how to use planner, diary, lists to organise themselves as appropriate

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Working at a markedly slower pace due to fatigue • Poor engagement during tasks throughout the day • Needs extended adult support beyond "First Concerns" level of support to be able to access the curriculum	Health Service (CAMHS) or Learning Disability (LD) CAMHS • Refer to the *' Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need '* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support). • Carry out and review further assessments as required and/or as advised by outside agencies • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), e.g. manual handling	• Allow additional time to complete tasks • Where possible, provide alternatives to taking part in competitive team games where child or young person may feel self-conscious • Allow child or young person to leave early when travelling between classes to avoid large groups in corridors and enable extra travel time e.g. to go to lift • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing • Provide handrails on stairs • Consider rails within toilets or access to disabled toilet • Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs /lockers • Give consideration to transporting of food at lunchtime e.g. assistance with trays and seating • Provide a locker for child or young person to store books etc. rather than needing to carry them around during the day • Provide option for child or young person to sit on a chair rather than on the floor at carpet time/assemblies. Can have a classmate do the same if appropriate

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• SEN Support Plan, which should include: - Record of parental views - Record of child or young person's views - Collated assessment data from a range of sources (e.g. class teacher and SENCO) - Record of desired outcomes for child or young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if child/young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map) • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice, e.g. health reports or health care plans • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

School

Complex

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Despite implementation of strategies from "First Concerns" and "SEN Support", progress for the child or young person is either: - significantly slower than that of their peers starting from the same baseline - fails to match or better the child or young person's previous rate of progress - fails to close the attainment gap between the child or young person and their peers or - widens the attainment gap • Their ability to function independently in the school environment and in their everyday life • May require significant therapies and/or medical interventions	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • If EHC Plan is not in place: - Review SEN Support Plan (at least termly)	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Follow EHCP for specific outcomes • Monitor the impact on other areas of learning e.g. social and emotional well being • Adaptations to the school environment e.g. changing plinths/ramps/hoists • Consider space needed to accommodate specialist equipment e.g. walker • Ensure access to specialised seating and/or height adjustable tables • Carry out lessons on ground floor if no suitable access to classrooms on upper floors • Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• May require adult support to navigate around the school • May require adult support to access and use equipment safely in practical lessons e.g. science/cooking	- Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Change code on SEN register to indicate child/young person has EHC plan in place (code E) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) - plus up to £6,000 (this is equivalent to approximately 12 hours of additional support)	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	- plus any additional top-up as detailed in the EHC Plan • Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD)	

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- EHC Plan (reviewed annually, and updated if appropriate)

Previous SEN Support Plan now becomes "EHC Implementation Plan", which is a working document and acts an ongoing record updated on a termly basis for the following:

- Record of parental views
- Record of child or young person's views
- Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO)
- Smaller, SMART targets for child or young person based on outcomes described in EHC Plan
- Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles)
  - Includes specific amounts (times and costs) – e.g. costed provision map

- Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, e.g. health report or health care plan, which has been implemented and reviewed
- Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

School

Specialist

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Physical needs cannot be met within mainstream school setting due to complex or vulnerable nature of the child's condition • Child or Young Person requires: - Specialist medical intervention - Manual handling e.g. hoists, changing plinths - Change of position during the day into specialist equipment - Adult support for independence and self-care - Educational environment which allows easy access moving around indoors and outdoors	• Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated parents' views • Obtain and record updated child or young person's views • Refer to the *'Timely Support for Children and Families in Cheshire East – Guidance on Thresholds of Need'* document published by Cheshire East Safeguarding Children's Partnership (CESCP) and children's services to consider the appropriate levels of support for the child or young person and their family • Indicate on SEN register that child or young person has an EHC plan in place (code E) • Refer to described outcomes and provision in the child or young person's individual EHC Plan and implement	• Use specialist equipment for manual handling/ changing, as required • Implement individualised health care plan • Implement individualised postural management programme • Provide access to hydrotherapy if appropriate to their medical needs and physiotherapy intervention plan

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to plan, do, review against the specified outcomes and provision within the child or young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***	
	• EHC Plan (reviewed annually, and updated if appropriate) • Record of parental views • Record of child or young person's views • Ongoing, collated assessment data from a range of sources (e.g. class teacher and SENCO) • Smaller, SMART targets for child or young person based on outcomes described in EHC Plan • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review cycles) - Includes specific amounts (times and costs) – e.g. costed provision map • Log of meetings with parents - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Record of any external support, contact or advice (including reports or assessments, e.g. health report or health care plan) which has been implemented and reviewed • Records of any completed observations or evidence which supports observed impact on learning (e.g. class work, photos etc.)

13. The Graduated Approach for Post-16

Post 16 education covers both formal education and formal training through study programmes and apprenticeships. The Raising of Participation legislation requires young people aged 16 - 18 years to continue their education/training after completing year 11 in school. Statutory guidance on the participation of young people in education, employment or training can be found on the GOV.UK website. The continuation of education/training is required until a young person's 18th birthday. There is no requirement or entitlement to education post this age, however for those young people with SEND it is recognised that some young people may need longer in education to meet Preparing for Adulthood (PfA) outcomes.

Post 16 education is described below as that delivered via 6th Form Colleges, Further Education (FE) Colleges, Specialist Colleges, Apprenticeships and Training Providers.

This includes Supported Internships, Supported internships - GOV.UK (www.gov.uk) which are one type of study programme for young people who have an EHC plan and want to move into employment but need extra support to do so. They consist of structured study programmes and are based primarily with the workplace, and focus on helping young people to develop skills that are valued by employers.

This section does not refer to school sixth form provision; schools supporting young people in their sixth forms should refer to the school section due to differences in funding arrangements and eligibility criteria for a number of services.

A greater emphasis in Post 16 education is placed on Preparing for Adulthood, and post-16 providers should refer to the dedicated Preparing for Adulthood tables provided in this document in order to fully support young people with SEN within their provision.

Post-16

First Concerns

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Low general attainment and progress and/or gap beginning to widen • Difficulty in understanding abstract concepts and applying prior learning • Speech and language difficulties • Attention and concentration span difficulties, e.g. easily distracted or short attention span • Literacy difficulties, e.g. reluctance to read or poor sight vocabulary • Numeracy difficulties • Untidy handwriting/clumsy • Poor organisation • Discrepancy between oral and written work • Difficulty following instructions • Tiredness due to excessive concentration levels needed • Social and behavioural difficulties arising from low self-esteem and frustration	• Discuss concerns/observations with the young person and parent(s) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher/tutor observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary • Discuss concerns with Personal Tutor and Learning Support Team • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves)	• Identify gaps in learning and provide focussed teaching • Place yourself where young people can see your face clearly and you can see them • Ensure all text and print is clearly visible – appropriate font, colour background • Keep all distractions to a minimum • Have clearly differentiated success criteria • Allow extra time for processing information, answering and completing tasks • Allow for frequent practice through recall and repetition • Use a variety of strategies for recording • Present new information in small chunks and keep language simple • Ensure that targets are SMART and achievable • Use colour highlighting for word patterns, prefixes, suffixes etc. • Introduce new material in a multi-sensory way – show it, listen to it, look at it, hear it, say it, write it • Use technology to support learning • Encourage Peer support • Provide visual and practical resources to present key information

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Encourage the use of spelling strategies, for example: mnemonics, words within words, base words and suffixes etc. • Use writing scaffolds to support planning • Break tasks down into chunks • Use calendars and checklists to structure module tasks and manage deadlines • Use concept maps to plan and identify overall themes and the relationships between ideas • Use the marking criteria as a stimulus when redrafting work

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• Brief record of young person's views • Brief record of parental views (completed Discussion Form) • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • The gap between the young person and that of his/her peers may be significantly wider than would be expected for young people of his/her age • May also be socially or emotionally immature and have limited interpersonal skills • Attention and concentration span difficulties, leading to poor motivation and resistance to learning • Difficulties with sequencing, visual and/or auditory perception, coordination, or short term working memory • Difficulties in the acquisition of reading, writing, oral or number skills, which do not fit his/her general pattern of learning and performance • Difficulties with other areas, e.g. motor skills, organisation skills, behaviour, social or emotional skills and multi-agency advice may be required • Very specific difficulties (e.g. diagnosis of dyspraxia or dyslexia etc.) affecting literacy skills,	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Record young person as SEN Support on Individual Learner Record (ILR) • Seek external advice from appropriate educational agencies such as Cheshire East Autism Team (CEAT) and Educational Psychologist (EP) • Seek external advice from health professionals such as: School Health, Speech and Language Therapy (SALT); Child and Adolescent Mental Health Service (CAMHS); Sensory and Processing Occupational Therapy Service (SPOTS)	Continue with any relevant strategies from First Concerns level, plus: • Provide appropriate small group interventions and resources specific to need with measurable SMART targets • Provide regular, specific focused teaching which is increasingly individualised from lecturer/tutor or support staff • Consider alternative methods of delivery of teaching and/or recording of learning • Ensure pre and post assessments are completed for each intervention • Implement, monitor and review advice from external agencies • Signpost to settings Learning Support base

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
spatial and perceptual skills and fine and gross motor skill	• Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to £6,000 (see 'Funding' section) • Further investigate gaps in learning to identify specific needs or barriers • Carry out and review further assessments as required and/or as advised by outside agencies • Ensure lecturers/tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• SEN Support Plan, which should include: - Record of young person's views - Record of parental views - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team) - Record of desired outcomes for young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document) • Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Records of any external support, contact or advice • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Individual Learner Record which documents young person at "SEN Support" Level

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Will have low attainment reflected in levels, typical of two thirds of chronological age with the gap possibly continuing to widen • Difficulties in the acquisition of reading, writing, oral or number skills, which require high levels of tailored support • Inability to concentrate even with targeted support or resources leading to poor motivation and resistance to learning • Frustration in inability to access learning leading to complete disengagement with learning or problematic behaviours which are unmanageable in a mainstream setting even with high levels of support and tailored, individual and skilled interventions • Limited social, emotional and interpersonal skills, requiring high level of tailored support • Complex difficulties with sequencing, visual and/or auditory perception, coordination, organisation, concentration or short term working memory	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan an Individual Learner Record (ILR) - Share the EHC Plan and ILR with relevant teaching, support staff and young person - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Continue to identify gaps in learning • See EHCP for specific outcomes and break outcomes into smaller, SMART targets and review frequently • Create a personalised curriculum tailored to the young person's needs (this may require consultation with all professionals involved with the young person) • Incorporate external advice • Liaise with support to ensure learning outcomes are facilitated and resources are readily available • Put behaviour management programme in place, if appropriate

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Ensure lecturers / tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Won't meet Age Related Expectations in all areas of learning throughout their education and not expected to exceed P-levels or Age related Expectations by Year 11 in mainstream education and/or needing access to alternative accreditation (ASDAN Website | Home/Functional Skills qualifications: requirements and guidance - GOV.UK (www.gov.uk) and/or lower level GCSEs	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • Carry out further assessments following advice and guidance from outside agencies	• Individual education programmes/plans put in place • Individualised curriculum closely tailored to identified long and short term outcomes for the young person, and likely involving pre-subject based learning and functional life skills training • High ratio of staff to pupils • Specially trained teaching staff and teaching assistants • Small class sizes (smaller than 10) • Multi-Disciplinary Team interventions on or off-site • Multi-sensory teaching • High level of appropriate 'catch-up' interventions put into place to try and accelerate progress

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

Post-16

First Concerns

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: **Difficulties relating to others** • Inability to interpret social cues correctly • Poor social timing • Lack of social empathy • Lack awareness of personal space • Difficulty maintaining appropriate eye contact • Lack of appropriate social conversational skills • Literal use and interpretation of language • Inability to see other people's point of view • Resistance to change and difficulties with transitions • Removal of self from certain environments • Limited socialisation and unusually focused special interests • Difficulties taking part in conversation • Inappropriate use of facial expression **Language** • Limited vocabulary knowledge, learning and using new words • Difficulty understanding words that are said to them or verbal instructions	• Discuss concerns/observations with the young person and parent(s) (where appropriate) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher/tutor observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary • Discuss concerns with Additional Learning Support Team • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves)	• Place yourself where young people can see your face clearly and you can see them • Keep all distractions to a minimum • Have visual prompts on display • Consider where young people are seated within the learning environment to enable them to see visual prompts etc. • Have clearly differentiated success criteria • Allow extra time for processing information, formulating a response and completing tasks • Allow for frequent practice through recall and repetition • Use a variety of strategies for effective communication, including visual support and/or encouraging the young person to say in a different way or show • Encourage young person to use gestures to support speech • Encourage the young person to tell you if they have not understood something • Create a predictable and consistent environment, ensuring routines are followed • Keep language clear, concise and unambiguous • Use the young person's name at the start of any instruction or information giving

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Attention and concentration skills • Limited spoken language for their age • Poor organisation and sequencing • Echolalia (repetition of noises or words spoken by another person) • Difficulty in understanding abstract concepts and applying prior learning • Difficulty with receptive and expressive language **Speech** • Monotone speech • Unclear speech • Stammer and/or difficulties getting words out • Nasal quality to speech in the absence of a cold • Unusual accent not linked to environment **Sensory** Experiences sensory processing difficulties, which may be observed by the following (this is not an exhaustive list): • Actions such as rocking, stroking, flapping and/or hands over ears • A self-limiting diet • Difficulty with body temperature regulation, e.g. coat on and hood up on a hot day or t shirt with no jumper or coat on a cold day **Other** • Poor self-esteem • Frustration / anxiety due to social and communication difficulties	• Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Present new information in small chunks, using simple language that is relevant to the young person • Ensure that targets are SMART and achievable • Introduce new material in a multi-sensory way – show it, listen to it, look at it, hear it, say it, write it • Use technology to support learning • Encourage Peer support • Use visual timetables and calendars • Use concept maps to plan and identify overall themes and the relationships between ideas • Recap relevant vocabulary. Ensure knowledge of vocabulary before introducing a new topic. • Use clear adult models of speech and language, and repeat, emphasise and expand, as needed • Use adult modelling of appropriate social phrases in context • Make use of Personal, Social, Health and Economic (PSHE) education/pastoral opportunities • Make use of resources such as: - Move 'n' sit cushions - Buzy legs - Movement breaks - Fiddle toys • Explain words and phrases that have more than one meaning or may be misconstrued e.g. pull your socks up • React to what the young person says, not how clearly they speak • Don't pretend to understand

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Social and/or behavioural difficulties arising from low self-esteem, frustration, or communication difficulties		

Evidence of Graduated Approach *How do we track and record progress and outcomes?*
• Brief record of young person's views • Brief record of parental views (completed Discussion Form) • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: **Difficulties relating to others** • Inability to interpret social cues correctly • Poor social timing • Lack of social empathy • Unawareness of others' personal space • Difficulty maintaining appropriate eye contact • Lack of appropriate social conversational skills • Literal use and interpretation of language • Rigidity and inflexibility of thought processes • Inability to see other people's point of view • Resistance to change and difficulties with transitions • Limited socialisation and unusually focused special interests • Difficulties taking part in conversation • Inappropriate use of facial expression **Language** • Limited vocabulary knowledge, learning and using new words	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Record young person as SEN Support on Individual Learner Record (ILR) • Seek external advice from any relevant educational agencies or health professionals such as Speech and Language Therapy (SALT), Child and Adolescent Mental Health Service (CAMHS) or Sensory and Processing Occupational Therapy Service (SPOTS) • Carry out and review further assessments as required and/or as advised by outside agencies • If appropriate, complete initial sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and environmental audit checklists)	Continue with any relevant strategies from First Concerns level, plus: • Create an individualised timetable which is predictable and consistent • Use individual visual timetables, now and next boards, calendars and task lists to structure activities • Use social stories and comic strip conversations to aid understanding of social situations • Designated quiet areas provided for times of stress or anxiety • Specific small group interventions • Differentiated curriculum, resources and success criteria • Implement strategies from outside agencies • Provide access to a quiet, distraction free work station if needed • Ensure that preferred methods of communication (as well as level of eye-contact) known by all staff within education setting • Build access to activities which meet the young person's sensory needs into the day, for example: timetabled movement breaks, quiet area to access etc.

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• They don't understand words that are said to them or verbal instructions • Attention and concentration skills • Poor organisation and sequencing • Limited spoken language for their age • Echolalia (repetition of noises or words spoken by another person) • Difficulty in understanding abstract concepts and applying prior learning • Difficulty with receptive and expressive language **Speech** • Monotone speech • Unclear speech • Speech or sound production difficulties and/or differences • Stammer, difficulties getting words out and/or dysfluency (i.e. disruptions in forward flow and timing of speech) • Nasal quality to speech in the absence of a cold • Unusual accent not linked to environment **Sensory** Sensory needs still affecting learning, for example: • Difficulties with large indoor and outdoor spaces • Issues with background and/or white noise • Issues with certain scents and perfumes • Aversion to everyday touch • May touch/stroke others to self soothe/regulate	• Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to £6,000 (see 'Funding' section) • Ensure all staff involved in the teaching of the individual young person are aware of their speech, language, social and communication difficulties • Ensure lecturers/tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Consider access to a workstation and/or set up a low stimulation workstation, privacy board on group table or personal table with few distractions but informative visual information and support

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Other • Poor self-esteem • Frustration / anxiety due to social and communication difficulties • Social and behavioural difficulties • Behavioural difficulties arising from low self-esteem, frustration, communication • Inconsistent behaviour between home and educational setting		

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- SEN Support Plan, which should include:
  - Record of young person's views
  - Record of parental views
  - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
  - Record of desired outcomes for young person
  - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
  - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document)

- Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Records of any external support, contact or advice
- Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.)
- Individual Learner Record which documents young person at "SEN Support" Level

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • The gap in the young person's communication skills continues to widen and is significantly lower than would be expected for young people of his/her age • The young person's impaired social development, communication, language and speech difficulties, rigidity of behaviour and thought are enduring, consistently impeding his/her learning and leading to significant and complex difficulties in functioning • Revision of the differentiated provision for the young person's education has not resulted in the expected progress towards achieving learning, pastoral and social interaction targets • In respect of receptive and expressive communication and social interaction, evidence of the young person's need for a systematic programme to develop his/her understanding of verbal and non-verbal communication • Evidence of significant difficulties persisting for the young person as a result of his/her	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan on Individual Learner Record (ILR) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Continue to identify gaps in learning • See SEN Support Plan/EHC Plan for specific outcomes • Incorporate external advice • Liaise with support to ensure learning outcomes are facilitated and resources are readily available • Use a variety of strategies for effective communication – e.g. Picture Exchange Communication System (PECS), Widget, visual supports • From the sensory assessment checklist(s) devise a bespoke sensory diet and implement • From completion of Autism Education Trust's environmental audit make environmental changes as appropriate to meet young person's need

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
inflexibility and/or intrusive obsessional thoughts • Evidence of a high priority having to be given to the management of the young person's language and communication difficulties in the planning of most teaching activities and the organisation of his/her learning environment	• Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Complete a sensory processing audit (e.g. Autism Education Trust's Sensory Assessment and environmental audit checklists) • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Lecturers / tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Access to the curriculum is only meaningful through use of a communication aid(s) and could not be used in a mainstream setting • Needing a fully inclusive approach across the whole educational setting, including a total communication environment with a variety of different high tech communication mediums which would not be expected in a mainstream setting (e.g. timelines, schedules, eye gaze system) • Interaction with others is minimal and inconsistent and impacts on curriculum access. Interactions occur only when facilitated and/or prompted by an adult. Young person would be totally isolated in a mainstream setting • Young person needs a high level of modification to the learning environment and organisation to their curriculum to avoid daily, high-level problematic behaviour and to keep them engaged in the learning environment • High level of social anxiety or profound lack of social engagement leads to inability to communicate with others without support	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary	Implement and use: • Alternative augmentative communication assessment and appropriate aids • High tech low tech systems • Use a variety of specialist strategies for effective communication – e.g. Picture Exchange Communication System (PECS), Widget, visual supports, Makaton, objects of reference, symbols, signs,proloquo2go, switches, voice output communication aids, eye gaze systems • Facilitate access to speech and language therapy • Carry out sensory assessments/audits and implement appropriate modifications • Use social interaction programmes/small group work as an integral part of the curriculum (e.g. Talking Partners, Circle of Friends, buddy systems) • Provide specialist communication sessions • Put behaviour modification programmes in place, if appropriate

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Carry out further assessments following advice and guidance from outside agencies, e.g. sensory assessment/audit • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

Post-16

First Concerns

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention and/or participate in social groups • Involved in low level distractions which hinder own concentration and that of others due to a lack of social understanding, task avoidance and/or with intent to gain attention • Verbal challenges to peers or adults which do not cease with verbal intervention and requires adult intervention and/or time out from the situation • Is withdrawn and isolated, generally seeking too little or too much adult attention with limited or selective communication. Regularly appears on the fringe of activities • May not communicate feelings appropriately • Difficulty in controlling own emotions, feelings of frustration or distress in response to social or environmental situation that requires a reflective response with the young person	• Discuss concerns/observations with the young person and parent(s) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and record 'impact on learning' (using a behaviour log, if appropriate) across a range of contexts across school day to understand whether need is contextual/situational and to inform strategies needed • Carry out further assessments as necessary • Discuss concerns with Additional Learning Support Team	• Consider seating and grouping of young people • Provide safe area for young person to calm down when required • Make tasks short, with frequent breaks and opportunities to access physical or sensory activities • When young person is exhibiting signs of stress, make instructions short and language clear, and provide low-challenge tasks and increased structure and predictability. Adjust timescale and output expectations for tasks • Use an anxiety scale during post incident reflection to measure and track level of anxiety at times of heightened emotion • Use of visual support such as traffic lights, symbols, photos etc. to reinforce classroom instructions and routine • Explicitly teach young person specific social and communication skills e.g. how to ask for help • Use available adults to model, coach and reinforce group work skills when the young person is working collaboratively with other young people

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Foreseeable signs of distress to usual social situations or activities, e.g. withdrawing, refusing, avoiding, lack of engagement that requires adult acknowledgement and a need for space or time out • Behaviour that can be challenging and/or upsetting towards peers or adults, that is perceived to be intentional • Some anti-authoritative behaviour • Anxiety and/or low mood impacting on ability to participate, engage and maintain attention requiring regular adult support and reassurance, which may be situationally dependent • Some self-esteem and/or resilience difficulties leading to avoidance of new experiences/fear of failure • Some controlled, low levels of self harming behaviours	• Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section) • Arrange appropriate Continuing Professional Development (CPD) and training for staff If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Utilise positive behaviour strategies, such as praising desired behaviour, separating behaviour from young person and reminding of expectations, e.g. - Say what you want him or her to do, rather than what you don't - Label the behaviour but not the young person - Remind young person of a rule rather than telling them off, or make a point of praising a young person who is keeping the rule • Remind young people of the consequences of the various behavioural choices open to them • Make an effort to 'catch the young person being good' and praise them • Teach young person how to reward themselves • Devise a private signal system to let the young person know when they are off task or behaving inappropriately • Involve young person in development of a planned reward system for appropriate behaviour • Teach strategies and make adaptations to support young person to achieve, thereby strengthening self-esteem and avoiding frustration if young person is struggling with tasks • Take steps to build young person's self confidence, for example: - Provide opportunities to share interests and skills

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		- Give them responsibilities or ask the young person to help others - Have them keep records of new things they learn and can do - Photocopy good pieces of work for them to take home • Make time and extra effort to develop a relationship with the young person and let them know they are held in mind when not teaching them • Help the young person identify an appropriate adult that they feel comfortable sharing concerns with • Build in time for 'emotional check-ins' during the day, and listen without judgement • Use a buddy or mentoring system with another young person • Provide opportunities for supported peer interaction to further strengthen social and communication skills

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- Brief record of young person's views
- Brief record of parental views (completed Discussion Form)
- Collated assessment data
- Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.)
- Brief record of any external support or contact (e.g. records of telephone conversation or emails)
- First Concerns Profile

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention, participate in social groups and distracts other young people or self • Verbal aggression to peers or adults which does not cease with de-escalation techniques and/or requires time out from the situation • Is withdrawn and isolated, generally seeking too little or too much adult attention, which may often be negative attention • Will not communicate feelings appropriately • Difficulty in controlling own emotions and feelings of frustration or distress in response to social or environmental situation that requires emotional containment • Unforeseeable frustration and distress in response to personal, social or environmental situation which may result in danger or damage to self, people or property • Emotional responses that are not typical of the majority of the age group	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete an observation and analysis of frequency and pervasiveness of incidents over a range of contexts and across a number of lessons/activities using an ABC framework • Consider young person's learning context, motivational factors, and social and emotional competencies • Seek external advice from any relevant educational or health professionals (who may recommend referral to a local mental health service as outlined in the Local Offer) • If appropriate, refer to Cheshire East self harm pathway	Continue with any relevant strategies from First Concerns level, plus: • Provide a plan and support for unstructured and/or transition times • As far as possible, take steps to increase stability and predictability of environment • Differentiate language and responses to take account of stage of social functioning and emotional development • Adapt curriculum and allocate resources (adult support, or physical resources, e.g. ICT or sensory items) to meet individual SEMH need • Implement an appropriate and individualised behaviour management programme • Use appropriate emotional awareness and regulation workbooks or programmes within individual or a small group, such as Anger Gremlin, Anxiety Gremlin, 'think good, feel good' or 'no worries' programme • Implement an individual or small group tailored social skills intervention • Signpost young person to 'Reading Well' resources available at local libraries (list of books which cover common mental health

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*

• Behavioural difficulties that have not been addressed by differentiated learning opportunities or by the strategies described above in 'First Concerns'
• High levels of disruption causing break down in group activities, and requiring planned and targeted intervention and/or removal from the activity
• Harmful or unsocial behaviour in different settings, which may pose a risk to self or others
• Reduced ability to acknowledge or accept responsibility for his/her own actions in a heighted emotional state
• Anti-authoritative behaviour
• Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in multiple situations and requiring more sustained and recorded adult intervention and support
• Low levels of self-esteem and/or resilience leading to avoidance of new experiences/fear of failure, despite strategies and additional support described at 'First concerns'
• Controlled, low levels of self harming behaviours
	• Carry out and review further assessments as required and/or as advised by outside agencies, for example:
	  ○ a strengths and difficulty questionnaire (e.g. from www.sdqinfo.com) to strengthen understanding of need
	  ○ Environmental audit of classroom and/or outside space etc.
	  ○ Risk assessment(s) relating to behaviour, self-harm etc. as appropriate
	• Complete a SEN Support Plan, in conjunction with appropriate professionals, and review on a regular basis (e.g. at least termly)
	• Record young person as SEN Support on Individual Learner Record (ILR)
	• Complete a Reducing Anxiety Management Plan (RAMP) if required and appropriate
	• Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to £6,000 (see 'Funding' section)
	• Ensure lecturers/tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) and training, e.g. emotional containment; de-escalation techniques; conflict resolution and positive handling
		conditions and available to borrow free of charge. The list is aimed at 13-18 year olds)
		• Use an anger scale with the young person, such as 5 point anger scale
		• Individual or small group use of low level emotional health interventions such as: relaxation exercises, safe place imagery, positive affirmations, thinking errors, positive events log, anxiety scale, worry charts, motivational rewards, celebration book etc.
		• Use appropriate interventions from self-harm pathway on an individual basis such as: personal safety plan, self-harm passport etc.
		• Assist young person to identify a member of staff who is able to carry out close liaison between home and school to ensure consistency across settings

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure protocols are in place for the positive management of specific behaviours and emotions which are consistent across all areas of educational setting If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- SEN Support Plan, which should include:
  - Record of young person's views
  - Record of parental views
  - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
  - Record of desired outcomes for young person
  - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
  - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document)

- Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Records of any external support, contact or advice
- Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.)
- Individual Learner Record which documents young person at "SEN Support" Level

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets
- Risk Assessment
- Reducing Anxiety Management Plan
- Completed strengths and difficulty questionnaire (SDQ)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Withdraws or chooses not to participate in any interactions to a degree that requires continuing adult support within and outside the classroom context, e.g. a more personalised curriculum paying regard to specific areas of interest or strength and difficulty and differentiated appropriately. • Difficulties in forming and maintaining reciprocal peer and adult relationships leading to significant social isolation and disengagement • Verbal and/or physical aggression to peers or adults which does not cease with de-escalation techniques and/or requires time out from the situation • Will not communicate feelings appropriately. More likely to be communicated through negative behaviours. • Extreme emotional responses that are not age or situationally appropriate leading to an inability to engage with any formal learning	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan on Individual Learner Record (ILR) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. Regularly update with strategies as they are tried.	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Develop a whole setting approach that provides a consistent reward and sanction structure • Implement an appropriately differentiated curriculum; this may incorporate a personalised/ alternative curriculum and/or timetable (facilitating SEMH skill development) • Short term and focused alternative provision within educational setting where appropriate • Use reflective practice to support positives and successes and develop a 'social toolkit' • Provide access to appropriate key adult support • Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce social anxiety • Discuss social boundaries for forthcoming activities explicitly to support social communication difficulties • Use social stories to explore choices of actions and potential consequences • Implement specific lessons in social interaction that cover conversation, meal time etiquette, personal safety, manners etc. (It may be

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
situations and taking a significant amount of time and support to calm from • Complete disengagement and withdrawal in a classroom setting requiring high levels of adult support to re-engage with and access learning • Risk taking behaviour that has the potential to harm. Positive handling is necessary to safeguard the young person and others • Limited ability to acknowledge or accept responsibility for his/her own actions in a heighted emotional state • Consistent support required to minimise high levels of disruption • Anti-authoritative behaviour • Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in the majority of situations and requiring specific and targeted interventions. May already have referral to mental health service. • Very poor self-esteem and/or resilience which is pervasive (impacts all areas of life) • Emotional functioning affected to a level where regular self-harm is occurring and necessitating specialist mental health services. • Difficulties requiring admission to inpatient services which requires joint working between LA educational and health professionals to agree a bespoke package to be delivered through a mainstream setting upon discharge	- Complete Annual Review of EHC Plan • Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Lecturers / tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	necessary to review facial expressions and body language as part of this). This should include giving and receiving compliments. • Make communication skills and behavioural expectations a core focus - this should include ways to show you are listening etc. • Teach self-help strategies to minimise hypervigilance, such as not sitting next to or facing doors or windows, using noise cancelling headphones to block out sound etc. • Support maintaining focus in a non-confrontational way at regular intervals using strategies such as using the young person's name, touching the desk in front of them or their book, passing post-its of instruction, using an agreed card system such as traffic lights • Monitor your own body language, facial expression and tone to project calm and consideration, and avoiding aggression or agitation associated with frustration • Teach good mental health strategies either through mindfulness or similar therapeutic activities to calm and clear the mind • Utilise nurture group ethos and strategies • Provide a safe and supervised area for calming and time away from triggers

Evidence of Graduated Approach

How do we track and record progress and outcomes?

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
 	
Additional documents (if relevant/appropriate for individual):
• Boxall Profiles
• Behaviour log and/or records e.g. ABC forms/Tally sheets
• Completed strengths and difficulty questionnaire (SDQ)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed difficulties requiring consistent high levels of specialist interventions with the following: • Cannot participate in any interactions without a specialist degree of adult support within and outside the classroom context. e.g. a bespoke curriculum, differentiated appropriately, to incorporate social and emotional strategies as well as academic • Extreme difficulties in forming and maintaining reciprocal peer and adult relationships leading to significant social isolation and disengagement or total apathy • Unable to communicate feelings appropriately, resulting in negative behaviours such as verbal and physical aggression which requires frequent specialist de-escalation and positive handling • Erratic and potentially unsafe emotional responses leading to an inability to engage with any formal learning situations and taking a significant amount of time and support to calm from • Complete disengagement and withdrawal requiring consistent, specialist adult support to	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary	Continue with any relevant strategies from First Concerns, SEN Support and/or Complex levels, plus: • Specialist nurture provision across the setting • Specialist therapeutic interventions, e.g. art therapy, interest based activities that facilitate reflective practice etc. • Support for parents to understand mental health and guidance on appropriate techniques and skills to use, e.g. using BASC3 monitoring and intervention structure • Signpost parents to support for parent mental health • Specific specially trained staff to meet individual need • Emotion coaching from trained staff • Sensory based therapies and workouts • Trauma and grief therapy • School work with medical staff to provide holistic package of care and intervention • Targeted behavioural modification programmes with family support and training • Individualised support that will include curriculum content, length of day, group

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
attend, participate or to re-engage with and access learning • Regular and/or targeted risk taking behaviour that is likely to harm without specialist intervention. Positive handling plan is necessary to safeguard the young person and others • Young person displays complete apathy or desensitisation towards all situations • Inability to acknowledge or accept responsibility for his/her own actions • Anti-authoritative behaviour in all environments • Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in the majority of situations and requiring specific and targeted interventions. May already have referral to mental health service • Very poor self-esteem and/or resilience which is pervasive (impacts all areas of life), causing high levels of distress and an inability to engage with learning without a bespoke package incorporating a specialist environment and services • Difficulties requiring admission to inpatient services which LA educational and health professionals agree will require ongoing mental health services and specialist interventions that can only be met in a specialist setting once discharged.	• Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family • Refer young person for specialist psychotherapy as required with continuing support as prescribed.	dynamic, supported access to additional medical appointments.

Evidence of Graduated Approach

How do we track and record progress and outcomes?

- EHC Plan (reviewed annually, and updated if appropriate)

- Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  - Record of young person's views
  - Record of parental views
  - Smaller, SMART targets for young person based on outcomes described in EHCP
  - Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  - Record of external agencies involved in supporting young person

- Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
- Schedule 2 document outlining specific amounts (times and costs) of support in place
- Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
- Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

Additional documents (if relevant/appropriate for individual):

- Boxall Profiles
- Behaviour log and/or records e.g. ABC forms/Tally sheets
- Completed strengths and difficulty questionnaire (SDQ)
- Risk Assessment
- Reducing Anxiety Management Plan (RAMP)
- Intervention reflection sheets

Post-16

First Concerns

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The young person has: • A recognised visual impairment and/or an assessed visual deficit, which is not fully corrected by glasses/lenses • Access to standard learning resources • Access to computers The young person will also have one or more observed **emerging** and/or **fluctuating** difficulties or deterioration in the following areas: • Deteriorating handwriting – may be unusually small or large, or letters may be poorly formed • Difficulty copying accurately either from board or close to. • Remembers and understands things which have been verbally explained rather than what has been read or seen • When reading may skip letters, lines and words and may cover an eye when reading or performing close tasks • Shows signs of poor hand eye co-ordination and over and under reaching • Appears clumsy and may often trip or fall	Talk to young person and/or parents in order to: • Establish whether the young person is known to have a visual impairment • Check to see if all vision checks are up to date and establish if having similar issues at home • Discuss concerns/observations with the young person and parent(s) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher/tutor observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary (e.g. an assessment for a magnifier etc.)	• For most young people, lecturer or tutor will be able to use resources and strategies available in the classroom • Try out different paper or Smartboard colours to try to find best contrast • Take advice from specialist teams related to font style and size • Intersperse short spells of visual activity with less demanding activities • Eliminate inessential copying from the board • Where copying is required, ensure appropriate print size photocopy is available • Provide occasional use of enlarged copies, as advised • Avoid standing in front of windows – your face becomes difficult to see • Ensure young person has own text or monitor • Provide recommended equipment and encourage its use, for example: specific writing implements and/or lined paper • Ensure safe access to physical and practical subjects • Tasks may need to be differentiated by some variation of teaching material and time given to complete tasks

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• May have difficulties with height, depth or shadows • May tire easily or be easily distracted by precision tasks • May thrust head forward to squint when looking at near/far • May hold equipment unusually close or at a strange angle	• Perform an audit/risk assessment of the young person's learning environment • Discuss concerns with Additional Learning Support Team • Signpost young person, parents and staff to relevant information and services in the Cheshire East Local Offer for SEND and Live Well Cheshire East, including services related to visual impairment • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Complete easily made changes to the learning environment

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• Brief record of young person's views • Brief record of parental views (completed Discussion Form) • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile • Audit/risk assessment of young person's learning environment

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
As at First Concerns, the young person has: • A recognised visual impairment and/or an assessed visual deficit, which is not fully corrected by glasses/lenses Additional to impact at First Concerns: The young person has: • Reduced access to standard print • Limited access to whole class presentations The young person will have one or more of the following: • Limited access to standard practical activities • A need to type some work in order to access their own work • A need for accessibility settings and/or specialist software to access computers • A need for supervision or support in unfamiliar or hazardous situations And/or observed **persistent** and **moderate** difficulties with the following:	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Establish whether the young person is known to have a visual impairment • Check with young person and/or parents to see if all vision checks are up to date • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Record young person as SEN Support on Individual Learner Record (ILR) • Seek external advice from relevant educational agencies and health professionals, including any Visual Impairment specialists • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course	Continue with any relevant strategies from First Concerns level, plus: • Provide any required changes in the learning environment • Withdrawal sessions for individual or small group work may be necessary to: - Complete tasks made slower by the visual impairment - Prepare young person for a class activity/learning experience - Reinforce mainstream work - Provide additional hands on experience of materials or presentations - Provide additional experiences of the environment to remedy a lack of incidental learning - Learn particular skills to improve curriculum access e.g. touch typing or use of magnifiers or other specialist equipment - Learn mobility skills • Consider modifications to the following to facilitate access to the curriculum (following advice from a VI specialist, if available), for example:

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Difficulty with forming or reading back own handwriting – may be unusually small, large or letters poorly formed • Difficulty copying accurately either from board or from table top learning materials • When reading may skip letters, lines and words • Shows signs of poor hand eye co-ordination and over- and under-reaching • Children or young people may tire easily or be easily distracted from precision tasks • Move close to items to view them or hold them at an angle • Adopts a noticeable head tilt or position	funding) plus up to £6,000 (see 'Funding' section) • Carry out and review further assessments as required and/or as advised by outside agencies • Ensure lecturers/tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	- Use of whiteboard - Accessibility of printed materials - Modification of teaching methods used - Speed of work - Physical position of the young person Consider information from parents and other professionals in relation to the above also • Young person may benefit from using specialist equipment, for example: - Sloping reading/writing boards - Magnifiers - Dark pens/pencils - Dark lined books/paper - Large print materials (e.g. reference books) - Laptops/tablets - CCTVs (Closed Circuit TVs, i.e. magnification aids) • Printed material may need to be enlarged and modified, or accessed via magnification. Educational setting to use their own resources for modification of work • Consider access arrangements for external tests and exams • Consider whether typing tuition needs to be provided

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• SEN Support Plan, which should include: - Record of young person's views - Record of parental views - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team) - Record of desired outcomes for young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document) • Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Records of any external support, contact or advice • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Individual Learner Record which documents young person at "SEN Support" Level

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Additional to impact at First Concerns and SEN Support: The young person has observed **persistent** and **significant** difficulties with the following: • Access to standard print and needs modified materials, or alternative formats, e.g. braille • Learning from demonstrations and activities in lessons • Recording/retrieving written work efficiently • Organising learning materials • Access to incidental learning and concept development • Moving safely, independently and with appropriate speed The young person will also have one or more of the following: • A need to use specialist equipment to provide efficient access to the curriculum • A need for some individualised programmes of learning • A need for some pre or post tutoring to ensure full access to learning • Slower work rate/ability to process visual information	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan on Individual Learner Record (ILR) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan.	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Employ a differentiated/modified curriculum • Provide support to meet needs as detailed in professional recommendations and EHC Plan • Provide significant modification of materials and presentations to facilitate access to the curriculum • Ensure young person has access to targeted adult support and/or preparation of resources to access the curriculum, as required • Provide appropriate learning space – taking into account use of equipment • Ensure that specialist equipment is kept in good working order and inform appropriate equipment service/team of any problems • Provide young person with time for pre or post tutoring • Provide alternative physical activities if and when required/advised • Provide sufficient time for support staff to acquire specialist skills, e.g. Braille • Actively support the young person in using specialist skills as an integral part of the day

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• A need for provision of alternate physical activities • Limited social and self-help skills	• Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Ensure lecturers/ tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Sensory Needs (Visual Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Additional to impact at First Concerns, SEN Support and Complex, the young person may have one or more of the following: • Significant cognitive/health/physical difficulties, plus a visual impairment or visual loss • A very high and complex level of need, specifically related to the visual impairment • Particular and significant social/emotional or medical needs which require sustained specialist provision • Need for access to appropriate sporting activities and opportunities as an intrinsic part of the curriculum • Need for individualised programmes of learning due to a combination of special educational needs and visual impairment • A requirement to be taught within a small group • A requirement for a high level of mobility and independent life skills teaching as an intrinsic part of the curriculum • A need for an appropriate peer group to support social and emotional wellbeing • A need for access to appropriate social activities	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority 0-25 SEND officer for child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary	Additional to strategies at First Concerns, SEN Support and Complex: • Suitable/alternative curriculum, exams, vocational assessments/learning environment • Daily teaching from a Specialist Teacher for Visual Impairment (STVI)/Habilitation Specialist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• A need for an appropriate peer group to support identity as a person with visual impairment	• Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach *How do we track and record progress and outcomes?*

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person

- Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
- Schedule 2 document outlining specific amounts (times and costs) of support in place
- Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
- Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

Additional documents (if relevant/appropriate for individual):

- Record of ongoing liaison between specialist provision, young person, parents, local authority and other agencies

Post-16

First Concerns

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Young person: • Has a diagnosed hearing loss (which is confirmed by up-to-date information from Audiology) AND • May have hearing aids OR • Is suspected of having a hearing loss and is undergoing clinical assessment Child or young person may exhibit some **emerging** and/or **fluctuating** difficulties with the following: • Receptive and expressive language • Attention and concentration • Understanding verbal (spoken) information • Following instructions • Missing key information • Misunderstanding key information • Processing auditory information, including verbal and non-verbal information • Listening in the presence of background noise and/or locating the speaker in large/noisy environments • Acquiring and retaining vocabulary (may be observed as vocabulary gaps or poor language	Talk to young person and/or parents in order to: • Establish whether the young person is known to have a hearing loss/impairment • Ask them to request a referral for a hearing assessment via GP • Discuss concerns/observations with the young person and parent(s) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher/tutor observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary	• Support management of hearing aids • Implement advice from SALT Advice Line, if required • Ensure advised access arrangements for exams are applied for and provided • Consider seating arrangements to ensure that the young person can clearly see the tutor and any other speakers • Keep hands away from mouth and avoid standing in front of windows – your face becomes difficult to see • Encourage young person to pay close attention to the speaker's face • Ensure you have young person's full attention before important information if given • Allow more thinking and talking time in group discussions • When asking a direct question to the young person, use appropriate and simplified language and allow additional time to respond • Repeat contributions from other young people – their voices may be softer and their speech more unclear • Provide key words and/or additional visual support as prompts or to reinforce learning

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
skills where they may have missed early vocabulary) • Often asks for repetition • Volume of voice (i.e. abnormally loud or quiet voice) • Acquisition of phonic skills (which may impact early stages of reading) • Frequent colds/ear infections • Problems with self-esteem, emotional wellbeing and social interaction • Fatigue due to level of concentration required	• Perform an audit/risk assessment of the young person's learning environment • Discuss concerns with Additional Learning Support Team • Signpost young person, parents and staff to relevant information and services in the Cheshire East Local Offer for SEND and Live Well Cheshire East, including services related to hearing impairment • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 078251038939) • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section)	

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Consider Continuing Professional Development (CPD) requirements and support for staff, and implement. Access any appropriate training from SALT If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• Brief record of young person's views • Brief record of parental views (completed Discussion Form) • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Brief record of any external support or contact (e.g. records of telephone conversation or emails) • First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The young person: • has hearing aids or cochlear implants • is likely to have a personal radio aid system • is unable to access the mainstream curriculum through personal amplification alone within the allowed timescale and at normal teaching pace In addition, the young person will have one or more of the following: • A late diagnosis • A progressive hearing loss • A moderate to severe hearing loss • Auditory Neuropathy • Delayed language development • Requires elements of the curriculum to be differentiated • Observed **persistent** and **moderate** difficulties with the following: - Perception of some speech sounds - Accessing linguistic aspects of the curriculum - Accessing speech in TV programmes, DVDs and YouTube clips where lip pattern is not present (e.g. 'hidden narrators' and voiceover)	• Lecturer/tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Record young person as SEN Support on Individual Learner Record (ILR) • Seek external advice from educational agencies and health professionals such as Speech and Language Therapy (SALT) • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 078251038939)	Continue with any relevant strategies from First Concerns level, plus: • Daily checks of personal hearing aids and radio aid systems • Follow recommendations from any health, education and HI specialists for listening skills/language development activities • Some small group or individual interventions may be required for the following: - Development of listening skills - Language development including vocabulary - Pre/post tutoring of subject-specific curriculum vocabulary and/or concepts - Social Emotional skills • Ensure that specialist equipment is kept in good working order and inform appropriate equipment service/team of any problems If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
- Accessing speech where there is competing background noise, including music	• If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to £6,000 (see 'Funding' section) • Carry out and review further assessments as required and/or as advised by outside agencies • Ensure lecturers/ tutors and additional learning support teams receive relevant Continuing Professional Development (CPD). Access any appropriate training from SALT If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach
How do we track and record progress and outcomes?

- SEN Support Plan, which should include:
  - Record of young person's views
  - Record of parental views
  - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
  - Record of desired outcomes for young person
  - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
  - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document)

- Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice, which has been implemented and reviewed
  - Includes records of liaison with SALT, if required
- Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.)
- Individual Learner Record which documents young person at "SEN Support" Level

Additional documents (if relevant/appropriate for individual):
- SALT care plan (including any review/evaluation)

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
The young person has a diagnosed permanent bilateral hearing loss The young person will also have observed **persistent** and **significant** difficulties with one or more of the following: • Delayed language development • An inability to access the mainstream curriculum through personal amplification alone within the allowed timescale and at normal teaching pace • A requirement for high levels of targeted intervention to facilitate access to a differentiated curriculum • Support with social and emotional aspects of learning • A requirement for alternative modes of communication • Additional learning difficulties and disabilities • Difficulty establishing friendships with hearing peers • May need to focus their visual attention for long periods of time (e.g. to watch a signer or lip read)	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan on Individual Learner Record (ILR) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: Facilitate young person's use of the following if required according to their needs (following advice from Speech and Language Therapy and/or a HI specialist): • May need intensive hearing, speech and language rehabilitation following hearing aid fitting or cochlear implant surgery • Use of sign language as their primary mode of communication and to access to learning, or to supplement delayed or limited spoken language • Use of a communication support worker for British sign language, sign supported English or different communication approaches according to the situation (known as total communication) • Provide support to meet needs as detailed in EHC Plan (and any HI specialist recommendations) • Provide lecturer/tutor led small group work • Provide access to quiet working spaces for tutorial/small group work and specialist assessment

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to act on external advice from educational and health agencies as necessary • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 078251038939) • If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Lecturers / tutors and additional learning support teams receive relevant Continuing Professional Development (CPD). Access any appropriate training from SALT	• Use a differentiated/modified curriculum, as required • Reinforcement of curriculum through additional methods, e.g. sign, use of visual resources, pre/post tutoring, small group work • Consider if young person requires targeted adult support to facilitate access to the curriculum • Consider acoustic treatment of rooms and Soundfield systems If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family.	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• EHC Plan (reviewed annually, and updated if appropriate) • Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following: • Record of young person's views • Record of parental views • Smaller, SMART targets for young person based on outcomes described in EHCP • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review) • Record of external agencies involved in supporting young person • Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team) • Schedule 2 document outlining specific amounts (times and costs) of support in place • Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments   - Includes records of liaison with SALT, if required • Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle Additional documents (if relevant/appropriate for individual): • SALT care plan (including any review/evaluation)

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Sensory Needs (Hearing Impairment)

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
In addition to impact at First Concerns, SEN Support and Complex, the young person may have one or more of the following: • An inability to access the mainstream curriculum without additional specialist support • A requirement for a differentiated/modified curriculum • A need to access a d/Deaf peer group • A need for a signing environment and a signing peer group • A requirement for specialist subject teachers of the deaf • A need for the curriculum to be delivered through sign language or alternative modes of communication • A need for small group teaching • A requirement for a specialist TA/HI specialists to facilitate access to a differentiated curriculum (e.g. through sign language) • A requirement for on-site access to speech therapy and other agencies	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority SEND Key Worker child or young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary • For educational settings in South Cheshire - Ring Speech and Language Therapy (SALT) Triage helpline to discuss concerns (run by	In addition to strategies at First Concerns, SEN Support and Complex: • Suitable/alternative curriculum, exams, vocational assessments/learning environment • Daily teaching from a Specialist Teacher of the Deaf (STOD) • Access to a d/Deaf peer group • Curriculum delivered through sign language or alternative modes of communication If required: • Implement advice from SALT Advice Line • Implement SALT Care plan • Liaise with Speech and Language Therapist

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	Central Cheshire Integrated Care Partnership (CCICP), which provides SALT services for South Cheshire and Vale Royal CCG areas ONLY. Helpline is available on Tuesday afternoons at 12.00-16.30 and is reached on 078251038939) • If required, refer to Speech and Language Therapy (Hearing Impairment Specialist Speech and Language Therapy for children with severe or profound hearing loss) • Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required. Access any appropriate training from SALT If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

- EHC Plan (reviewed annually, and updated if appropriate)

- Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
- Record of young person's views
- Record of parental views
- Smaller, SMART targets for young person based on outcomes described in EHCP
- Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
- Record of external agencies involved in supporting young person

- Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
- Schedule 2 document outlining specific amounts (times and costs) of support in place
- Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
    - Includes records of liaison with SALT, if required
- Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

Additional documents (if relevant/appropriate for individual):
- SALT care plan (including any review/evaluation)
- Record of ongoing liaison between specialist provision, young person, parents, local authority and other agencies

Post-16

First Concerns

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **emerging** and/or **fluctuating** difficulties with the following: • Has physical needs and uses specialist aids relating to their disability, e.g. pencil grip or writing slope • Motor control – fine and gross delay • Spatial orientation issues • Minor physical difficulties – hand eye coordination • Problems causing difficulties in throwing, catching, and/or balance safety • Lack of progress in the curriculum due to condition • Needs impact on their self-esteem and social relationships • Working at a slower pace due to fatigue • Medication which impairs concentration and may lead to difficulties in the classroom • Poor engagement during tasks for intermittent periods throughout the day	• Discuss concerns/observations with the young person and parent(s) • Obtain and record young person's views • Obtain and record parental information and views If available and/or appropriate: • Examine previous school records, and consider past teacher/tutor observations and views • Collate current assessments related to area of concern – qualitative, quantitative and summative • Observe and compare potential barriers to learning and participation across a range of contexts • Carry out further assessments as necessary • Perform an audit/risk assessment of the young person's learning environment, and apply extra consideration to any visits, trips or work outside of the setting	• Consider organisation of classroom and seating plans to ensure free movement and sufficient working space • Use programmes to develop motor skills • Implement an accessibility plan to move around the setting • Provide additional classroom resources such as sloping board, adapted cutlery/chairs/scissors and pencil grips etc. • Provide differentiation and personalised learning targets • Consider positioning of young person in the classroom to minimise distractions • Keep withdrawals from class to a minimum • Facilitate specific skill development and activities in support of targets • Provide adaptations to the pace of lessons to take account of fatigue • Consider timetabling and location of rooms where possible to facilitate movement • Use technology to support learning • Encourage peer support • Provide alternative lined paper with spaces sufficiently wide enough to accommodate young person's handwriting

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Discuss concerns with Additional Learning Support Team • Complete a First Concerns Profile if appropriate (a young person may be able to do this themselves) • Place young person on a 'First Concerns' Register • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to a maximum of £3,000 (see 'Funding' section) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Attach paper to desk with masking tape to avoid having to hold with one hand and write with the other hand • Eliminate inessential copying from the board • Teach sequencing skills • Have appropriate height chairs and tables

Evidence of Graduated Approach *How do we track and record progress and outcomes?*
• Brief record of young person's views • Brief record of parental views (completed Discussion Form) • Collated assessment data • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.)

- Brief record of any external support or contact (e.g. records of telephone conversation or emails)
- First Concerns Profile

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SEN SUPPORT

Post-16

SEN Support

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **moderate** difficulties with the following: • Has physical needs and uses specialist aids relating to their disability, e.g. seating • Motor control – marked fine and gross functional skills delay • Spatial orientation issues • Physical difficulties – hand eye coordination • Problems causing difficulties in throwing, catching and/or balance– moderately behind peers • Lack of progress in course curriculum due to condition • Needs impact on their self-esteem and social relationships • Moderate difficulties in physically accessing the curriculum • Working at a markedly slower pace due to fatigue • Poor engagement during tasks throughout the day • Needs extended adult support beyond "First Concerns" level of support to be able to access the curriculum	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • Complete a SEN Support Plan and review on a regular basis (e.g. at least termly) • Record young person as SEN Support on Individual Learner Record (ILR) • Seek external advice from any relevant educational and health professionals • Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) plus up to £6,000 (see 'Funding' section) • Carry out and review further assessments as required and/or as advised by outside agencies	Continue with any relevant strategies from First Concerns level, plus: • Adult assistance to now access the curriculum, manage their condition, or move with safety around the environment • Extra time to deliver targeted and additional motor skills development • Ensure access to additional and specialised IT equipment, as required • Consider access arrangements for external tests and exams, and apply for/implement as necessary • Strategies to reduce or provide alternative methods of recording written work • Teach young person how to use planner, diary, lists to organise themselves as appropriate • Allow additional time to complete tasks • Allow young person to leave early when travelling between lectures/classes to avoid large groups in corridors and enable extra travel time e.g. to go to lift • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Ensure lecturers/ tutors and additional learning support teams receive relevant Continuing Professional Development (CPD), e.g. manual handling If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	• Provide hand rails on stairs • Consider rails within toilets or access to disabled toilet • Ensure young person is able to reach and use facilities e.g. hand basins/taps/lockers • Give consideration to transporting of food at lunchtime e.g. assistance with trays and seating • Provide a locker for young person to store books etc. rather than needing to carry them around during the day

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***
• SEN Support Plan, which should include: - Record of young person's views - Record of parental views - Collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team) - Record of desired outcomes for young person - Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles) - **NOTE**: if young person is approaching step up to COMPLEX, implemented resources and strategies must include specific amounts (time and cost) in order to consider whether a request for an EHC needs assessment is required (e.g. costed provision map, as required in Schedule 2 document) • Log of meetings with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle • Records of any external support, contact or advice, e.g. health reports • Records of any completed observations or evidence which supports observed impact on learning (e.g. young person's work, photos etc.) • Individual Learner Record which documents young person at "SEN Support" Level

If "Impact on Learning" indicators remain and progress has not been made
→ Continue to COMPLEX and consider a request for an EHC needs assessment

Post-16

Complex

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Observed **persistent** and **significant** difficulties with the following: • Despite implementation of strategies from "First Concerns" and "SEN Support", progress for the young person is either: - significantly slower than that of their peers starting from the same baseline - fails to match or better the young person's previous rate of progress - fails to close the attainment gap between the young person and their peers or - widens the attainment gap • Their ability to function independently in the environment of the educational setting and in their everyday life • May require significant therapies and/or medical interventions • May require adult support to navigate around the college or training provider setting • May require adult support to access and use equipment safely in practical sessions e.g. science/cooking	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period • Obtain and record updated young person's views • Obtain and record updated parents' views • If EHC Plan is not in place: - Review SEN Support Plan (at least termly) - Consider a request for EHC needs assessment (see section on EHC needs assessments) • If EHC Plan is in place: - Record young person as having an EHC Plan on Individual Learner Record (ILR) - Refer to described outcomes and provision and implement - Continue to plan, do, review against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan' - Complete Annual Review of EHC Plan	Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus: • Follow EHCP for specific outcomes • Monitor the impact on other areas of learning e.g. social and emotional well being • Adaptations to the educational setting environment e.g. changing plinths/ramps/hoists • Consider space needed to accommodate specialist equipment e.g. walker • Ensure access to specialised seating and/or height adjustable tables • Carry out lectures etc. on ground floor if no suitable access to rooms on upper floors • Consider adaptations required in practical sessions e.g. ovens in cookery to be wheelchair accessible

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Continue to act on external advice from educational and health agencies as necessary • Carry out and review further assessments as advised by outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (course funding) - plus up to £6,000 (from 'Element 2' funding) - plus any additional top-up as detailed in the EHC Plan • Lecturers / tutors and additional learning support teams receive relevant Continuing Professional Development (CPD) If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

If "Impact on Learning" indicators remain and/or progress has not been made
→ Continue to SPECIALIST

Post-16

Specialist

Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Physical needs cannot be met within mainstream setting due to complex or vulnerable nature of the young person's condition • Young person requires: - Specialist medical intervention - Manual handling e.g. hoists, changing plinths - Change of position during the day into specialist equipment - Adult support for independence and self-care - Educational environment which allows easy access moving around indoors and outdoors	• Lecturer / tutor, additional learning support team, young person and parents continue to liaise on a regular basis – minimum of 3 meetings with parents within a 12 month period If necessary: • Obtain and record updated young person's views • Obtain and record updated parents' views • Record young person as having an EHC Plan on Individual Learner Record (ILR) • Refer to described outcomes and provision in the young person's individual EHC Plan and implement • Continue to plan, do, review against the specified outcomes and provision within the young person's EHC Plan • Complete Annual Review of the EHC Plan • Liaise with named local authority SEND Key Worker if young person if needs change etc. • Continue to act on advice from internal and external education and health professionals, as necessary	• Use specialist equipment for manual handling/ changing, as required • Implement individualised health care plan • Implement individualised postural management programme • Provide access to hydrotherapy if appropriate to their medical needs and physiotherapy intervention plan

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
	• Carry out further assessments following advice and guidance from outside agencies • Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision (see finance section) • Ensure all staff receive Continuing Professional Development (CPD) and training as required If young person is under 18 years old: • Refer to the Timely Support for Families in CE - Guidance on Thresholds of Need March 2018 (cheshireeast.gov.uk) document published by Cheshire East Local Safeguarding Children Board (LSCB) and children's services to consider the appropriate levels of support for the young person and their family	

Evidence of Graduated Approach ***How do we track and record progress and outcomes?***

• EHC Plan (reviewed annually, and updated if appropriate)
 	
• Preparing for Adulthood (PfA) Transition Plan which is a working document and acts an ongoing record updated regularly for the following:
  • Record of young person's views
  • Record of parental views
  • Smaller, SMART targets for young person based on outcomes described in EHCP
  • Record of implemented and reviewed resources and strategies - including resulting impact and progress (plan, do, review)
  • Record of external agencies involved in supporting young person
 	
• Ongoing, collated assessment data from a range of sources (e.g. lecturer/tutor and additional learning support team)
• Schedule 2 document outlining specific amounts (times and costs) of support in place
• Record of any external support, contact or advice, which has been implemented and reviewed, e.g. reports, assessments
• Meeting log with young person/parents (if appropriate) - minimum of 3 meetings within a 12 month period to support assess, plan, do and review cycle

13.1. Introduction Ordinarily Available Inclusive Provision (OAIP) and Preparing for Adulthood (PfA)

This section should be used by Post 16 education providers and is described below as that delivered via 6th Form Colleges, Further Education (FE) Colleges, Specialist Colleges, Apprenticeships and Training Providers. Supporting young people working towards adulthood.

Using the Graduated Approach means recognising there is a continuum of need and that needs are met through the addition of increasingly specialist interventions as the level of need increases. In line with *The SEND Code of Practice (January 2015)*.

13.2. What is Oridnarily Available Inclusive Provision?

Support for all young people in post 16 provision starts with **Quality First Teaching/Ordinarily Available Inclusive Provision**.

This describes what should be on offer for all young people: i.e. the effective inclusion of all young people in high quality, every day, personalised teaching.

Such teaching will, for example, be based on:
- clear objectives shared with young people
- careful explanation of new vocabulary
- lively interactive teaching styles

Approaches like these are the best way to reduce, from the start, the number of young people who need additional help with learning and behaviour.

What does Ordinarily Available Inclusive Provision (OAIP) look like?

As a simple overview, OAIP involves the following:

- Well organized classroom with labels and picture symbols.
- Clear lesson structure with objectives presented orally and visually.
- Instructions given in small chunks with visual clues.
- Understanding is checked by asking young people to explain what they must do.
- Young people demonstrate understanding in a variety of ways.
- Peer groupings are varied and fluid.
- Interspersed Activities and listening to allow for varied 'kinaesthetic' approaches.
- Praise is specific and named.
- Memory supported by explicit demonstration and modelling.
- Classroom support planned for and used to maximise learning.
- Young people are clear what is expected and good examples are used when necessary.

More detailed examples and information about what OAIP looks like for the different areas of need is provided at the beginning of each area of need in the graduated approach charts.

Post 16 Providers

Ordinarily Available Inclusive Provision

Cognition and Learning

Impact on Learning *What are we seeing?*	Response *What should we and who should be doing it*	Strategies *What can we put in place?*
Young people may present with some of the following in the whole class teaching/environment: • Sometimes has an inconsistent recall of learning • Possible task avoidance or non-finishing or finishing quickly • Slow to begin tasks or looking for support to start • Instructions may only be partially followed • Takes time to think before starting a task or following an instruction • Checks around the room for what others are doing • Copies peers' work or task. • Missing the right resources or no resources to start a task • Constant repetition of task instruction e.g. write the date • Difficulties with copying or place keeping when writing • Shares ideas immediately i.e. shouts out • Looks anxious when starting an activity • Fidgeting Fidgets or gets up to move around • Can be distracted or distracts others	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual young people, is the starting point in responding to young people who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all young people, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable young people and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for young people and young people with SEN. Further guidance can be found at: Professional Standards for Teachers and Trainers (et-foundation.co.uk)	• Differentiated curriculum planning, multi-sensory activities, delivery, and outcome • In-class targeted teacher support and modelling • Increased visual aids – timetables, images, timer, strategy reminders 3B4ME etc • Illustrated/ACE dictionaries/working walls • Match understanding to difficulty and level of text • Literacy/Alphabet/Vocabulary Mats/writing frames • Pre-teaching/ revision/ ongoing retrieval of subject vocabulary and knowledge • Use of individual name to focus attention • Instructions broken down into manageable chunks and given in sequence and time to process • Teach sequencing as a skill e.g. sequencing stories, alphabet, instructions etc. • Encourage young people to explain what they need do to check task understanding • Resources, equipment, homework diaries make use of consistent symbols and colour coding • Make links to prior learning explicit • Review key learning points at appropriate times during and at end of lesson

Impact on Learning *What are we seeing?*	Response *What should we and who should be doing it*	Strategies *What can we put in place?*
• Difficulties with recognising and applying related facts • Requires learning to be presented the same way consistently • Doesn't easily link learning or each aspect of learning is isolated		• Alternative ways to demonstrate understanding e.g. diagrams, mind maps, use of voice recorders • Mark writing for content - encourage young people to highlight one or two words themselves that may be incorrect to be looked at later • Use IT programs and apps to reinforce and revise what has been taught • To support short term memory, have small whiteboards and pens/ paper available for notes, to try out spellings, record ideas etc. • Texts which reflect interest and age range - good range of 'hi-lo' (high interest, low reading age) available • Present Text clearly - uncluttered, use bullet points and clear font • Accompany text with diagrams and pictures to support comprehension • Cloze procedure exercises to vary writing tasks and demonstrate understanding • Don't ask pupil to read aloud in class unless you know they have pre-prepared and are comfortable with this • Numeracy/number/symbol Mats/100 square etc • Use different coloured pens to support learning spellings, identifying different sections of text, one colour for each sentence etc. • Mark starting point for each line with a green dot or highlight each line • Minimise copying from the board - provide copies for young people if necessary

Post 16 Providers

Ordinarily Available Inclusive Provision

Communication and Interaction

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Young people may present with some of the following in the whole class teaching/environment: • At times, may misunderstand the unspoken rules of social communication e.g. waiting to speak • Does not always listen to instructions • Overshares information or goes off topic • May not contribute or contribute too much in paired / shared work • Gives too much or too little eye contact • Misreads situations and acts inappropriately • Difficulties with understanding body language and facial expressions • Shares inappropriate information or use of inappropriate voice tone and intonation • Misinterprets intention when someone speaks e.g. It's cold outside means go and get your coat • Difficulty understanding vocabulary especially new information • Difficulty using correct word in correct context • May struggle to follow a set of instructions • May forget unfamiliar words • Uses nonspecific vocabulary e.g. '*thingy, whatsit*' • Overuse of gesture to support verbal communication	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual young people, is the starting point in responding to young people who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all young people, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable young people and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for young people and young people with SEN. Further guidance can be found at: Professional Standards for Teachers and Trainers (et-foundation.co.uk)	• Display photographs of staff and young people in foyer and classrooms • Display, teach, model, and regularly reinforce 'Rules' of good listening • Ensure young people are aware of pre-arranged cues for active listening (e.g. symbol, prompt card) • Emphasise key words/vocabulary when speaking and display visually with picture cues • Use a range of multi-sensory approaches to support spoken language e.g. symbols, pictures, concrete apparatus, artefacts, role-play • Break down instructions into manageable chunks and give them in the order they are to be completed by • Provide conversation starters and finishers • Teach idioms in context • Classify groups of words e.g. animals • Slow down delivery of information and give time to allow processing • Give young people a demonstration of what is expected • Use a system of visual feedback to show if something has been understood • Encourage and show young people how to seek clarification

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Doesn't always understand jokes or sarcasm • Difficulties understanding semantic links e.g. which things go together- shoe and foot • Uses limited languages or closed answers • Fidgets and has a need to move around • Difficulty following or completing instructions • Flits between conversations topics or activities • Relies on nonverbal communication methods • Anxiety increases when asked to speak in front of others • May appear to ignore others		• Use narrative frame prompt cards (who, where, when, what happened etc.) to support understanding of question words • Encourage responses through talking buddies or similar peer influences • Support young people to ask and answer questions • 'Word walls', mats or similar, to develop understanding of new vocabulary • Advise parents of new vocabulary so it can be reinforced at home • Minimise use of abstract language • Set a clear role and purpose in group work • Use names to communicate individual instruction or regain attention • Give a synopsis or 'gist' of what's coming e.g. when reading texts • Consider possible warning or provide questions in advance

Post 16 Providers

Ordinarily Available Inclusive Provision

Social, Emotional and Mental Health Difficulties

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
Young people may present with some of the following in the whole class teaching/environment: • Difficulty with recognising and managing own emotions • Disproportionate response to situations e.g. not sharing equipment • Difficulty identifying and responding to others' emotions • Observed mood changes • Finds it challenging to accept compliments or praise • Overcritical of self or negative scenarios • Lack of confidence/ self-worth • Unable to make decisions • Reluctant to try new things in case of failure • Limited contact or engagement with peers • Avoids adult or peer interaction • Over reliant on adult or peer interaction • May want to lead or control things • Appears anxious or on edge • May be reluctant to try new things • May share feelings of being ill e.g. headache, tummy ache more frequently • Gives in easily • Gets frustrated	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual young people, is the starting point in responding to young people who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all young people, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable young people and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for young people and young people with SEN. Further guidance can be found at: Professional Standards for Teachers and Trainers (et-foundation.co.uk)	• Ensure Maslow's hierarchy of need is met • Take time to find pupil's strengths and praise these – ensure that the pupil has opportunities to demonstrate their skills to maintain self-confidence • Play calming music where appropriate • Provide lots of opportunities for multi-sensory learning e.g. practical activities, experiential learning, multi-sensory resources • Use interactive strategies e.g. young people have cards/whiteboards to hold up answers, come to the front to take a role etc. • Make expectations for behaviour explicit by giving clear targets, explanations and modelling • Model pair/share or use post-it notes for questions and ideas rather than interruptions • Ensure that equipment and/or tools are easily accessible and available for use • Give a set time for written work and do not extend into breaks to 'catch up' • Make use of different seating and grouping arrangements for different activities • Communicate in a calm, clear and positive manner • Teach emotional regulation and strategies • Possible exit strategy pre agreed

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Limited facial expression, eye contact • Unusual reactions and states of arousal • Doesn't seek or ask for help • Use of inappropriate language		• Organise classroom to promote young people to regulate, reflect and reconnect • Provide a class wellbeing/sensory box or mental health first aid kit • Adults model its ok to make mistakes or to apologise and talk through how to recover from making mistakes • Keep young people in mind, build relationships by asking about their experiences • Clear, appropriate success criteria that can be reviewed by young people to develop positive self esteem • Positive affirmations • Planned quiet times during the day • Scaffolded activities and turn taking • Apply social routines – familiar words to greet or a happy glance or rehearsed chat – what did you do today? • Model social etiquette • Provide clear, consistent boundaries • Provide and talk through breakdown of the day with visuals to support • Provide pre warnings for when tasks are to finish • Break down transition times to reduce anxiety and overload

Post 16 Provision

Ordinarily Available Inclusive Provision

Sensory & Physical Needs

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
We may be seeing some of the following in whole class teaching/environment: **Visual Impairment:** • Some young people may be able to see quite small print on the page but maybe unable to see at a distance, while for others the opposite may be true • May have difficulty with tasks involving reading, writing or close observation • May struggle to clearly visualise things of varying colour or busy backgrounds • May struggle to adapt with changes to lighting within the environment **Hearing Impairment** • May struggle to hear in noisy classroom or if sat at the back of the classroom • Unable to follow whispered conversations • May have difficulty following group conversations • May disengage with conversations or misinterpret discussions • Environmental noises may impact on focus **Sensory Processing**	OAIP/QFT is referred to in the Special Educational Needs and Disability Code of Practice: 0 to 25 years. On page 99, it states: 'High quality teaching, differentiated for individual young people, is the starting point in responding to young people who have or may have SEND. Additional intervention and SEND support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all young people, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable young people and their knowledge of the SEN most frequently encountered.' OAIP/QFT supports the graduated response for young people and young people with SEN. Further guidance can be found at: Professional Standards for Teachers and Trainers (et-foundation.co.uk)	**Visual Impairment** • Give as many first hand 'real' multi-sensory experiences as possible • Ensure correct seating in relation to board, whiteboard, Smartboard • Consider lighting such as natural and artificial – which is most comfortable? • Avoid shiny surfaces which may reflect light and cause dazzle • Always uses verbal explanations when demonstrating to the class. Read out aloud as you write on the board • Provide accessible materials to reduce copying from board etc • Consider using neutral backgrounds for displays and presentations or board work **Hearing Impairment** • Keep background noise to a minimum • Speak clearly and slow down speech rate a little, but keep natural fluency • Model and teach careful listening along with signals when careful listening is required • Occasionally check that oral information/instructions have been understood • Face the young person when speaking

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
• Young person may appear clumsy or bump into things • Fidgets or fiddles with objects • Hums • Chews pencils or clothing • Unaware of own and others personal space • General discomfort in uniform • May struggle to sit still or lean against others or objects • Likes or dislikes certain smells • May have same snacks and lunches • May need toilet at the last minute • May not identify when too hot/cold **Physical** • Difficulty holding pencils, scissors, cutlery, or smaller equipment • May find buttons or zips etc tricky • Too much or little pressure when writing • Poor core strength – appears floppy • Struggles to navigate space • Struggles with climbing or balancing		• Divide listening time into short chunks • Ensure new vocab is pre taught • Provide visuals linked to auditory information • Use of subtitles on videos • Consider environmental audit • Place young people near the front **Sensory Processing** • Adjust classroom lighting • Clear uncluttered displays and classroom environment • Resources to support reduction or meet sensory need e.g. headphones, fidget items, sensory box, short breaks, • Avoid strong smells – where possible • Multi-Sensory experiences • Discuss appropriate clothing for course content • Put in place activities to support transition bearing in mind sensory needs • Discrete toilet / break out words **Physical** • Consider organisation of classroom • Ensure that left and right-handed young people are not sitting next to each other with writing hands adjacent • Provide appropriate equipment e.g. pencils, scissors etc • Seating should allow pupil to rest both feet flat on the floor – check chair heights • Desk should be at elbow height

Impact on Learning *What are we seeing?*	Response *What should we do next?*	Strategies *What can we put in place?*
		• Position so pupil can view the teacher directly without turning the body – close enough to see and hear instructions • Seat where there are minimal distractions e.g. away from windows and doors • Mark starting point for each line with a green dot • Equipment clearly labelled and kept in same place in class

14. Transition between educational settings

14.1. Role of the educational setting

There are some common steps expected of all educational settings whenever a child or young person with SEND is approaching a key transition between educational settings, regardless of whether the child or young person is leaving an early years setting, primary or secondary school.

Where a child or young person with SEND will be **joining** a new setting, it is expected that, wherever possible, the setting will:

- Offer an informal tour and/or visit to the setting to the child or young person and their parents
- For children and young people with complex and specialist needs, offer a transition meeting between the child or young person, their parents and the SENCO/additional learning support team. This should include the SENCO/additional learning support team from the child or young person's previous setting (if required/appropriate)
- Ensure you have any SEND paperwork for the child or young person from any previous setting (if necessary/appropriate)

Where a child or young person with SEND will be **leaving** a setting, it is expected that, wherever possible, the setting will:

- For children and young people with complex and specialist needs, liaise with the SENCO/additional learning support team at the new setting. This may include attending a transition meeting with staff from the new setting and the child or young person and their parents.
- Pass on all SEND related paperwork for the child or young person to the next setting (including any First Concerns or SEN Support paperwork; this would require consent from the young person in post-16 settings)
- Enable transition visits to the new setting for the child or young person.

14.2. Role of the Local Authority and multi-agency working

a) Transition in the early years (including transition into a setting)

Transition should be seen as a process not an event, and should be planned for and discussed with children and parents. Settings should communicate information which will secure continuity of experience for the child between settings.

Early Years Foundation Stage Practice Guidance 2008

There are a number of key transition times for children within the early years: from home into an early years setting, moving between rooms, changing providers or moving from a setting to a school. It is important the child is supported throughout this time if they are to have the best possible chance of a smooth transition.

A vital element to smooth transition involves the preparation and planning beforehand as well as the settling in or follow up afterwards. Children with additional needs are likely to require a more detailed level of planning and more time to allow for things to be put in place. It is essential that the process is started early. For children with complex and specialist needs, the Early Years and Childcare team will support the 'Settling In' process.

Children and their parents should be supported through the transition process. As a setting, you may also need some support in initiating a meeting, recording the information discussed and putting agreed actions in place before the change for the child occurs. This support and guidance can be found in The Transition Paperwork which allows you to include important information about the child, their interests, how they communicate, how to support them and details of any other people involved in supporting them.
Planning and preparation for transition into a setting may involve a range of different elements, though these are not necessarily separate activities. They are likely to include:

- Establishing relationships
- Sharing information
- Arranged visits
- Creating continuities
- Preparation in the setting
- Training and support
- Settling in and follow up

(See Section 10 of 'SEN and disability in the early years: A toolkit' by 4Children and the Council for Disabled Children)

Note: The setting needs to have information about the child's health needs and any services which may be involved with the child. It is important to note that the child's development recorded in the Personal Child Health Record (PCHR, also known as the 'red book') will be a key piece of information. This will include assessments by the Health Visitors as part of the Heathy Child programme and also the Progress Check at Age 2.

b) Early Years to Primary school

Wherever possible a meeting should be arranged between the early years setting and the school, with the parents and the child if appropriate. Opportunities for schools to visit settings and vice versa would support the child during this transition process and would enable the school to see how the child learns and develops in the setting. It is also an opportunity for the school staff to meet the child and their parents and can be the start of building up new relationships. If the child has complex/specialist needs, the Early Years Team may play a part in this process. The local authority has produced 'Transition Paperwork' to support you in this process – this is available via Live Well Cheshire East.

c) Primary to Secondary school

For children with an EHC Plan, discussion around the process of primary to secondary transfer starts at the year 5 annual review. The local authority will write to all schools at the beginning of the spring term (commencing April 2018) advising which children's EHC Plans are due for review. All annual reviews for children in year 5 with an EHC Plan should be held in the spring term and should consider what will needed upon secondary transfer. 0-25 SEND Officers will liaise with their link schools and may attend annual review meetings if both the school and the 0-25 SEND Officer agree that attendance is necessary.

When deciding on a school, parents/carers should first give consideration to their child attending their local, priority area mainstream school. This is line with *The SEND Code of Practice* which stipulates the right to mainstream education for all children. Cheshire East Council is committed to considering what additional support can be offered to assist mainstream schools in making the "reasonable

steps" required by legislation to ensure that children with SEND are not disadvantaged, and this will be considered prior to any agreement for a more specialist placement. Research suggests that children are in a better position to learn when they are not spending a significant amount of time travelling to school. Parents/carers with children who are eligible for transport will also need to be aware that, if they do wish for their son or daughter to attend a school which is not nearest their home address, transport will not be provided in line with the transport policy.

Key information for all phase transitions for children and young people with EHC Plans (including early years to primary school, primary to secondary school and secondary to post-16):

It is helpful for young people, parents and carers to have thought about the transfer and have made any required visits prior to the annual review meeting that takes place in the academic year before transfer (e.g. this would be the year 5 annual review for a child due to transfer to secondary school). They should inform the child or young person's current educational setting of their wishes prior to this review also. This will help to ensure that educational settings can arrange appropriate attendance at the annual review meeting from staff who will work with the child at their next educational setting, thereby facilitating a well-planned transition. The local authority will then write to parents/carers of children or young people at the beginning of September in the year of transfer (e.g. year 6 for children moving into secondary school) asking for confirmation of their preference and would encourage completion of the online application form as soon as possible. This will help to ensure that educational settings are identified in as timely a manner as possible. All local authorities are tasked with using resources (including financial) as efficiently as possible and avoiding unreasonable public expenditure. If after an annual review return is submitted (which includes external agency advice, such as advice from an Educational Psychologist or the Cheshire East Autism Team after their lengthy and substantial involvement), the local authority agree a more specialist placement, Cheshire East specialist provision will be the first consideration (see the Cheshire East Local Offer for an overview of Specialist Education Provision in Cheshire East). If the local authority determines that a Cheshire East school is not an available option, approaches will then be made to other local authorities with appropriate special schools before any consideration of independent special provisions. Distance from the child's home address and associated transport costs will also be considered.

d) Preparing for adulthood (PfA)

Preparing for adulthood (PfA) starts in the early years and aims to support children and young people to understand and know themselves, and apply this self-knowledge in order to identify their individual aspirations, hopes and ambitions for adulthood. This sense of self-knowledge (i.e. understanding your own values, interests, motivators, strengths etc.) starts early in life and is built upon as an individual develops throughout their education, career and beyond. PfA also supports children and young people to work towards their individual aspirations by empowering them to make realistic and individual choices about their futures, by providing them with the appropriate information and skills.

For a child or young person with an EHC Plan, the focus of the annual review of their EHC Plan in Year 9 must be on the PfA outcomes (though all content of the EHC Plan should be reviewed). At this review, the **Preparing for Adulthood (PfA) Transition Plan** will be introduced to parents/carers and the young person. The young person and their parents/carers will then work together with the

Senior Young Person's Adviser, the 0-25 SEND Officer and the school to look at the young person's options following year 11 (including potential courses and qualifications that are on offer), along with any application timescales. The PfA Transition Plan should build upon and collate information relating to the young person's ideas and ambitions and also review the 4 national PfA outcomes, namely:

1. Employment and Higher Education
2. Independent living
3. Participation in society
4. Being as healthy as possible in adult life

Once it is in place, the PfA Transition Plan will be reviewed alongside the young person's EHC Plan, i.e. at each annual review of the EHC Plan. The main outcomes and associated provision will be updated in the EHC plan as part of the annual review paperwork. The annual review provides an opportunity to focus the ambitions and aspirations of the young person.

When deciding the next stage of education, consideration should be given to attending local provision. This is line with *The SEND Code of Practice: 0-25 years (January 2015)* which stipulates the right to mainstream education for all children and young people. Cheshire East Council is committed to considering what additional support can be offered to assist mainstream educational settings in making the "reasonable steps" required by legislation to ensure that young people with SEND are not disadvantaged, and this will be a consideration prior to an agreement for a more specialist placement.

In Year 11, final decisions will be made for either 6th forms, colleges or training providers and the EHC Plan will be updated. The local authority will review the potential next placement – this is because local authorities are tasked with using all resources (including financial) as efficiently as possible and avoiding unreasonable public expenditure. Distance from the home address and associated transport costs will also be considered.

The local authority is required to update the EHC Plan and name the new education provider by the 31st March in the leaving year. The EHC Plan will be sent to the new education provider and transition arrangements will be discussed prior to the young person starting with their new college or training provider.

15. An overview of SEN Funding

Local Offer: Please refer to the Money and benefits section of the Cheshire East Local Offer for SEND for full details of SEN funding. This section is intended to provide a brief overview only.

15.1. Funding in mainstream provision

a) Early Years

Universal **First Concerns**	For each child, Early Years settings receive a basic per pupil rate per hour to fund the child's place at the setting.
SEN Support	• SEN Inclusion – Low Level may be available for 2,3- and 4-year-olds accessing Free Early Education Entitlement • Disability Access Fund – available for a child accessing the Free Early Education Entitlement who receives Disability Living Allowance. • Early Years Equipment Fund – available to purchase specific equipment as recommended by a Health Professional to support children to access the Free Early Education Entitlement
Complex **Specialist**	• SEN Inclusion – High Level may be available for 2,3- and 4-year-olds accessing FEEE • Disability Access Fund – available for a child accessing the Free Early Education Entitlement (FEEE) who receives Disability Living Allowance. • Early Years Equipment Fund – available to purchase specific equipment as recommended by a Health Professional to support children to access the Free Early Education Entitlement. • **'Top up' funding** is provided for children with an Education, Health and Care (EHC) Plan from the Local Authority's High Needs budget. This funding relates to an individual pupil and the amount allocated is defined by the individual child's needs and agreed provision, as described in their EHC Plan.

b) Schools

Universal	As part of their delegated budget, all schools receive basic funding for every pupil known as the AWPU (Age Weighted Pupil Unit). The AWPU amount is determined each year as part of the schools funding formula and varies according to age. In addition to the AWPU amount for each pupil, schools also each receive funding for other pupil characteristics such as deprivation and a lump sum amount for the school as a whole.
First Concerns **SEN Support**	Each school's delegated budget includes a notional SEN allocation . Nationally, schools are required to fund the first **£6,000** of additional costs per child or young person with SEN; this funding is used to implement strategies such as resources and/or additional support (for the latter, in Cheshire East this is currently equivalent to 12 hours of funding at £514 an hour). Some pupils with SEN will also be eligible for additional funding, such as Pupil Premium.
Complex	In mainstream schools, **'Top up' funding** is provided for children and young people with an EHC Plan from the Local Authority's High Needs budget. This funding relates to an individual pupil and the amount allocated is defined by the individual pupil's needs and agreed provision, as described in their EHC Plan. This top-up funding is used along with universal funding (AWPU,lump sum etc) and £6,000 from the school's SEN funding to provide the provision described with the pupil's EHC Plan. Top-up funding is provided to the school for the time a pupil attends that particular school (part-time places are funded accordingly). If a Cheshire East school has a child from another local authority attending their school, the school will have to claim 'Top up' funding directly from the other Local Authority.
Specialist	Resource Provision and Special schools are funded differently to mainstream schools (see section 12.2).

c) Post-16

Universal	Post-16 providers receive course funding for every young person under the age of 19 that is enrolled on a course at their setting.
First Concerns **SEN Support**	Post-16 providers are required to fund the first £6,000 of additional costs per young person with SEN; this funding is used to implement strategies such as resources and/or additional support (for the latter, in Cheshire East this is currently equivalent to 12 hours of funding at £514 an hour). Post-16 providers receive funding for young people with SEN within their core funding (described as "Element 1" funding). For young people with SEN whose support costs are lower than £6,000, this funding is provided within the disadvantage funding element of the mainstream 16 to 19 funding allocation. In addition, post-16 providers receive additional funding (described as "Element 2" funding) for a set number of commissioned places in agreement with the Local Authority. This element 2 funding provides £6,000 towards the additional support costs for high needs students.
Complex	In mainstream educational settings, **'Top up' funding** is provided for young people with an EHC Plan from the Local Authority's High Needs budget. This funding relates to an individual student and the amount allocated is defined by the individual student's needs and agreed provision, as described in their EHC Plan. This top-up funding is used along with universal funding (course funding) and £6,000 from the provider's "Element 2" funding to provide the provision described with the student's EHC Plan. If a post-16 provider based in Cheshire East has a young person from another local authority attending their setting, the provider will have to claim 'Top up' funding directly from the other Local Authority.
Specialist	Section 12.2 describes funding arrangements for special post-16 institutions.

15.2. Funding in resource and specialist provision

Local Offer: Please refer to the Specialist Education Provision in Cheshire East page of the Local Offer for an overview of resource provision and special schools that are available within Cheshire East.

a) Funding for Resource Provisions

There are currently 15 schools with resource provisions in Cheshire East (plus 1 school with an SEN Unit). Each specialises in a particular type (or types) of SEN, for example: Hearing Impairment (HI), Autistic Spectrum Condition (ASC) or Social, Emotional and Mental Health (SEMH). These schools are funded for pupils in the provision in a different way to top up funding. A recent Government decision has implemented a national change which means that, from the 2018/2019 academic year, resource provision places will be funded as follows:

- **Place funding**: The school receives approximately £10,000 per agreed place in the provision (comprised of a notional amount of approximately £4,000 within school block funding, and £6,000 High Needs Funding if the place is occupied; for an unoccupied place; this is £10,000 High Needs Funding)
  Plus
- **Pupil funding**: The school receives an additional £10,000 - £10,500 (depending on type of need) for each child or young person actually attending the provision

Therefore, a school with a resource provision will receive a total of approximately £20,000 – £20,500 funding for each pupil within the resource provision. The number of places available in a provision is determined by the size of provision and its resources (e.g. specialist staff, the demands for places etc.) and is detailed within a Local Authority to school agreement.
For example: A 10 place HI resource provision has 9 full time pupils attending.

Funding = £100,000 place funding + £90,000 pupil funding
Funding Total for the resource provision = £190,000

If a Cheshire East school with resource provision has a pupil from another Local Authority area within the provision, the school will be required to claim pupil funding from the other Local Authority.

If a resource provision school goes over the number of allocated places available as agreed by the Local Authority and the school, the school will only be guaranteed funding for the agreed places for that year. The school would have to seek a new agreement to also get the additional place funding for any pupil above the agreed place number.

b) Funding for Special Schools

Special schools specialise in meeting particular types of SEN and are funded in a similar way to a resource provision:

- **Place funding**: The school receives £10,000 per potentially available place in the school.
  Plus
- **Pupil funding**: The school receives an additional amount for each child or young person actually attending the school. The amount per child or young person in the school differs according to the type of SEN that the school specialises in.

Note on academy schools: Special or resource provision schools who are an academy are directly funded by the Education & Skills Funding Agency (EFSA) for the places as agreed and submitted by the Local Authority in November for the following September. The Local Authority then directly funds the pupil element of the funding each term.

This section does not describe funding arrangements for independent special schools, as these sit outside the national ESFA high needs place funding system.

c) Funding for special post-16 institutions

Special post-16 institutions are funded based on:

- Student numbers ('Element 1')
  Plus
- High need places ('Element 2')
  Plus
- Top-up funding for individual young people

The numbers for each institution are based upon the numbers recorded in the previous academic year's Individual Learner Record (ILR) data return.

16. Education, Health and Care Need Assessments

The SEND Code of Practice (January 2015) stipulates that all mainstream educational settings have a duty to use their best endeavours to provide support to children and young people with SEN, whether or not they have an EHC plan.

Education, Health and Care (EHC) Needs Assessments are undertaken for children and young people with significant special educational needs. EHC Needs Assessments can be undertaken when there is evidence that, despite the educational setting taking relevant and purposeful action to identify, assess and meet the special educational needs of a child or young person, the difficulties remain or have not been remedied sufficiently. EHC Needs Assessments are a multi-agency investigation that aims to define the long-term needs of a child or young person. It may or may not result in an Education, Health and Care Plan being drawn up. It may, or may not, be linked to High Needs Funding.

16.1. Requesting an EHC needs assessment

For the local authority to decide that an EHC Needs Assessment is necessary, advice from the educational setting about the following would be beneficial, where available, to inform the decision-making process:

- The educational setting's actions through use of their delegated budget/notional SEN (Early Years)
- Evidence from the educational setting's provision map or from a Developmental Profile (Early Years)
- Tracking and progress data/information identified through child/young person-centred planning (i.e. "Assess, Plan, Do, Review") to provide a holistic outline of the child/young person's current progress
- Records of regular reviews and their outcomes
- Data relating to progress and attainment, including attainment in literacy and maths and other areas of difficulty
- Assessments/advice/guidance relating to education and any other assessments/advice/guidance (e.g. from an Educational Psychologist (EP); advisory special support teacher/service; Speech and Language Therapy (SALT), Occupational Therapy etc.). It is good practice that these are accompanied with evidence that strategies advised by the external professional have been implemented, reviewed, evaluated and adapted accordingly, with further specialist advice sought if progress is not evident. All new advice and recommendations should be incorporated into the SEN Support Plan and have had enough time for the benefits of the additional advice to have been reviewed as to its contribution to meeting need
- Views and aspirations of the parent and of the child/young person (in the relevant "All about me" sections for the child or young person and their parents in the SEN Support Plan)
- The child or young person's health, including their medical history where relevant
- Involvement of other professionals e.g. any involvement of social care and health services to date
- The nature, extent and context of SEN

An SEN Support Plan that is completed in sufficient detail and reviewed regularly should contain much of the recommended information listed above. As a result, educational settings are asked, where possible, to submit the following documents when requesting an EHC needs assessment:

1. A completed **SEN Support Plan** which has been reviewed regularly. It is expected that reviews will be held more regularly in circumstances in which it is clear that the suggested interventions are not meeting the identified needs as well as they could be, and further external agency specialist advice has been obtained.

2. A **costed provision map or development profile** which outlines the total additional support and resources provided to the child or young person by the educational setting.

3. A **knowledge and agreement form** completed by the young person and/or their parents, which indicates that they are aware of the EHC needs assessment and the gathering and sharing of information required for the EHC needs assessment. Note that if the request is for a young person aged over 16, this form should be shared with and signed by the young person themselves, as appropriate.

4. A completed '**One Minute Guide to suggested supporting documents** for educational settings submitting Education, Health and Care (EHC) Needs Assessment requests', along with any documents suggested in the guide that settings are able to share (e.g. assessment results, reports or referrals, where available).

Blank templates for the above documents can be found within the Cheshire East Local Offer (educational settings can use their own provision map templates).

Points to note regarding EHC needs assessments:

- The reference to 'relevant and purposeful action' on the previous page includes seeking advice and guidance from applicable professionals and that suggested recommendations and interventions have been incorporated in 'Assess, Plan, Do, Review' cycles wherever possible.
- There is no need to include documentation older than 12 months, unless they include information about diagnosis/diagnoses - though older reports could be referenced.
- As part of best practice, educational setting requests should be discussed with a Cheshire East Educational Psychologist prior to their submission. If advice has been gained from an Educational Psychologist through consultation, this should be submitted as part of the EHC Needs Assessment request.
- Where children and young people are approaching a transition (e.g. moving into primary school, secondary school or post-16 education) and an EHC needs assessment may be required to support their successful transition, it would be best practice to submit the request for the EHC needs assessment in as timely a manner as possible (e.g. in year 5 ahead of a transition to secondary school); however we understand that this may not always be possible.

16.2. Who will be involved in the assessment?

There are several agencies that local authorities must seek information from to contribute to the education, health and care needs assessment (these can be found in paragraph 9.49 of *The SEND Code of Practice: 0-25 years (January 2015)*). Local authorities must not seek further advice if it has already been provided and all parties are satisfied that it is sufficient for the assessment process. The named Locality Authority Officer will discuss this with all parties involved.

Parents/carers can request that any other person be consulted for information where the local authority considers it reasonable to do so. Examples of this may include another party who has had recent experience of the child or young person in the last 12 months. The local authority would not usually seek to commission new assessments from professionals (e.g. an Occupational Therapist) with whom the child/young person is not currently working, unless circumstances warrant it.

When all of the information requested as part of the Education, Health and Care Needs Assessment has been received, the named Locality Authority Officer will meet/make contact with parents/carers and the child or young person as part of the working together/co-production meetings. If the decision is taken that special educational provision is necessary, the co-produced document will form the basis of an Education, Health and Care Plan (EHCP). If the decision is made that an EHC Plan is not necessary, the named Locality Authority Officer will meet with parents/carers and the educational setting and discuss implementation of an updated SEN Support Plan informed by the findings of the assessment.

Please send all requests for EHC Needs Assessments as a Word document to the SEN Team via SENTeamEast@cheshireeast.gov.uk. There is no need to copy in other members of the Team. You will receive a response acknowledging your request.

All decisions relating to EHC Needs Assessments are made by multi-agency panels comprising of representatives from across health and social care, school representatives, an educational psychologist, and a SEND management representative. To ensure that decisions are made by the most appropriate representatives, there are different panels with specific purposes as follows:

- A panel for decisions relating to specific early years funding streams
- A panel for early years and school-age EHC needs assessment decisions
- A post-16 panel

An overview of the EHC needs assessment process following a request from an educational setting can be found on the subsequent pages

Requesting an Education, Health and Care (EHC) Needs Assessment

Do we need to request an EHC Needs Assessment?
The educational setting meets with parent carers, the child or young person and other professionals (as appropriate) to decide whether a request for a needs assessment is required

No → **Continue to monitor progress at SEN Support through a process of 'Assess, Plan, Do, Review' with a SEN Support Plan in place.** A request for an EHC Needs Assessment can be re-considered at a later date if difficulties persist

Yes

Submit EHC Needs Assessment request to SEND Team
Request to include all current reports from professionals involved with the child or young person

Day 1

The EHC Needs Assessment request is logged and an acknowledgement letter is sent to confirm receipt to the family

1 Week

The request is reviewed by two 0-25 SEND Officers

Is there enough information in the request?
Are all professional reports included?

No → **Contact is made by the SEND Service**
Contact is made to those making the request and parents/carers explaining the additional information needed.

Yes

1-6 Weeks

Decision is made on whether to carry out an EHC Needs Assessment

No → **SEN Support Plan**
The 0-25 SEND Officer meets with the parents and carers, the young person, the educational setting, and other professionals and reviews the SEN Support Plan. Young Person's and parents/carers rights are confirmed via letter. Educational setting continues to monitor progress through a process of 'Assess, Plan, Do, and Review'. A request for an EHC Needs Assessment can be re-considered at a later date if difficulties persist.

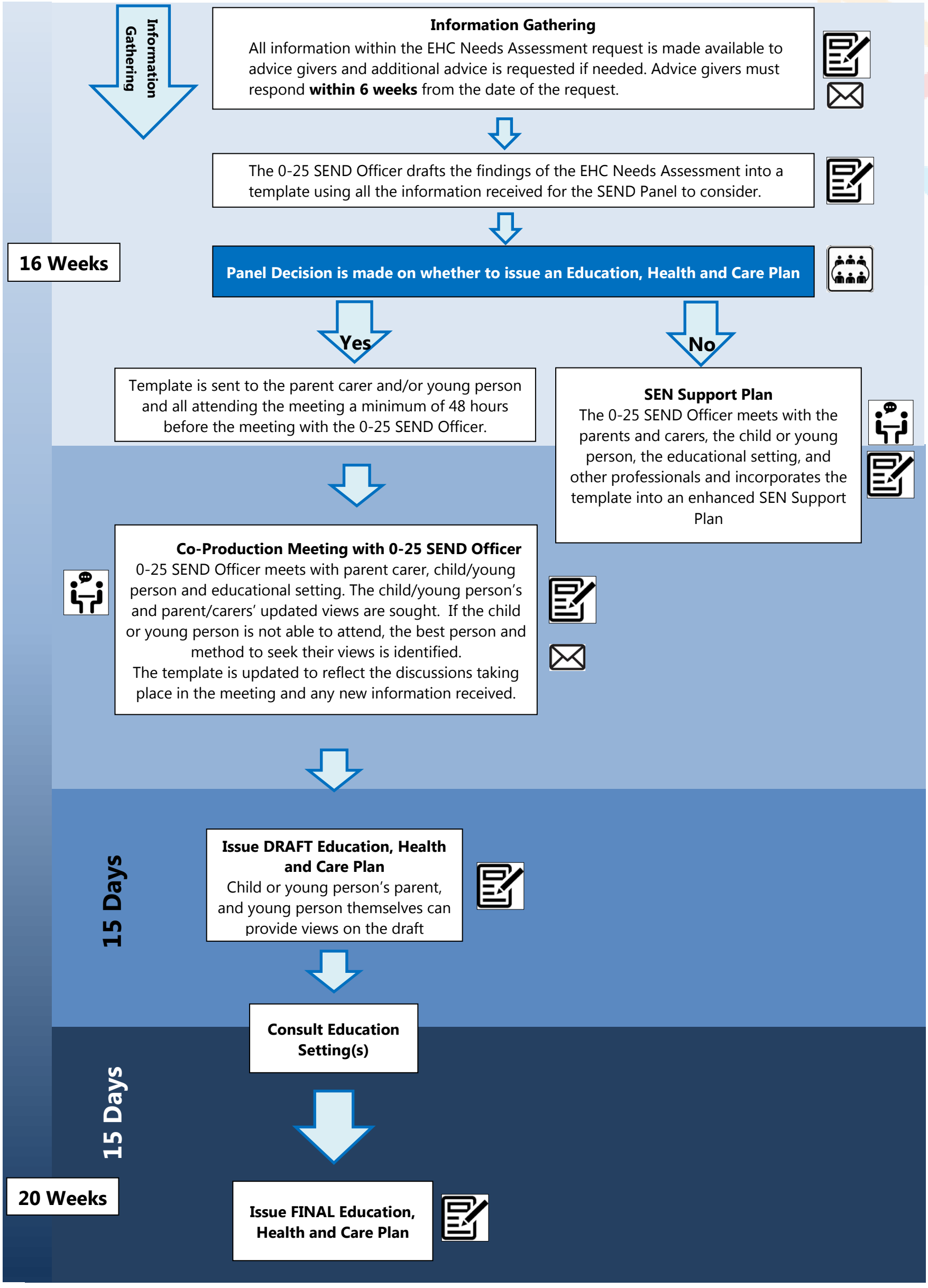
Yes

0-25 SEND Officer contacts family to arrange a meeting to discuss next steps
Timescales and next steps are discussed. Parents/carers are asked if there is any additional information needed from agencies currently involved with the child/young person. 0-25 SEND Officer checks that previously submitted parent carer views are still accurate.

0-25 SEND Officer explains Independent Supporter offer.

Date is set for a further co-production meeting with parent carers, child/young person and educational setting.

Carrying out an Assessment for an Education, Health and Care Plan



The whole process needs to be completed within 20weeks

17. SMART Targets (SMART – Specific, Measurable, Achievable, Realistic, Timely)

17.1. Outcomes and SMART Targets

Before we begin even thinking about setting outcomes and targets, we MUST assess where the starting point is as without a starting point there can be no progress shown. This links to the Code of Practice '**Assess**, Plan, Do, Review'

17.2. Outcomes

Strategic outcomes are what we want to see for all children and young people in our settings. This can be for all children and young people (universal) or all children and young people with SEND, but they must be developed in co-production with children, young people, families and professionals. Outcomes are always big, broad and about living a happier, more fulfilling life. Common themes include:

- Short Term Outcome
- Long Term Outcome

17.3. SMART Targets

Targets are smaller goals which sit underneath the holistic outcomes from the perspective of a particular service. There must be a direct relationship between outcomes and targets. Achieving these targets indicates that the child or young person is getting closer to their outcomes. These are often also called outcomes but we call them targets to avoid confusion. Children at SEN Support and those with and EHCP may require a learning target breaking down into smaller progress steps.

These outcomes and targets need tracking in a way which professionals can understand what progress has been made towards achieving the learning outcome as a whole.

The following pages provide examples of SMART targets covering the four broad areas of need. It is not an exhaustive list just a few examples to share the difference between a target and a SMART target and the language used to explain this.

SMART targets are targets that are Specific, Measurable, Achievable, Realistic and Time bound whilst also being personal to the child

SMART Targets

Cognition and Learning

The following are just a few examples of SMART targets for the broad area of need 'Cognition and Learning'. Examples cover all phases.

Area of need	Example of a target	Example of possible SMART targets	Other information
Reading	Read the high frequency words	To be able to read 5 (state these) of the first 100 high frequency words on 5 occasions over 2 weeks	Attach a list of the HFW to the plan so that they can be highlighted and dated as they are achieved

Other examples of SMART targets:

- Be able to enjoy sharing a picture book for 2 minutes with an adult on 5 occasions over a 2-week period.
- By the end of Spring 1, xxx will be able to read 6/11 Phase 2 words on 5 consecutive occasions.
- Be able to make predictions about what will happen next in a story on 3 separate occasions during a two-week period.
- Be able to make connections between text content and own life experience on 3 separate reading occasions over a one-week period.
- Be able to read and interpret recipe instructions to make a meal once a week for 3 weeks.

Area of need	Example of a target	Example of possible SMART targets	Other information
Writing	Write a sentence	Be able to think of a sentence, say it out loud and then write it down on 5 occasions over 2 weeks	Attach evidence with description of support or adaptations given ie. Sound tins, make or break scaffolding

Other examples:

- Be able to make marks on a page which are symbolic of a circle on 5 occasions over a 2- week period.
- By the end of 6 weeks, be able to form 5 letters of the alphabet, (o, c, a, d, g) using correct cursive direction on three separate occasions.
- By the end of Autumn term be able to think of a sentence, which includes a noun, verb and adjective, write it down, and remember to demarcate with Capital letter and full stop on 5 occasions over a one-week period.
- Independently write a paragraph of at least 5 demarcated sentences related to lesson topic content on 5 occasions by the end of Spring.

- Complete a form fulfilling all required personal key information at least once in a term.

Area of need	Example of a target	Example of possible SMART targets	Other information
Spelling	Accurately spell *CCVC* words.	Apply spelling knowledge practised to the context of own writing correctly spelling *CCVC* words on 3 occasions in an English lesson.	Attach a record of initial blends taught. Cross reference these with YP's writing.

Other examples:

- Be able to identify the initial sound of own name and hear and identify the same initial sound in other words on 5 occasions over a week by the end of Summer term.
- Be able to spell CVC words in any given permutation (real or 'alien') using the letters familiar to them, (s, a, t, p, i, n) by the end of 6 weeks targeted teaching.
- Be able to select the correct grapheme ee/ea from a group of familiar words 3 out of 5 times.
- Write the correct alternative grapheme (I,igh,ie) from a spelling list of 5 words each week 4 out of 5 times.
- Identify a given key word from a topic word mat to use to support accurate spelling in the context of own writing on 5 separate occasions during a 3-week period.
- Be able to use auto correct and select the correct spelling when writing by the next review.

Area of need	Example of a target	Example of possible SMART targets	Other information
Maths	Answer addition and subtraction number sentences	Independently complete 10 addition calculations using numbers within a total of 20 on 5 occasions over a week	Record how these were solved ie. Using manipulatives, number line

Other examples:

- Be able to join in with the song '5 little ducks' using fingers on one hand to represent the correct number of ducks on 3 occasions by the end of Autumn term.

- Independently complete 10 subtraction calculations using numbers up to 20 on 5 occasions over a 3 weeks.
- Given a number up to 200, be able to independently partition into ones tens and hundreds using manipulatives on 5 occasions over a term
- Be able to answer two step word problems involving any of the four operations 4/5 times across a term.

Read a timetable to select the correct bus to be able to arrive at a given time and setting on 3 occasions by the time of next review.

SMART Targets

Communication and Interaction

The following are just a few examples of SMART targets for the broad area of need 'Communication and Interaction'. Examples cover all phases.

Area of need	Example of a target	Example of possible SMART targets	Other information
Social communication	Respond to a greeting.	Verbally respond using appropriate language to a teacher greeting of 'good morning, how are you?' on 5 occasions during the course of 1 week.	How did the YP respond? - did they use the verbal responses taught? Did they answer with a one, two or 3 parts?

Other examples:

- Join in a 1:1 story time to the end of one story 3 times over 2 weeks.
- Ask peers to join in a playtime game 5 times over a 2-week period.
- Make an appropriate comment on a topic of someone else's initiation during 'Toast group' on 3 occasions over two weeks.
- Pass on a message to the office using the correct information and appropriate formality e.g. Excuse me please, … each time sent on an errand.
- Meet up with a friend/s, once a week, to engage in an activity or trip e.g. Go shopping.

Area of need	Example of a target	Example of possible SMART targets	Other information
Expressive Language	Correctly pronounce words using s and sp.	On 5 occasions XXX will be able to recognise *s* and *sp* sounds in speech and recognise when he is saying it correctly by the end of 8 weeks of targeted practise.	Record whether he is hearing or speaking the sounds.

Other examples:

- Be able to express the need to go to the toilet 3 times out of 5 over a week by the end of Spring term.
- Answer 5/ 8 Blank level WWWW questions using near accurate syntax over three sessions by the end of Spring 2.
- Describe a personal event using the beginning, middle and end, (e.g. *what did you do at the weekend*) on 3 occasions over a half term.
- Use appropriate communication to indicate the need to take a break from a whole class situation on 5 occasions over a 2-week period.

Explain how a task has been completed in a workplace or college setting on 3 separate occasions over a 2-week period.

Area of need	Example of a target	Example of possible SMART targets	Other information
Receptive Language	Follow a simple instruction.	Follow the instruction to put on a coat before going outside to play on 3 out of 5 occasions.	Note whether the YP has trouble putting the coast on e.g. They may go to the peg but not action putting the coat on.

Other examples:

- Carry out a direct one-step instruction 4 times out of 5, without re-prompt over a 2-week period.
- Follow a set of two step instructions in a variety of scenarios i.e. Going out to play, transitioning to the next lesson 8 out 10 times over two weeks.
- Demonstrate understanding of prepositional language e.g. Over under, next to, behind, in front when asked 5 different where questions over a 2-week period.
- Answer 3 comprehension WWWW questions based on an unknown factual text on two different occasions over half a term.
- Interpret instructions to undertake and complete a workplace or college task on 3 occasions over a 2-week period.

SMART Targets

Social, Emotional and Mental Health

The following are just a few examples of SMART targets for the broad area of need 'Social, Emotional and Mental Health'. Examples cover all phases.

Area of need	Example of a target	Example of possible SMART targets	Other information
Social skills	Play with a friend.	Choose and ask to play with a friend, playing a pre taught game for 5mins with adult observation 3 times over a two-week period.	The game will need to be familiar to the YP and an adult required to facilitate.

Other examples:

- Independently play alongside a friend sharing the same set of toys for 5mins on 3 separate occasions across a two-week period.
- Join in with a shared/ paired activity at least once per day for a 5-minute period on at least 5 occasions by the end of Autumn half term.
- Take turns as part of a group of 4 in a structured table game supported by an adult for three sessions over a half term.
- Appropriately communicate something is liked or not liked to their key person at least once a week over a half term.

Identify and ask a key person in work or college to support with something they are struggling with on 3 occasions by the end of next review.

Area of need	Example of a target	Example of possible SMART targets	Other information
Emotional wellbeing	Identify a range of emotions.	Be able to identify when feeling upset and articulate this as sad, unhappy, afraid, angry to a key person on 5 occasions over a half term.	Annotate how this is done – verbally, visual emotion cards, signing and who too – adult or peer.

Other examples:

- Indicate through gesture or words what makes them happy on 5 occasions over 2 weeks.

- Identify the 4 basic emotions (happy sad cross tired) and match given scenarios or pictures to these feelings during 3 targeted times over a 6-week period.
- Identify the need for a break and access to an appropriate strategy or tool 3 out 5 times a week to self-regulate.
- Recognise and access a 'safe place' in times of emotional dysregulation 4/5 times over a 6-week period.
- Attend 5/6 weeks of an enjoyable self-care group such as yoga as an activity which will enable emotional well-being by the next review.

SMART Targets

Sensory and Physical

The following are just a few examples of SMART targets for the broad area of need 'Sensory and Physical'. Examples cover all phases.

Area of need	Example of a target	Example of possible SMART targets	Other information
Sensory	Try new foods	Tongue touch two new foods on 3 separate occasions over half a term	Keep a track of which foods have been tested and to what extent

Other examples:

- Be comforted by cuddling a soft toy without being held on 5/ 8 occasions over a 3-week period.
- Pet the school hamster with gentle pressure and a light stroke at every feeding time.
- Engage with chewellery sensory resource 80% of the time, rather than chewing jumper over a 6- week period.
- Communicate the need for a movement break when appropriate and successfully return to task 3 times out of 5.
- Recognise taking 'quiet time' is a preventative measure for becoming overwhelmed/ over stimulated and choose to do this on 5 occasions over a 2-week period.

Area of need	Example of a target	Example of possible SMART targets	Other information
Physical	Can hop.	Can hop 5 paces forward on both left and right leg by the end of half term.	Observe which leg is dominant, what balance issues there may be. Is this achieved holding onto something?

Other examples:

- Jump from the floor with two feet and land with two feet 8/10 attempts over the course of a week.
- Demonstrate a clear choice of preferred hand for writing by picking up a 'pencil' with the same hand 8/10 times observed over a 2-week period.
- Successfully navigate round the classroom furniture without bumping into or touching tables every morning for a 3- week period when lining up.

- Throw a ball under arm 'in wicket' to a batter during cricket 8 out 10 attempts by the end of summer term.
- Attend weekly and enjoy a supportive leisure centre activity which helps maintain a healthy fitness level.

Area of need	Example of a target	Example of possible SMART targets	Other information
Personal health care	Asks to go to the toilet when it is needed.	Indicates the need to go to the toilet using a visual picture 3 times out of 5 over a 2-day period.	Place a visual sequence chart in the cubicle to show each toileting step.

Other examples:

- Successfully notify adults when feeling too hot or too cold 80% of the time by the end of Spring term.
- By the end of half term, washes hands every time without prompting after using the toilet.
- By the end of half term, puts shoes on the correct feet every time using the visual prompt card.
- Arrives at school wearing the agreed clothing as part of adapted daily uniform by the end of half term.

Choose a balanced range of foods to prepare a packed lunch 3 times a week over a 3-week period.

18. Health

18.1. Role of the Designated Clinical Officer (DCO)

The Designated Clinical Officer (DCO) role is a key element in supporting the health service in its implementation of the Children and Families Act.

There are significant requirements on Integrated Care Boards (ICBs), NHS England and health service providers following the Act.

The DCO has a key role to play in supporting local arrangements in the following ways:

- Oversight across health services delivering healthcare to individual disabled children, young people and those with special educational needs. This includes oversight and assurance of health provision specified in EHC Plans, provision of information and advice in the Local Offer on available health services for children and young people with SEN and disability, their parents and those who may care for them or want to refer them for assessment, working with schools to support pupils with medical conditions.
- Coordination to ensure all health services are reflected in the Local Offer and that health providers are cooperating with the Local Authority in its development/review, a clear process for mediation arrangements regarding the health element of EHC plans, coordination of EHC assessments with other key health assessments e.g. Children and Young People's Continuing Care assessment, Looked-after Children's Health Assessment.
- Strategic contribution to development of a joint commissioning strategy that works towards the integration of services to improve outcomes and a participation and engagement strategy with children and young people with SEN and disability and their families.

What you can expect from the Designated Clinical Officer (DCO)

At individual level: queries or concerns when children or young people have complex health needs, or are in long term hospital settings; information on help for children or young people at SEN support who have medical conditions; information on NHS continuing care or NHS continuing healthcare funding packages.

At service level: training on health aspects of SEND; further information in relation to health aspects of the Local Offer; guidance if you are unsure of which health professional to contact; support for complaints, mediation and tribunal; link with health services in young offenders services.

At strategic level: information on the health responsibilities relating to SEND; integrated health pathways and reduction in duplication; governance structure for escalation of concerns/complaints to relevant boards at the ICB; information on strategic programmes such as Transforming Care and CAMHS transformation plans.

Please contact the relevant health professionals directly in the first instance for reports for Needs Assessment or annual review, wherever possible. **Please ensure that at least 6 weeks notice is given**.

18.2. Supporting pupils in school with medical conditions

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. Further guidance can be found at: https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

18.3. Health Pathways in Cheshire East

Local Offer: Please refer to the Health section of the Cheshire East Local Offer for SEND for full details of health services, referral criteria and contact details. This section is intended to provide a brief overview only.

a. Therapies (OT, SALT and Physiotherapy)

The Speech and Language Therapy (SALT) Service for children/young people aims to provide high quality specialist assessment and evidenced based interventions for children and young people with a range of speech, language, communication difficulties and/or dysphagia (swallowing).

Paediatric Physiotherapy and Occupational Therapy (OT) Services provide targeted specialist intervention for babies, children and young people from birth to 16 years of age (19 years for those with complex needs). The service aims to assist children to achieve their maximum physical, sensory and functional potential.

Speech and Language Therapy, Occupational Therapy and Physiotherapy are provided by integrated teams – one covering South locality and one covering the North locality. Teams are based in various clinics and other settings across Cheshire East.

Referral information can be found at the following links:

- Local Offer - Therapies information (with link to services)
- http://www.eastcheshire.nhs.uk/
- Community Services (CCICP) :: Mid Cheshire Hospitals NHS Foundation Trust (mcht.nhs.uk)

Direct referral links here:

East Cheshire Trust
Referrals for speech and language and feeding / swallowing difficulties

CCICP – Central Cheshire
Speech, Language and Communication Difficulties
Feeding and Swallowing Difficulties

b. Mental Health

The Child and Adolescent Mental Health Service (CAMHS) provides community assessment and treatment for children and adolescents with serious, complex, and/or enduring mental health, emotional, developmental or behavioural problems.

Referrals can be made by any route, except for self-referral.

Teams are based at Elm House in Macclesfield and Mill Street Centre in Crewe. (Mental Health Hub).

Referrals

This recently updated service provides telephone advice on the suitability of CAMHs referrals prior to one being formally written and sent. School and college settings who would like to talk through any concerns regarding a CYPs mental health, professionals or family member(s)/carer(s) concerned about the mental health of a child or young person can call for advice on 01606 555 120 (Between 13:00 & 17:00 Mon-Fri, excl. Bank Holidays). The CYP Mental Health Hub service acts as a single point of access and triages the referral to the correct destination.

To make a referral use the following email address and a practitioner will come back to you. cwp.cyp.mentalhealthhub@nhs.net

Related links:

- Local Offer – Mental Health information (with link to services)
- http://www.mymind.org.uk/

Learning Disability – Child and Adolescent Mental Health Service (LD-CAMHS)

The LD-CAMHs team in East Cheshire work with young people with a severe learning disability and the family. They work with the behavioural model (positive behaviour support model)
The team operate an open referral system.
Teams are based at Elm House in Macclesfield and Mill Street Centre in Crewe. (Mental Health Hub)

Autism and ADHD

CWP Autism and ADHD team see young people who live in the North of East Cheshire.

- For ASC they take referrals from 4 – 18.
- For ADHD it is 6 to 16

c. Paediatricians

Paediatricians work as part of a team to provide care for all children and young people with medical conditions such as asthma, allergy, diabetes, cardiac, coeliac, endocrine, epilepsy and developmental disorders. Young people with specific medical conditions or complex health needs can be cared for up to 18 years; after which the patient can access adult services.
Referrals can be made by GP, health visitor or therapists.

Teams are based at Macclesfield District General Hospital and at Leighton Hospital, although clinics are held in various clinics and special schools.

Related links:

- Local Offer - Paediatrics information (with link to local services)
- http://www.eastcheshire.nhs.uk/
- Children's Outpatient Department :: Mid Cheshire Hospitals NHS Foundation Trust (mcht.nhs.uk)

d. Care Packages

NHS continuing healthcare provides funding for adults (over age 18). To be eligible for NHS continuing healthcare, a young person

must be assessed by a team of healthcare professionals (a "multi-disciplinary team") as having a "primary health need". Whether or not someone has a primary health need is assessed by looking at all their care needs and relating them to:

- what help is needed.
- how complex these needs are.
- how intense or severe these needs can be.
- how unpredictable they are, including any risks to the person's health if the right care isn't provided at the right time.

Eligibility for NHS continuing healthcare depends on assessed needs, and t on any particular diagnosis or condition.

Children and young people (under age 18) are not eligible for NHS continuing healthcare funding but may receive a 'continuing care package' if they have health needs arising from disability, accident or illness that can't be met by existing universal or specialist services alone.

Contact the DCO for further information and initial enquiries: SCCCG.DCOCE@nhs.net

e. Dietetics

The integrated Nutrition and Dietetic Service operates across Cheshire East. The Dietetic Service is diverse, providing input across all clinical specialties and settings including, inpatients and outpatients and General Practice surgeries. Referrals can be made through the GP or hospital consultant.

f. Continence

Bowel and Bladder Specialist Services are available across Cheshire East for Adults and Children.
Criteria for referral to Paediatric Bladder and Bowel Service:

- Referral should be through the School Nurse or GP
- 4-19 years of age for any child with bladder and bowel issues - these include constipation, soiling, daytime wetting, urinary urgency and frequency and/or delayed toilet training
- 5-19 years of age for bedwetting only
- Child must have an East Cheshire GP

Related links:

- Local Offer – Dietetics information (with link to local services)
- https://services.eastcheshire.nhs.uk/nutrition-and-dietetics
- Nutrition and Dietetic Service :: Mid Cheshire Hospitals NHS Foundation Trust (mcht.nhs.uk)

Teams are based at Macclesfield Hospital and Leighton Hospital and outpatient clinics are held at various locations across Cheshire East.

19. Early Help and Social Care

Local Offer: Please refer to the Care section of the Cheshire East Local Offer for SEND for full details of early help and social care services, referral criteria and contact details. This section is intended to provide a brief overview only.

19.1. Context

Families can seek advice and support, subject to eligibility, from social care services.

A child or young person does not need an Education, Health or Care Plan (EHCP) to access social care services.

Conversely, where the Local Authority agrees to carry out an EHC Needs Assessment this does not necessarily mean that social care will carry out an assessment of the child or family.

The Cheshire East Safeguarding Children's Partnership (CESCP) and Cheshire East Council Children's Services have a guide entitled "Right Help – Right Time", which sets out the various services which are available through Children's Services and the threshold for accessing them.

19.2. Universal Services

All children have access to a range of 'universal' services depending on how old they are, their stage of development and their individual needs. In Cheshire East there are lots of universal services that provide support such as accessing your local Family Hub, Library, Youth Club, Activity clubs. Universal services are provided by a number of different agencies, including health and education. Please see the local offer.

19.3. Children's Early Help Services

What is it?

Cheshire East Council their partners and other commissioned services are committed to providing families with the support they need as soon as they need it to help prevent problems from becoming more serious. This is described as "**Early Help**". The support offered can be around a wide range of issues including social and emotional skills, communication, the ability to
manage behaviour, and support with mental health, all of which mean a stronger foundation for learning at school, an easier transition into adulthood, better job prospects, healthier relationships and improved mental and physical health.

Who is involved?

A range of providers may be involved including:

- Education
- Health
- Voluntary, community and faith sector
- Local Authority commissioned services
- Family Hubs
- Children's Social Care

How do I request support under Early Help?

If an assessment or involvement from Children's Services is thought necessary by a parent or professional, then a referral will need to be made to the Cheshire East Consultation Service (ChECS). This is the 'front door' for access to services, support and advice for children and their families, from early help and support through to safeguarding and child protection.

ChECS can be contacted by phone on 0300 123 5012 (option3). Callers will be directed to the appropriate team and relevant personnel more quickly via a range of automated options.

Assessment of Need

There are two different types of assessments which are used depending on the level of need; **(i) Extra Help Assessment and (ii) Targeted Family Help Assessment**.

Generally, the first assessment which will be done will be an Extra Help Assessment. Targeted Family Help Assessments are for more complex situations where a multi-agency approach is required.

The assessment process for both types of assessment are broadly similar and involve:

1. We talk to the child or young person, their family and other practitioners and write our assessment in a standard form. This helps us to create an action plan. You will need to agree to your own assessment and action plan.

   If a child or young person has an SEN Support Plan, the early help processes can be used alongside this. The Targeted Family Help Assessment would be a useful way to start to identify the issues and to create an action plan to address them.

2. The "**lead professional**" takes responsibility for keeping in touch with the family and for reviewing the action plan regularly. The lead professional co-ordinates the actions of different agencies that work with the child or young person and their family to meet their needs. This role can be undertaken by **anyone** working with the child/family.

19.4. Children's Social Care

Where a child or family's needs cannot appropriately be met under Early Help, a parent or carer may be eligible for a **Child and Family Assessment**. This type of assessment would be carried by a social worker.

A referral would first need to be made to determine if you are eligible to receive a Child and Family Assessment. A professional working with the family may also approach social care to determine if you are eligible for an assessment.

Eligibility for an assessment is considered by Cheshire East Consultation Service (ChECS). This is the 'front door' for access to services, support and advice for children and their families, from early help and support through to safeguarding and child protection.

ChECS can be contacted by phone on 0300 123 5012 (option3). Callers will be directed to the appropriate team and relevant personnel more quickly via a range of automated options.

Once eligibility to receive services is agreed, Social Care provide a range of services under the Children Act 1989 and the Chronically Sick and Disabled Persons Act 1970.

A range of provision is available from either services commissioned by Cheshire East Council, or from within Cheshire East Council itself, depending upon the type and complexity of the issue and its impact on the child of young person. For more information see the 'Care and support for children' category of Live Well Cheshire East.

19.5. Children with Disabilities

A child with a disability is regarded as "a child in need" and therefore Parents/Carers can request an assessment of need which may fall under either the Early Help framework or Children's Social Care.

19.6. Adult Social Care

If a young person with SEND is presenting with needs for care and support as they approach adulthood then they can request an Adult Needs Assessment.

Care and support means the help some adults need to live as well as possible with any illness or disability they may have. It can include help with things like: washing; dressing; eating; getting out and about and keeping in touch with friends or family. The young person has to consent to an assessment and where there are doubts about their capacity to do so *The Mental Capacity Act 2005* applies.

The assessment is a two-way conversation to allow the young person to express their needs, wishes, feelings and for the assessor to understand and work with them to identify what is going well and what would help to improve their situation. The assessor will build on any previous assessments or plans in place for the young person so that they do not have to repeat their story. The assessment will include how the young person looks after themselves, such as:

- washing and dressing
- eating and drinking
- getting out and about
- being part of your community

The young person can choose to have someone present with them such as a relative, friend or carer. If there is no appropriate support and the young person has substantial difficulty in being involved in the process, then the local authority will organise an advocate for them.

The assessment will determine if the young person is eligible for support under the *Care Act 2014* which, like the *Children and Families Act 2014*, focuses on promoting an individual's well-being. The local authority applies rules set by the Government (for more information see: *Care and Support (Eligibility Criteria) Regulations* which are issued under the *Care Act 2014*). These state that the following must be met in order to receive services:

- You have care and support needs as a result of a physical or mental condition or illness.
- As a result of these needs, you are unable to achieve two or more outcomes - for instance, being able to wash or use your home safely.
- There is a significant impact on your wellbeing.

If a young person is not eligible, they will be provided with information and advice about other types of support. If a young person is eligible then the assessor will work with them to plan their care and support. The young person may have to pay a contribution towards their care and support which is based on a financial assessment that looks at their income and any savings.

19.7. Education, Health and Care Needs Assessments

It is important to note that most children and young people going through the Education, Health and Care ("EHC") Needs assessment process will not need support from social care services.

The Education Health and Care Assessment process in Cheshire East does not automatically trigger an assessment by social care. If at the time of the EHC Needs Assessment the child or young person is not known to social care, this will be the advice provided to the SEN Service.

Where social care advice and services are offered to a child or young person with an EHC Plan, the social care needs will be specified in Section D of the EHC Plan. The agreed services will be specified in Sections H1 or H2, depending on the legislation which is applicable to the service being offered.

19.8. Designated Social Care Officer

The role of the Designated Social Care Officer (DSCO) is to ensure high quality social care input and engagement with the Education, Health and Care needs assessment and planning process with a particular focus on how different roles are supporting coordination of social care input into Education, Health and Care Plans. This mirrors the role of the Designated Clinical Officer for Health.

Social care is a complex system and Children and Young People with SEND may have different assessments or plans at any one time, such as for cared for children. The DSCO will be working strategically together with professionals to ensure needs, provision and good preparing for adulthood outcomes are identified so that plans are joined up and the right support is in place at the right time.

Nationally, most children and young people will not be being supported by early help or social care at the point of Education, Health and Care Assessment. The DSCO will be looking at how needs can be identifying early and developing pathways in line with the right help at the right time thresholds document for these children and young people.

The DSCO has a key role to play in supporting local arrangements in the following ways:

What you can expect from the Designated Social Care Officer (DSCO)

At individual level: queries or concerns from professionals working with families where the children or young people has complex social care needs.

At service level: training on social care aspects of SEND; further information in relation to social care aspects of the Local Offer;

guidance if you are unsure of which social care professional to contact; support for complaints, mediation and tribunal.

At strategic level: information on the social care responsibilities relating to SEND; contributing to SEND organisational design; supporting Local Authority readiness for SEND, Ofsted and CQC inspection; workforce development to ensure the workforce have key competencies in understanding the needs of children and young people with SEND, link to North West and Regional DCSO network to promote changes within the Social Care landscape.

20. Glossary

ASC	Autistic Spectrum Condition
AWPU	Age Weighted Pupil Unit
CAMHS	Child and Adolescent Mental Health Service
CAF	Common Assessment Framework
CCG	Clinical Commissioning Group
CEAT	Cheshire East Autism Team
CPD	Continuing Professional Development
DAF	Disability Access Fund
DCO	Designated Clinical Officer
DfE	Department for Education
DLA	Disability Living Allowance
EHC	Education, Health and Care
EHCP	Education, Health and Care Plan
EP	Educational Psychologist
EYFS	Early Years Foundation Stage
FE	Further Education
FEEE	Free Early Education Entitlement
JSNA	Joint Strategic Needs Assessment
LA	Local Authority
LD	Learning Disability
LSCB	Local Safeguarding Children Board
MLD	Moderate Learning Difficulties
OT	Occupational Therapy
PCHR	Personal Child Health Record (or 'red book')
PE	Physical Education
PECS	Picture Exchange Communication System
PfA	Preparing/Preparation for Adulthood
PMLD	Profound and Multiple Learning Difficulties
PSHE	Personal, Social, Health and Economic education
QFT	Quality First Teaching
RAMP	Reducing Anxiety Management Plan
SALT	Speech and Language Therapy
SEAL	Social and Emotional Aspects of Learning
SEN	Special Educational Needs
SEND	Special Educational Needs and Disability
SENCO	Special Educational Needs Co-ordinator
SIS	Sensory Inclusion Service
SLCN	Speech, Language and Communication Needs
SLD	Severe Learning Difficulties
SpLD	Specific Learning Difficulties
STOD	Specialist Teacher of the d/Deaf
STVI	Specialist Teacher for Visual Impairment

Appendix 1: Roles and Responsibilities

Early Years – Key Person

The following information has been extracted from the *Early Years Foundation Stage Statutory Framework (March 2017):*

When a child enrols in a setting, they must be assigned a key person. Providers must inform parents and/or carers of the name of the key person and explain their role within the setting. Dedicating time for the relationship between the child and the key person to grow and develop is vital. It is 'best practice' to encourage the friendship in as many ways as possible, allowing children and parents to feel safe and secure in this new environment.

The key person must help ensure that every child's learning and care is tailored to meet their individual needs. The key person must seek to engage and support parents and/or carers in guiding their child's development at home. They should also help families engage with more specialist support if appropriate.

Early Years – SENCO

The SENCO has a key role in supporting colleagues and co-ordinating the response of the setting when caring for children with SEN.

As the SENCO you will need to consider:

- Government legislation and policy on equality and SEND, and understand the duties that apply to early years practitioners.
- Training to enhance your knowledge and experience, keeping up to date with current legislation and best practice.
- Maintaining a good understanding of child development.
- Processes and procedures with regard to SEN.
- How you advise and support colleagues in developing inclusive practice for all children.
- Partnership working with parents and professionals, including Child Centred Planning.
- Ensuring that all the information required is gathered and is up to date.
- Maintaining high aspirations and outcomes for all children.
- Ensuring that the child's plans are reviewed regularly.

The following information has been extracted directly from *The SEND Code of Practice: 0-25 years (January 2015):*

A maintained nursery school **must** ensure that there is a qualified teacher designated as the SENCO in order to ensure the detailed implementation of support for children with SEN. This individual should also have the prescribed qualification for SEN Co-ordination or relevant experience.

The EYFS framework requires other early years providers to have arrangements in place for meeting children's SEN. Those in group provision are expected to identify a SENCO. Childminders are encouraged to identify a person to act as SENCO and childminders who are registered with a childminder agency or who are part of a network may wish to share that role between them.

The role of the SENCO involves:

- ensuring all practitioners in the setting understand their responsibilities to children with SEN and the setting's approach to identifying and meeting SEN.
- advising and supporting colleagues.
- ensuring parents are closely involved throughout and that their insights inform action taken by the setting, and
- liaising with professionals or agencies beyond the setting.

Schools – SENCO

The following information has been extracted directly from *The SEND Code of Practice: 0-25 years (January 2015):*

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

The SENCO **must** be a qualified teacher working at the school. A newly appointed SENCO **must** be a qualified teacher and, where they have not previously been the SENCO at that or any other relevant school for a total period of more than twelve months, they **must** achieve a National Award in Special Educational Needs Co-ordination within three years of appointment.

The SENCO has an important role to play with the headteacher and governing body, in determining the strategic development of SEN policy and provision in the school. They will be most effective in that role if they are part of the school leadership team.

The SENCO has day-to-day responsibility for the operation of SEN policy and co-ordination of specific provision made to support individual pupils with SEN, including those who have EHC plans.

The SENCO provides professional guidance to colleagues and will work closely with staff, parents and other agencies. The SENCO should be aware of the provision in the Local Offer and be able to work with professionals providing a support role to families to ensure that pupils with SEN receive appropriate support and high quality teaching.

The key responsibilities of the SENCO may include:

- overseeing the day-to-day operation of the school's SEN policy.
- co-ordinating provision for children with SEN.
- liaising with the relevant Designated Teacher where a looked after pupil has SEN.
- advising on the graduated approach to providing SEN support.
- advising on the deployment of the school's delegated budget and other resources to meet pupils' needs effectively.
- liaising with parents of pupils with SEN.
- liaising with early years providers, other schools, educational psychologists, health and social care professionals, and independent or voluntary bodies.
- being a key point of contact with external agencies, especially the local authority and its support services.
- liaising with potential next providers of education to ensure a pupil and their parents are informed about options and a smooth transition is planned.
- working with the headteacher and school governors to ensure that the school meets its responsibilities under the Equality Act (2010) with regard to reasonable adjustments and access arrangements.
- ensuring that the school keeps the records of all pupils with SEN up to date.

Post-16 – SEN Expertise within post-16 providers

The following information has been extracted directly from *The SEND Code of Practice: 0-25 years (January 2015):*
The governing bodies of colleges should ensure that all staff interact appropriately and inclusively with students who have SEN or a disability and should ensure that they have appropriate expertise within their workforce. They should also ensure that curriculum staff are able to develop their skills, are aware of effective practice and keep their knowledge up to date. Colleges should make sure they have access to specialist skills and expertise to support the learning of students with SEN. This can be through partnerships with other agencies such as adult social care or health services, or specialist organisations, and/or by employing practitioners directly. They should ensure that there is a named person in the college with oversight of SEN provision to ensure co-ordination of support, similar to the role of the SEN Co-ordinator (SENCO) in schools. This person should contribute to the strategic and operational management of the college. Curriculum and support staff in a college should know who to go to if they need help in identifying a student's SEN, are concerned about their progress or need further advice.

Local Authority 0-25 SEND Officer (Key Worker)

What your named 0-25 SEND Officer **can** do:

- Be your named contact (SEND Key Workers are allocated to specific settings as named contacts).
- Provide advice as to when a child or young person may have met the threshold for an Education, Health and Care (EHC) Needs Assessment as required.
- Provide information/advice on the administration of the EHC Needs Assessment processes and the contents of the relevant sections of EHC Plans.
- Support with complaints around school issues not in line with a child's SEN.

- Support new SENCOs if invited and explain the process around the EHC needs assessment and paperwork requirements.
- Provide advice and information on the annual review process.
- Signpost and provide good practice examples of paperwork for all settings if requested.
- Provide information on reasonable steps, best endeavours, *The SEND Code of Practice: 0-25 years* and *The Children and Families Act 2014*.
- Attend annual reviews when there is a significant change in provision, change of placement or increase in funding request or transition year group.
- Advice on utilising the local offer to ensure the graduated approach (e.g. EP, CEAT, Outreach).
- Work with parents/carers in situations where there are concerns about any aspects of the EHC Plan, including delivery of provision.

What your named 0-25 SEND Officer **is not able** to do:

- Explain what type of provision/placement the contributions are suggesting during an EHC Needs assessment.
- Make funding/placement decisions in meetings.
- Conduct observations of children/young people.
- Attend meetings in an advocacy role.
- Attend meetings for children/young people prior to them being known to the SEND Team.
- Add provision to EHC Plans which is health or social care without relevant advice.
- Update an EHC Plan without specific information returned as part of the annual review process on the wording required and accompanying written information as appropriate (e.g. diagnoses etc.).
- Make amendments to Section B, D, E, F or G without professional advice or reports to support changes.
- Submit a request for a change of placement to panel without accompanying Cheshire East specialist advice.

Appendix 2: The Cheshire East Teams

Who is who in SEND, Cheshire East – The Teams

SEND Locality Teams

What is the Locality Team?

The Special Educational Needs Team (SEND) is responsible for ensuring the Local Authority (LA) fulfil its statutory functions as outlined in the SEND Code of Practice (January 2015) for children and young people undergoing Education, Health and Care Plan Needs Assessments (EHC NA) and those already in receipt of Education, Health and Care Plans (EHCPs).

The SEND Team is responsible for identifying Special Educational Needs and formally reviewing these to ensure that these are met through the provision identified in a child or young person's EHCP. In order to achieve this, the SEND Team work collaboratively and in partnership with a range of services from across education, health and care.

The SEND Team operates under a 'Locality Model' of working and is subsequently split into three localities:

- **North** (Macclesfield, Knutsford, Wilmslow and Poynton)
- **Central** (Sandbach, Middlewich, Alsager, Congleton and Holmes Chapel)
- **South** (Crewe & Nantwich)

What do they do?

Some of the key responsibilities and functions of the SEN Team are outlined below:

- Ensuring that EHC NAs are conducted within the statutory timescales set out by the SEND Code of Practice; the SEND Team (namely the allocated SEND Keyworker) acts as a central point of contact for children, young people, families and professionals throughout the EHC NA process. The SEND Team is responsible for ensuring that a person-centred, holistic assessment of need is carried out.
- Ensuring that EHCPs are drafted and finalised for children and young people residing in Cheshire East with the most severe and complex needs. In addition, the SEND Team is responsible for ensuring that the provision outlined in a child or young person's plan is suitable, appropriate and implemented accordingly. The SEND Team are responsible for ensuring this is done in a timely manner whilst maintaining the quality of EHCPs produced

- Ensuring that EHCPs are reviewed at least annually (6-monthly for children under the age of 5) to ensure that needs are being met and progress is being made towards outcomes outlined.
- Ensuring the schools and settings are aware of their statutory responsibilities to children and young people with SEN and/or disabilities, and where support and advice can be accessed from.
- Ensuring that the resources available to children, young people and schools/settings are fairly and equitably distributed across the borough in order for individual and collective needs to be met.

Contact: SENTeamEast@cheshireeast.gov.uk / 01625 378042

Inclusion Quality Team

What is the Inclusion Quality Team?

The Inclusion Quality Team consist of 3 part time specialist SENCOs who have a variety of knowledge and skills. They were involved in the creation of the Cheshire East Toolkit for Inclusion and its delivery across all settings in the LA.

What do they do?

- The team support settings and professionals with the Toolkit and the Graduated Approach.
- Provide strategic support for settings and professionals focusing on Inclusion for all.
- Communication and support network for SENCOs in Cheshire East.

Contact: Inclusionqualityteam@cheshireeast.gov.uk

- **Dawn Cranshaw**
- **Andrea Phelps-Brown**
- **Kay Clarke**

Educational Psychology

What is an Educational & Child Psychologist?

Educational & Child Psychologists (sometimes called EPs) aim to use their psychological knowledge and understanding of child development to assess and address the learning, social, and emotional difficulties that may affect children and young people's educational achievement and life chances, in order to promote the most appropriate universal, targeted and individualised learning and development opportunities. EPs are trained to work with school staff, parents, carers, and other professionals at a number of different levels to improve the outcomes of children and young people (0-25 years).

What do they do?

The Educational Psychology Service in Cheshire East provides both a statutory and early intervention/prevention offer via our traded services, working to promote the inclusion and wellbeing of all Cheshire East children and young people, particularly those who are vulnerable or who have additional or Special Educational Needs. EPs work in a variety of ways. These include:

- Working with schools and organisations to provide guidance and support at a systems level.
- Working jointly with other professionals (e.g. Social Care, Speech and Language Therapy, The Cheshire East Autism Team).
- Visiting schools, services and settings, using a collaborative problem-solving approach called 'consultation'.
- Providing training for teachers and other education staff/professionals covering a range of topics and interventions.
- Project work and research to support teaching and learning.
- Individual casework with a child or young person to gain further insight into their areas of strength and need. This may be through the use of classroom and playground observation, a range of assessment materials (including dynamic assessment), and/or through therapeutic intervention.
- Working with parents/carers to help minimise difficulties at home and at school through Parent Advice Sessions.

Educational psychologists utilise evidence-informed practices in their work, ensuring that their interventions and strategies are grounded in the best available research and scientific evidence resulting in effective support for children and young people. Furthermore, EPs gather practice-based evidence by evaluating the outcomes of their interventions and incorporating real-world results and feedback from pupils, parents, and school staff, enabling them to adapt and refine their approaches to better meet the diverse needs of pupils.

Educational and Child Psychologists are passionate about, and committed to, supporting positive change for children and young people where there are concerns about their learning, development, behaviour, or emotional well-being. They subscribe to a model that views problems and solutions as a consequence of the interaction between children and their learning abilities and styles, the environments in which they live and learn, the curriculum opportunities they are provided with, and the expectations of peers, school staff, and families. EPs work with children and young people, in partnership with parents/carers, and other stakeholders in the community to plan a programme of support in line with the graduated approach.

Accessing the Educational Psychology Service is typically facilitated through the Special Educational Needs Coordinator (SENCo) who attends half-termly group consultation meetings with their linked EP and other SENCos. These consultation meetings serve as a platform for discussing ongoing cases, sharing observations, and collectively developing strategies to support children and young people with special educational needs. The collaborative nature of these meetings ensures that interventions and support plans are well-coordinated and tailored to address the unique needs of our children and young people.

Contact details:

Tel: 01625 374794

email: For general enquiries Educational.Psychologists@cheshireeast.gov.uk

For traded services Traded.EpService@cheshireeast.gov.uk

Cheshire East Autism Team

What is the Cheshire East Autism Team (CEAT)?

The Cheshire East Autism Team (CEAT) are a team of autism specialists consisting of teachers, support assistants, a speech & language therapist and a 'Family Liaison Officer'. They are part of Cheshire East's Children and Families Service. They provide a service to schools throughout Cheshire East, offering advice and support to all professionals working with pupils with Autism Spectrum Condition (ASC) or with children who are undiagnosed and have social and communication differences that may be related to an ASC. They also provide advice and support to parents/carers of children and young people with ASC.

What do they do?

The main role of the team is to support schools in meeting the needs of pupils experiencing social and communication difficulties related to ASC. They provide training to schools in order to support them in the development of a whole school staff who have the knowledge, skills and confidence to successfully include and work with children with ASC and social communication difficulties. They provide advice and guidance for individual children through a group consultation model, where schools can share good practice as well as availing themselves of the expertise of the team. For more complex cases, they conduct visits to schools to provide support through observation/informal assessment/1:1 work. They advise on the use of structure and visuals in the classroom and on creating an 'autism friendly' learning environment.

Alongside the work with schools, they provide support to parent/carers via email, telephone, coffee mornings and drop in sessions. They work closely with organisations such as Space4Autism, Autism Inclusive, Ruby's Fund and the Parent Carer Forum. They also provide training for agencies such as Family Support Workers to enable them to work more effectively with families where there is autism. have a website with a range of resources which can be used by parent/carers and schools.

Contact: theautismteam@cheshireeast.gov.uk

Sensory Inclusion Service

What is the Sensory Inclusion Service?

The service consists of:

- Specialist Teachers who, in addition to a recognised teaching qualification, all hold an additional mandatory qualification in hearing, visual or multi-sensory impairment.
- Specialist Teaching Assistants/Habilitation Specialists - some of whom hold the Habilitation Specialist qualification and/or additional specialist qualifications.
- A Service Technician.
- Sensory Production Base staff.

What do they do?

- Assessment and monitoring of children.
- Advice, guidance and training to parents, preschools, schools, and other agencies.
- Direct teaching & delivery of specialist programmes.
- Provision of specialist equipment and resources to children.
- The team work closely with parents and families, educational and medical professionals as well as any other agencies that may be involved with the child. The team recognises the valuable role of families as partners.
- The team support children in the home, preschool and schools from the point of diagnosis until the child leaves school. The frequency and nature of involvement by the Specialist Teachers is determined by use of the National Sensory Impairment Partnership (NatSIP) Eligibility Criteria.

Contact: Tel: 01625 374870 **Visual/Hearing Impairment - 01625 374870 Email:** sensoryinclusionservice@cheshireeast.gov.uk

Health- Designated Clinical Officer

What is the Designated Clinical Officer?

The Designated Clinical Officer (DCO) works for the NHS, as part of NHS Cheshire Clinical Commissioning Group (CCG), but links in closely with the Local Authority to ensure that any health/medical needs are met. The DCO works across the strategic and operational implementation of the SEND reforms, to ensure that all partners meet their statutory duties for children and young people with SEND and to act as strategic and operational lead for health within SEND.

This means that that DCO co-ordinates and supports SEND processes through coordination of information from Cheshire East health services relating to SEND, which include:

- CAMHS, LD CAMHS and adult Learning Disability services (provided through NHS Cheshire and Wirral Partnership Trust across all of Cheshire East).
- Health Visitors and School Nurses, otherwise known as the 0-19 services (provided though NHS Wirral Community Trust across all of Cheshire East).
- Speech and Language Therapy, Occupational Therapy and Physiotherapy (provided through NHS CCICP in South part of Cheshire East and by NHS East Cheshire Trust in the North part).
- Children's acute health services provided from Macclesfield Hospital and Leighton Hospital, including Paediatricians (Consultant level Doctors), specialist children's nurses and other services such as dieticians, bladder and bowel services.

What do they do?

The DCO role provides a single point of contact for education, health and care professionals to navigate health services and help to resolve any issues or barriers relating to health provision.

SEND officers can ask the DCO for help with:

- complex casework, including mediations and tribunals that include health issues.
- requests for support with understanding advice from health professionals and with writing the health sections of EHCPs where the child is medically complex or the advice is difficult to understand.
- requests for contact details for health professionals where needed to aid co-production, joint outcome setting, or any queries or concerns.

- queries about the roles and responsibilities of health professionals and the input they are providing for CYP.
- checks around private health reports and whether they can be included in the EHCP.

Contact: cheshireccg.dcoce@nhs.net

Portage, Quality and Inclusion Team

What is the Portage, Quality and Inclusion Team?

The Portage, Quality and Inclusion Team is made up of two Portage Quality and Inclusion Co-ordinators and eight Portage, Quality and Inclusion Practitioners, working across the North and South localities.

What do they do?

- Provide universal, targeted and intensive support to early years settings for children from birth until the child starts school, via the Early Start Hubs.
- Enable the early identification of children who may need additional support and ensure that the appropriate strategies and interventions are in place.
- Ensure all eligible children are able to access their free early education entitlement.
- Track children's progress and ensure the provision of appropriate support as required.
- Advise, inform and train early years providers to enable children to access high quality inclusive childcare in their local community.
- Work in close partnership with the Health Visiting service to ensure children with SEND receive the right support.
- Ensure schools and early years providers fulfil their statutory duty in implementing and administering Early Years Foundation Stage assessment arrangements: Progress Check at Age 2 and the Early Years Foundation Stage Profile.

Contact: earlyyearsandchildcareteam@cheshireeast.gov.uk

Cheshire East Parent Carer Forum (CEPCF)

What is the Cheshire East Parent Carer Forum?

The Cheshire East Parent Carer Forum (CEPCF) is a voluntary group of parents and carers in Cheshire East who have children or young people (age 0-25) with special educational needs and/or disabilities (SEND).

We have a membership of approx. 1300, and over 3,000 parent carers on our parents only Facebook group, plus 1200 likes of our open Facebook page.

What do they do?

We work with the LA, NHS CCG and other services that work with children and young people with SEND as representatives of our members to try to improve services and make sure their voices are heard. We share information, news and events with our members, we offer peer support and signpost to other services.

Contact: info@cepcf.org Tel: 07794431768

Cheshire East Information Advice Support Service

What is CEIAS?

The Cheshire East Information, Advice and Support service provide a free, impartial and confidential service for families with a child aged 0-25 with SEND or for a young person in their own right. Their key aim is to empower parents and young people to make informed choices. They help parents/carers to work positively with the child's educational setting, local authority staff and other professionals to ensure children's needs are met.

What do they do?

- Signpost you to relevant laws and guidance which all professionals working with children and young people with SEND must have regard to.
- Signpost you to (and explain if you need us to) the formal process the local authority follows to see whether your child or young person may need an Education, Health and Care Needs Assessment (EHCNA).
- Help you to understand official documents relating to your child's special educational needs.
- Explain your options if you do not agree with decisions being made regarding your child's special needs or disability.
- Share details of support groups and useful organisations with you and deliver workshops on a range of topics/themes, for parents/carers, around SEND.
- When appropriate, and there is availability, we can provide support at meetings with yourselves and the educational setting.

Contact: ceias@cheshireeast.gov.uk

Phone: 0300 123 5166

Cheshire East Consultation Service

What is ChECS?

The Cheshire East Consultation Service (ChECS) is the 'front door' for access to services, support and advice for children and their families, from early help and support through to safeguarding and child protection.

What do they do?

On Phoning ChECS on **0300 123 5012 (option 3) Callers** will be directed to a Unit Coordinator who will ask if the concerns are early help or safeguarding. They will then be directed to either Practitioner Support Officer (EHB) for Early Help concerns or a Social Worker (ChECS) for safeguarding concerns. The worker will gather the information and advise the next step.

ChECS also provide an Emergency Duty Team on **0300 123 5022** for out of hours support.

Professionals making a referral should use our screening tools to pinpoint areas of concern before consulting us.

Contact: checs@cheshireeast.gov.uk

Safeguarding Children in Education Settings

What is the SCiES team?

The Safeguarding Children in Education Settings (SCiES) team is part of Cheshire East's Education Participation and Pupil Support team. It supports schools, colleges and settings (including Academies and Independent schools) to fulfil their statutory and non-statutory safeguarding obligations. Their primary aim is to empower individuals who work in these settings to safeguard children and young people.

What do they do?

The team write and deliver an accredited training and development programme for all those who come into contact with children and families in their everyday work in schools and settings. The team also provide safeguarding support and guidance for schools; plus dissemination of local and national information and data to increase knowledge and inform practice to schools. They also carry out safeguarding audits for school settings.

Although the SCiES Team do not work directly with children or families they support education settings in their statutory responsibilities around safeguarding children.

Contact: Tel: 01606 275036 Email: sciesteameast@cheshireeast.gov.uk

Business Intelligence

What is the BI team?

The Business Intelligence team provide statistics, information and data about Cheshire East, its people and localities and supports services to interpret and analyse this intelligence This helps us to contribute to supporting people in Cheshire East by understanding their needs and expectations to provide services that meet immediate and future demand. By regularly monitoring Council performance we can also understand the impact of our service and reassure local taxpayers that the Council is providing value for money.

What do they do?

- produce information, analysis and consultation relating to Children and Adults Social Care, Early Years and Education.
- process, monitor and track school attendance, exclusions and pupil demographics data. This is gathered from school imports from your management systems e.g. SIMS. Support the system (Synergy) that provides Free School Meals applications, school admissions and allocations for Cheshire East schools.
- contribute to a range of projects when commissioned.
- provide system training and support.

What they offer to settings:

- Liquid logic training to enable settings to complete Early Help Assessments and Plans and Education, Health and Care Plan Annual Reviews.
- Access to complete Personal Education Plans (PEP) electronically via the professional portal.
- Ongoing support via email, telephone and face to face visits (if required).

Contact: BI@cheshireeast.gov.uk

Youth Support Service YSS

What is the Youth Support Service?

YSS is part of Preventative Services in the People Directorate. YSS covers the whole of Cheshire East with Youth Support Service hubs, based in Macclesfield and Crewe.

What do they do?

YSS is for young people aged 13-19yrs (up to 25yrs with SEND). The YSS offers targeted Youth Work, Outdoor Education, focused support for NEET (Not in Education, Employment or Training), support to young people who have an EHC plan, and transitional planning for targeted young people preparing for adulthood (PfA). The Participation work facilitates a wider offer for 0-19 years to engage in having a voice across Children's Services.

Contact:

Sarah Ramsey – sarah.ramsey@cheshireeast.gov.uk

Susan Fortune – susan.fortune@cheshireeast.gov.uk

Children's Service Development and Partnerships Team

What is the Children's Service Development and Partnerships Team?

The Children's Service Development and Partnerships Team supports developments to services for children, young people and families within Cheshire East Council, and across the partnership of services in Cheshire East.

What do they do?

- Support effective partnership working through coordinating the key children's partnership boards.
- Manage specific projects to develop the services we offer to children, young people and families.
- Involve children and young people in decision making.
- Communicate how we will make improvements, what needs to change and why.
- Develop plans on how we will improve and monitors our progress.
- Coordinate inspections and peer challenges.
- Support the business functions of the People directorate – for example the People's contribution to the Corporate Plan.

Contact: childrensdevelopmentandpartnerships@cheshireeast.gov.uk

The Tuition Team

What is the Tuition Team?

A team of qualified and experienced teachers employed directly by Cheshire East Local Authority (school term time only) from backgrounds in primary, secondary or special schools. The teachers specialise in English, Maths, Science or SEND. They support children absent from school due to a medical need (as referred to the team by schools) and children with an EHCP who currently have no school placement (e.g. have recently moved to the area, referrals made by SEND Keyworkers only). Tuition is short term (one to two terms) with an aim to reintegrate children into a school setting

What do they do?

The teachers deliver lessons on core curriculum subjects and PHSE to their students. Tuition is usually one-to-one with children being taught at home, online, in a library/public building or in school. The number of hours of tuition a student will be allocated each week will be based on the individual child but due to the intense nature of one-to-one teaching tends not to exceed 8 hours. The teachers hold review meetings every 6 weeks to discuss the student's academic progress as well as progress towards reintegration to school.

Contacts: Tel: 01270 371150

Email: Medical Needs (for schools) admin.mns@cheshireeast.gov.uk

The Tuition Team (for SEND referrals) thetuitionteam@cheshireeast.gov.uk

Virtual School for Cared for Children

What is the Virtual School?

Cared for Children (sometimes called Looked after Children) are those children looked after (subject of a care order) by Cheshire East Council. They may live with Foster Carers, in Residential Homes or with family or relations. The Virtual School takes the lead in ensuring the Council meets its statutory duty to ensure that the educational outcomes for all these children are the best they can be. Children subject of care orders are required to have a Personal Education Plan produced by their school as part of their care plan which the Virtual School track and monitor. The Virtual School is also responsible for the allocation and distribution of Pupil Premium Plus funding from central government for cared for children and monitors the impact of this funding on educational outcomes of this cohort of children.

What do they do?

Too many Cared for Children do not get the outcomes from their education that reflect their capabilities. The Virtual School works with schools/settings, carers, social workers and the young people themselves to make sure they get the most out of their education. We will work to find the best educational place for each child and then monitor their progress through statutory termly PEPs. We will help to arrange any support they need to be able to enjoy and succeed in school and will challenge those who work with them to give the best provision at all times.

Contact:

Laura Rogerson, Head of Service SEND & Virtual School Headteacher laura.rogerson@cheshireeast.gov.uk

Georgie Fletcher, Deputy Head of Virtual School Georgie.Fletcher@cheshireeast.gov.uk

Short Breaks Team

What is the Short Breaks Team?

The CWD (Children with Disabilities) Short Breaks Team support children and young people with additional needs and disabilities aged 0 – 18 and their Parents & Carers.

Please follow this link to view the team page on Live Well Cheshire East: https://livewellservices.cheshireeast.gov.uk/Services/4493

What do they do?

They provide advice and support about our short break provider groups and activities across Cheshire East which can be done via telephone or email or they can arrange a Short Break home visit.

They manage Early Help Individual Payments (EHIPs), which form part of the Cheshire East Local Offer. The purpose of EHIPs is to provide Parent/ Carers with a short break from their caring responsibilities.

For children and young people requiring an additional level of support they complete assessments to identify support needs and provide packages of support to meet assessed needs.

Contact: Telephone: 01625 378083 **Email:** shortbreaksteam@cheshireeast.gov.uk

Admissions and Transport

What is the Transport team?

The Transport team are responsible for the application of School Transport policies through to the day-to-day operational delivery of school transport. Eligibility for home-to-school transport for children and young people with an EHCP is part of the responsibilities of the Education Travel Policies team whilst the day-to-day operations of school transport sits with the School Transport team.

Contacts:

Email re eligibility: educationtravelpolicies@cheshireeast.gov.uk

Email Transport: SchoolTransport@cheshireeast.gov.uk

What is the Admissions team?

The Admissions team are part of Cheshire East's Education Participation and Pupil Support team.

What do they do?

The Admissions team co-ordinate school applications for children starting mainstream Primary and moving up to High School as well as children moving schools. They ensure that pupils with an EHCP naming a mainstream school are allocated a place.

Contacts:

Email Admissions: admissions@cheshireeast.gov.uk

Elective Home Education Service

What is the Elective Home Education Service?

The Elective Home Education Service in Cheshire East provides advice and guidance for any parents/ carers considering educating their child at home and supports parents/carers who are electively home educating their children.

The Elective Home Education service consists of three locality Elective Home Education advisors who operate in three localities:

- North (Macclesfield, Knutsford, Wilmslow and Poynton).
- Central (Sandbach, Middlewich, Alsager, Congleton and Holmes Chapel).
- South (Crewe & Nantwich).

What do they do?

- Work with parents, carers, school staff and other professionals to support parents make an informed choice about elective home education.
- Ensure parents understand their role and responsibilities if they elect to home educate.
- Complete annual meetings with parents/carers and the child to ensure children who are educated at home receive an efficient education programme, suitable; to the child's age, ability, and aptitude and to any special needs they may have.
- Work with parents/carers to support children back into a school setting when this is requested by the family, or the LA has served a School Attendance Order.

Email: EHE@cheshireeast.gov.uk

Appendix 3: Useful Websites

Education Endowment Foundation

The Education Endowment Foundation is an independent charity dedicated to breaking the link between family income and educational achievement.

They have evidence-based reports and information on all aspects of teaching and learning for settings with young people aged 2-19 years.

They also have guidance reports available that will allow you to improve teaching and learning in your setting.

Education Endowment Foundation | EEF

Whole School SEND

The Whole School SEND website, hosted by nasen, provides you with free, easy access to high quality information, resources and CPD to support a whole school approach to inclusion.

You can join for free.

Whole School SEND Home Page | Whole School SEND

Nasen

Nasen is the National Association for Special Educational Needs – a charitable membership organisation that exists to support and champion those working with, and for, children and young people with SEND and learning differences. They do this by providing free resources and support for all members, leading targeted programmes and projects to deliver widespread improvements, offering a structured programme of professional development, accredited training and conferences as well as a package of SEND services throughout the UK and internationally.

You can join for free.

Home page | Nasen

Teacher Handbook

This handbook has been developed as a resource for teachers to use over time as they embed inclusive practice in their classrooms: it is not intended that it is read cover-to-cover. It has been written for both primary, secondary and specialist colleagues: teaching assistants, teachers, senior leaders and headteachers. The handbook includes whole-school and whole-class approaches as well as subject-specific and condition-specific guidance.

Teacher Handbook: SEND | Whole School SEND

SENCO Induction Pack

The SENCO Induction Pack supports new SENCOs at the start of their journey before they complete the NASENCO qualification.

It provides useful information to those working with SENCOs or who are interested in taking up the post in the future.

SENCO Induction Pack: revised edition | Whole School SEND

North Star Federation Inclusion Toolkit

An online Toolkit for Inclusion and OAIP/ QFT.

North Star Federation - SEND Toolkit Support

Ofsted Schools Inspection Framework

Education inspection framework (EIF) - GOV.UK (www.gov.uk)

Local Area SEND Inspection Framework

Area SEND inspections: framework and handbook - GOV.UK (www.gov.uk)

SEND Code of Practice 0-25 years

SEND code of practice: 0 to 25 years - GOV.UK (www.gov.uk)

National Development Team for Inclusion

A social change organisation working to enable people at risk of exclusion, due to age or disability, to live the life they choose. Through their change and development work, research and evaluation and best practice examples, they inspire and support policymakers, services and communities to make change happen - change that leads to better lives.

Home page - NDTi

What Matters Island

This template is designed to help young people talk with their family, carers and any paid supporters to coproduce a summary Preparing for Adulthood plan.

What Matters Island - NDTi

Council for Disabled Children - CDC

The Council for Disabled Children is part of the National Children's Bureau family. They are the umbrella body for the disabled children's sector with a membership of over 300 voluntary and community organisations and an active network of practitioners that spans education, health and social care.

Council for Disabled Children

Independent Provider of Special Education Advice - IPSEA

Independent Provider of Special Education Advice (known as IPSEA) is a registered charity (number 327691) operating in England. IPSEA offers free and independent legally based information, advice and support to help get the right education for children and young people with all kinds of special educational needs and disabilities (SEND).

(IPSEA) Independent Provider of Special Education Advice

ICAN

I CAN is the children's communication charity. They are experts in helping children develop the speech, language and communication skills they need to thrive in a 21st century world. Their vision is a world where all children have the communication skills they need to fulfil their potential. Their mission is that no child should be left out or left behind because of a difficulty speaking or understanding.

ICAN CHARITY

Speech and Language UK: Changing young lives

Autism Education Trust – AET

A not-for-profit organisation supported by the Department for Education. Their 360-degree support programme offers education professionals training, practical tools and a wealth of free resources to better support autistic children and young people aged 0 to 25 years.

Cheshire East is an AET Hub and you can contact CEAT for more information.

Autism Education Trust

Special Needs Jungle

Special Needs Jungle - News, info, resources & informed opinion about Special Educational Needs, disability, children's physical and mental health, rare disease. Campaigning to #FixSEND

Cheshire East Commissioned Services

Cheshire East has a number of commissioned short breaks providers; all can be accessed from the link below:

https://www.cheshireeast.gov.uk/livewell/local-offer-for-children-with-sen-and-disabilities/care/short-breaks-services.aspx

Children & Young People with SEND are also able to access an advocate if they wish, to ensure their voice is heard and acted upon in decisions and processes which affect them. In Cheshire East this service is provided by the Children's Society.
https://livewellservices.cheshireeast.gov.uk/Services/1421/Advocacy-Service

Appendix 4: Suggested Assessments

The below assessments have not been endorsed by the Local Authority, but have been suggested by experienced, local Cheshire East school SENCOs following their own use. Such assessments should be used in conjunction with observations from class teachers etc.

Cognition and Learning (includes assessments for reading, spelling, reasoning etc.)

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Accelerated Reader	Cognition and Learning	Reading programme with assessments built in	Yes	No	Renaissance http://www.renlearn.co.uk/accelerated-reader/	
Access Reading Test (ART)	Reading comprehension	Looks at strengths and weaknesses in four key aspects of reading comprehension: Literal comprehension, vocabulary, inference and analysis	Yes	Yes	Hodder: https://www.hoddereducation.co.uk/AccessReadingTest	
British Picture Vocabulary Scale (BPVS)	Verbal reasoning	Understanding of vocabulary- each word has four pictures to select from to show if they understand word meaning. Gives idea of general understanding of the world. Verbal Reasoning General ability measure. Used alongside Non Verbal Reasoning to	Yes, and age equivalent	No	GL assessment https://www.gl-assessment.co.uk/products/british-picture-vocabulary-scale-bpvs3/	Recommended for use with dyslexia portfolio screener

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
		compare. Designed for 3 - 16 years.				
Cognitive Abilities Test (CAT4)	Cognitive abilities test	Reasoning with words, numbers, shapes and designs. Designed for children and young people aged 6 -17+ years.	Yes	Yes	GL Assessment https://www.gl-assessment.co.uk/products/cognitive-abilities-test-cat4/	
Comprehensive Test of Phonological Processing - Second Edition (CTOPP-2)	Phonological processing	Phonological awareness, phonological memory and rapid naming. Designed for 4 years to 24 years 11 months.	Yes	Yes	R Wagner et al (Authors) Available from: http://www.pearsonclinical.co.uk/AlliedHealth/PaediatricAssessments/PhonologicalAwareness/ctopp-2/comprehensive-test-of-phonological-processing-second-edition.aspx	

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Dyslexia Screener	First stage screening assessment for dyslexic tendencies	Identifies dyslexic tendencies in pupils aged 5–16+ years and recommends intervention strategies	Yes	Yes	GL Assessment https://www.gl-assessment.co.uk/products/dyslexia-screener-portfolio-and-guidance/	
Dyslexia Portfolio	Individual follow-up assessment to the Dyslexia Screener (see above) for those pupils who may have been screened as having dyslexic tendencies, or whose performance in literacy is causing concern. Assesses individual signs of dyslexia.	Assesses the following: Naming Speed Reading Speed Phoneme Deletion Non-word Reading Single Word Spelling Recall of Digits forwards Recall of Digits backward Single Word Reading Writing - copy/free writing speed	Yes, for each area	No	GL assessment https://www.gl-assessment.co.uk/products/dyslexia-screener-portfolio-and-guidance/	Need a measure of general ability for it to give a measure of level of dyslexia, which is measured A (none) to E (severe). Online report generation tool produces a report for teacher and parents.

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Lucid - Rapid (part of the 'Lucid' suite of assessments for specific learning difficulties)	Provides an indication of dyslexia	Quick group/class screening for dyslexia in pupils aged 4 to 15 Consists of 3 sub-tests according to age - phonological processing, working memory, and either visual-verbal integration memory or phonic decoding skills	Standardised scores, Age equivalents and centiles	The administrator's manual explains how to interpret results and their implications for learning.	GL Assessment https://www.gl-assessment.co.uk/assessments/products/lucid-rapid/	Computerised tests, more enjoyable format, results immediate and interpreted graphical. Cost implication as licence needs renewing annually.
Lucid - LASS (part of the 'Lucid' suite of assessments for specific learning difficulties)	Cognition & Learning	Designed to highlight differences between actual and expected literacy levels, with two versions: 8-11 years and 11-15 years. Assesses areas such as: visual memory, auditory-verbal memory, spelling, reasoning, and reading for meaning, reading single words & phonological processing.	Yes, in each area	No, but some preferable to read the resulting charts.	GL Assessment LASS 8-11: https://www.gl-assessment.co.uk/assessments/products/lucid-lass-8-11/ LASS 11-15: https://www.gl-assessment.co.uk/assessments/products/lucid-lass-11-15/	

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Nessy - Dyslexia Quest screening	Cognition and Learning. Provides a report of learning abilities associated with dyslexia.	Assesses 6 cognitive ability areas, including: Processing speed, phonological awareness, auditory sequential memory, visual word memory, visual sequential memory and working memory	Yes, in each area	No, it generates a report.	Nessy https://www.nessy.com/uk/product/dyslexia-screening/	
New Salford Sentence Reading Test	Reading - accuracy and an optional measure for checking comprehension	Gives a reading age and a comprehension age. Consists of 3 equivalent sets of graded sentences. Suitable for less able readers from the age of 6 upwards.	Yes Standardised scores, Age equivalents and percentiles	SENCO: No, the manual is clear and easy to follow. SENCO: would advise reading the manual carefully and carrying out some practice tests on children you are not concerned about.	Colin McCarty and Marie Lallaway (Authors) https://www.hoddereducation.co.uk/New-Salford-Sentence-Reading-Test	SENCO: It is quick to administer and to score. Useful to measure progress on a termly basis. SENCO: We do this on all year 3s in September and then every term for any children who are flagged up as not performing as well as they could be.

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Phonological Assessment Battery (PHAB)	Phonological awareness and processing	Designed to assess phonological processing in individual children. It is a practical measure that identifies children aged 6-14 years who have significant phonological difficulties and need special help in processing sounds in spoken language.	Yes Standardised scores, Age equivalents and percentiles	No, however would recommend reading the manual carefully and perhaps watching someone experienced in using it before doing on your own. It's quite involved.	GL Assessment https://www.gl-assessment.co.uk/products/phonological-assessment-battery-phab/	SENCO: EPs often ask about this when there are concerns about a child or young person's literacy skills. SENCO: Scores are presented on a computer generated graph for easy visual interpretation.
PM Benchmark Reading Assessment	Reading - assesses instructional and independent reading levels and understanding of the texts	Consists of 46 levelled fiction and non-fiction texts ranging from emergent levels to reading age 12.	No	No	Available from: https://shop.scholastic.co.uk/series/1080	A useful screening tool for monitoring purposes. Easy to administer and can be used as often as required.

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Raven Coloured Progressive Matrices	Non Verbal Reasoning	Puzzles/patterns of increasing complexity - children have to identify the missing piece from 4 choices. Gives Non Verbal Reasoning general ability measure.	Yes, and age equivalent	No	John C Raven et al (Author) Available from: http://www.pearsonclinical.co.uk/Psychology/ChildCognitionNeuropsychologyandLanguage/ChildGeneralAbilities/Ravens-Educational/Ravens-Educational.aspx	
Sandwell Early Numeracy Test (SENT)	Cognition and Learning - numeracy	Assesses a pupil's ability with numbers, through exploring five strands of basic numeracy skills: identification, oral counting, value, object counting and language	Yes		GL Assessment https://www.gl-assessment.co.uk/products/sandwell-early-numeracy-test-sent/	
New Group Reading Test (NGRT)	Cognition and Learning - reading	A standardised, adaptive, termly assessment to measure reading skills against the national average. Use it to identify where intervention may be needed, and then to monitor impact and progress made.	Provides you with a Standard Age Score (SAS), a reading age, Key Stage 2 or GCSE	No. The administrator's manual explains how to interpret results and gives case studies.	GL Assessment https://www.gl-assessment.co.uk/assessments/new-group-reading-test/	A quick screening tool for monitoring purposes. Easy to administer and score.

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
			indicators, and progress measures			
New Group Spelling Test (NGST)	Cognition and Learning - spelling	An adaptive assessment which allows termly monitoring of spelling skills, benchmarked against the national average. Age range is 7-14+ years.	Reports provide the Standard Age Score (SAS)	No. The administrator's manual explains how to interpret results, gives case studies and advice on next steps.	GL Assessment https://www.gl-assessment.co.uk/assessments/products/new-group-spelling-test/	
Verbal Reasoning and Non-Verbal Reasoning	Cognition and Learning	Verbal Reasoning reveals how a pupil takes on board new information by measuring their ability to engage with language. Non-Verbal Reasoning involves no reading and so provides insight into the abilities of pupils who think more easily in images than words. It also measures the potential of pupils with limited	Yes	No	GL Assessment Verbal reasoning: https://www.gl-assessment.co.uk/assessments/products/verbal-reasoning/ Non-verbal reasoning: https://www.gl-assessment.co.uk/asses	Very easy to use. EPs often ask for measure of non-verbal reasoning so it's a good one to do before a consultation.

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
		reading skills including those with dyslexia, poorly motivated pupils, and EAL pupils.			sments/products/non-verbal-reasoning/	
Wide Range Achievement Test 4 (WRAT-4)	Measures basic academic skills	Word reading, sentence comprehension, spelling and math computation	Yes	Yes	GJ Robertson and GS Wilkinson (Authors) Available from: https://www.pearsonclinical.co.uk/store/ukassessments/en/wide-range/Wide-Range-Achievement-Test-%7C-Fourth-Edition/p/P100009134.html?tab=overview	
York Assessment of Reading for	Cognition and Learning - reading	Rigorous reading assessment used to identify difficulties with word recognition, reading	Yes Standardised scores, Age	No. The administrator's manual explains how to	GL Assessment https://www.gl-assessment.co.uk/products/york-assessment-	Scores are presented on a computer generated

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Comprehension (YARC)		fluency or reading comprehension	equivalents and percentiles	interpret results, gives case studies and advice on next steps.	of-reading-for-comprehension-yarc/	graph for easy visual interpretation.

Communication and Interaction

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Expressive Language Assessment Tool (ELAT)	Speech and language	Assesses children's expressive language skills. Breaks down areas of need so you can see what to target first.	No, though it does give an age bracket.	Yes - Robert Robinson provides training through Ash Grove Primary School	Through the training	Really useful course and assessment. Can pinpoint issues to decide if a referral is needed, plus can inform teaching.
Universally Speaking - The Communication Trust	Speech, language and communication issues	Checklist of statements to RAG rate what children should achieve, at each stage of their development, from 5-11 years.	No	No	https://www.thecommunicationtrust.org.uk/resources/resources/resources-for-practitioners/universally-speaking.aspx	A useful developmental guide with advice and top tips.
Wellcomm screening	Communication and Interaction	Assesses child's current level speech and language. Designed for early years (6 months - 6 years)	No but it is a very detailed report	Yes	GL Assessment https://www.gl-assessment.co.uk/products/wellcomm/	

Social, Emotional and Mental Health

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
The Boxall Profile	Social, emotional and mental health difficulties	Supports early identification, target setting, interventions and monitoring progress.	No	No. The administrator's manual explains how to interpret results, gives case studies and advice on next steps. Would advise reading the manual carefully.	https://www.nurtureuk.org/what-we-do/the-boxall-profile/	SENCO: Provides a guide to select interventions and monitor target behaviour. SENCO: needs careful explanation
Strengths and difficulties questionnaire (SDQ)	Social, emotional and mental health difficulties strengths and difficulties	Checklist of statements for any age group. Breaks down the child or young person's strengths and weaknesses and highlights areas to work on in social skills groups etc. Can also be used as part of the process to refer to CAMHS.	No	No	Various online sources plus CAMHS. For example, available from: https://www.sdqinfo.org	CAMHS require these for a referral; we use the numbered version in school rather than the boxes because it's easier to score. For parents, we always provide the one with boxes.

Miscellaneous

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Detailed Assessment of Speed of Handwriting (DASH)	Speed of handwriting and handwriting difficulties - dysgraphia	Writing speed, free and copy speeds, identifies signs of dyspraxia or dysgraphia	Yes	Yes	A Barnett et al. (Authors) Available from: http://www.pearsonclinical.co.uk/AlliedHealth/PaediatricAssessments/PerceptualFineMotorDevelopment/DetailedAssessmentofSpeedofHandwriting(DASH)/DetailedAssessmentofSpeedofHandwriting(DASH).aspx	
Wide Range Intelligence Test (WRIT)	Intelligence test	Assessment of cognitive abilities that can be used with individuals ages 4 to 85 years. Assesses both verbal and nonverbal abilities, yielding a Verbal IQ and a Visual IQ, which generate a combined General IQ.	Yes	Yes	J Glutting et al. (Authors) Available from: https://www.pearsonclinical.co.uk/store/ukassessments/en/wide-range/Wide-Range-Intelligence-Test/p/P100009122.html	

Name of Assessment	Which need does it assess?	What does it measure/assess? (Brief description)	Does the assessment result in a standardised score?	Is formal training or a qualification required to use the assessment?	Where is it available from? (e.g. Company name and/or web link if possible)	Additional comments from SENCOs
Lucid - Recall	Working Memory - processing speed	Suitable for 7-16 years. Consist of 3 subtests: Phonological loop, Visuo-spatial sketchpad and Central executive function.	Standardised scores, Age equivalents and centiles	The administrator's manual explains how to interpret results and offers advice on strategies to use.	GL Assessment https://www.gl-assessment.co.uk/assessments/products/lucid-recall/	Computerised tests, more enjoyable format, results interpreted graphical. Cost implication as licence needs renewing annually.
Performance Indicators for Valued Assessment and Targeted learning (PIVATS)	System to assess learning and set targets for pupils well below national expectations for their age.	Measures small steps in attainment, within the PIVATS structure. P scales broken down into small steps up to the revised national curriculum Y4 age related expectations.	No	No	www.lancashire.gov.uk/pivats	

Appendix 5: Suggested Resources

Local Offer: Please refer to the Support for Education Professionals section of the Local Offer for contact details of local services or resources that are available to support educational professionals for a variety of needs.

The following resources have not been endorsed by the Local Authority, but have been suggested by experienced, local Cheshire East SENCOs following their own use and/or by other local professionals. The table does not include specialist support services etc. These are referenced in the Graduated Approach tables and can be found in the Local Offer.

Cognition and Learning (includes resources for reading, spelling and writing)

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Accelerated Reader	Cognition and Learning	Reading programme with assessments built in	No	Renaissance http://www.renlearn.co.uk/accelerated-reader/	
Beat Dyslexia	Reading, spelling and writing/handwriting	Step-by-step, multi-sensory programme consisting of 6 books from the earliest stages of letter recognition through to full literacy.	No	E Franks et al (Authors) Available online, e.g.: https://www.ldalearning.com/products/cognition-and-learning/dyslexia-and-literacy/beat-dyslexia	Teacher's notes/lesson programmes, photocopiable pupil worksheets and assessments. Easy to use, can be delivered by anyone, including parents
Boostingreading @primary (BR@P) and	Cognition and Learning	Aims to improve reading skills	Yes	Education Works http://www.educationworks.org.uk/what-we-	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
boostingreading @secondary (BR@S)				do/reading-support/boosting-reading	
Hickey Programme	Dyslexic type tendencies	A classic, highly structured, multi-sensory Language Course for dyslexic learners of all ages	Yes - requires a specialist teacher qualification to implement the programme	M Combley (Editor) Available to order online, e.g.: https://www.amazon.co.uk/Hickey-Multisensory-Language-Course-Third/dp/1861561784	Stand-alone programme - resources need to be made
Indirect Dyslexia Learning (IDL)	Reading and spelling	A cloud based intervention software designed for pupils with dyslexic type tendencies.	No, but training is provided if you buy the programme.	Acentis https://idlsgroup.com/	Pupils work individually, at their own pace and can revisit concepts as needed. There is also a similar Maths intervention.
Launch the Lightboat	Dyslexic type tendencies	A highly structured, multi-sensory approach based on spelling rules and phonics. Consists of ten books with a set lesson format.	No	https://www.robinswood.co.uk/resources	Teacher's notes/lesson programmes, photocopiable pupil worksheets and assessment.
Lexia Reading Core5	To improve reading and spelling	Interactive programme	No	Lexia http://www.lexiauk.co.uk/the-product/	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Nessy - Hairy letters and Hairy phonics 1, 2, and 3	Cognition and Learning	Letters and sounds precision teaching	No	Nessy https://www.nessy.com/uk/apps/hairy-letters/	
Nessy - Reading and Spelling Programme	Reading and spelling	An internet-based programme for 6-11 years, using games to improve reading and spelling of EAL, dyslexic and struggling readers.	No	Nessy https://www.nessy.com/en-gb/product/nessy-reading-and-spelling-school	Teacher's notes/lesson programmes, photocopiable pupil worksheets can be printed as a resource bank.
Numicon	Cognition & learning	Kinaesthetic Practical Maths intervention	No, but available and preferable	Oxford University Press Available online, e.g.: https://global.oup.com/education/content/primary/series/numicon/?region=uk	
Plus 1, Power of 2, Times Tables, Perform with Time	Recall of number concepts	The books are coaching manuals enabling parents as well as staff to deliver the programme. It reinforces the building blocks of numbers and develops skills with mental calculations.	No	www.123learning.co.uk	Stand-alone programmes with step-by-step instructions.

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Read Write Inc.	Develops reading and spelling	Phonic based segmenting and blending. Repetitive reinforcement, intensive programme that follows structure. Major focus on reading and writing. Memory aid.	Yes	R Miskin (Author) Available from: https://global.oup.com/education/content/primary/series/rwi/?region=uk	
Toe by Toe	Reading	An individual, systematic reading programme to improve accuracy and fluency.	No	www.toe-by-toe.co.uk	Stand-alone programme
Word Shark	Reading and spelling	Computer programme for reading and spelling. Pre-recorded words to target and promote high motivation and to assist those with Dyslexia	No	White Space http://www.wordshark.co.uk/index.aspx	

Communication and Interaction

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Black Sheep Resources - Concepts in Pictures, Language in Pictures etc.	Limited speech, language and communication skills	Resources for a variety of age groups and aspects of language development - grammar, vocabulary, sentence construction etc.	No	Black Sheep Press: www.blacksheeppress.co.uk	Teacher's notes and photocopiable pupil worksheets.
Friendship Terrace	Communication and interaction/ Social, Emotional and Mental Health	An autism friendly resource, using basic language and stories to help develop friendships.	No formal training	Black Sheep Press: https://www.blacksheeppress.co.uk/product/friendship-terrace-friendship-skills/	
I am special - Asperger's and me	Autistic Spectrum Condition (ASC)	Supports children to understand their or their siblings ASC. Also has a parents' section	No though knowledge of ASC would be preferable as it can create questions from the children which are not answered by the book.	Cheshire East Autism Team	
Language Builders	Communication and Interaction	Series of books providing detailed advice and practical activities to support the communication skills of children and young people (number of versions available, e.g.	No	Elklan https://www.elklan.co.uk/Shop/	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
		secondary, hearing difficulties, post-16 etc.)			
Mr. Goodguess	Inference	Pictures and narrative provide a focus for questions requiring higher level comprehension skills. Promotes the use of visual clues and drawing of inferences.	No	Black Sheep Press https://www.blacksheeppress.co.uk/product/inferencing-skillsr-mr-goodguess/	Photocopiable pupil worksheets.
'Socially Speaking' and 'Time to Talk' Books	Self-esteem, listening skills and expressive language skills.	Group activities to boost social ability, understanding and pragmatic skills. Consists of 3 units: let's communicate; let's be friends and let's practice	No	A Schroeder (Author) Available online, e.g.: https://www.amazon.co.uk/s?i=stripbooks&rh=p_27%3AAlison+Schroeder&s=relevancerank&text=Alison+Schroeder&ref=dp_byline_sr_book_1	Teacher's notes/lesson programmes, photocopiable pupil worksheets and assessment. 'Time to Talk' is useful for Reception children. 'Socially Speaking' is useful for older children

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Talkabout Activities: Developing Social Communication Skills	Limited social skills and social understanding	Consists of 225 practical activities for social skills training. It includes general group cohesion activities that can be used as starting or finishing activities during the day. (updated and related versions also available)	No	A Kelly (Author) Available online, e.g.: https://www.amazon.co.uk/Talkabout-Activities-Developing-Social-Communication/dp/0863884040/ref=pd_sim_14_23?_encoding=UTF8&psc=1&refRID=XVASNGB2VG5YGD530KG6	Teacher's notes/lesson programmes, photocopiable pupil worksheets and assessment.
Talk Boost (KS1 and KS2) and Early Talk Boost	Communication and Interaction	Boosts language skills to narrow the gap with peers. Targeted and evidence based intervention which supports children to make progress with their language and communication skills	Yes	I CAN: https://ican.org.uk/shop/	
Talkingpartners @primary and talkingpartners @secondary	Limited speech, language and communication skills	A language programme providing a range of activities to develop speaking and listening skills	No - Training used to be provided	Education Works: http://www.educationworks.org.uk/what-we-do/speaking-and-listening/speaking-and-listening	Teacher's notes and photocopiable pupil worksheets.

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
The Girl with the Curly Hair books	Girls with Autistic Spectrum Condition (ASC)	Explains ASC to those with it and also to anyone who reads it.	No	Alis Rowe (Author) Available online, e.g.: https://www.amazon.co.uk/Girl-Curly-Hair-Aspergers-Me-ebook/dp/B00GKQPOPO#reader_B00GKQPOPO	Fantastic resource!
Transition materials (primary to secondary school)	Autistic Spectrum Condition (ASC) or any children anxious about transitions	Supports transition in a structured way	No	Cheshire East Autism Team: http://www.cheshireeast.gov.uk/livewell/local-offer-for-children-with-sen-and-disabilities/education/supporting-send-in-education/pupils-with-asc/resources-for-professionals.aspx	We use this every year and not just with children who have ASC

Social, Emotional and Mental Health

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
101 games for social skills	Social skills	Group activities to boost social ability and understanding.	No	J Mosley and H Sonnet (Authors) Available online: https://www.amazon.co.uk/Games-Social-Skills-Jenny-Mosley/dp/1855033704/ref=pd_sim_14_2?_encoding=UTF8&psc=1&refRID=A5SRCHX1X3FKNPAP3044	There are a few different versions, and they are all good.
Books about managing emotions - 'The Huge Bag of Worries' (Virginia Ironside); 'A Volcano in My Tummy' (E Whitehouse and W Pudney); 'The Red Beast' (K Al-Ghani) and 'How are you feeling today?' (Molly Potter)	Anxiety, anger, recognising and understanding emotions	Worksheets and story books to explore anxiety, anger etc.	No	All available to order online, e.g. via www.amazon.co.uk	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Black Sheep resources - Pragmatics and Semantics, emotions, facial expressions, talking about friends, school, transfer to secondary school etc.	Limited emotional literacy - understanding emotions and managing feelings.	Photocopiable resources to use as a basis for group work on emotional literacy, social skills, conversation skill, social understanding etc.	No	Black Sheep Press: www.blacksheeppress.co.uk	Teacher's notes, photocopiable pupil worksheets
Mental Health and behaviour in schools	Social, emotional and mental health	Department for Education advice for school staff on supporting children with emotional and behavioural difficulties	No	Department for Education https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2	
Nurture groups - 'Beyond the Boxall Profile: Strategies and Resources (Revised)'	Social skills, co-operating with others, managing feelings and behaviour.	An early social intervention, with entry and exit criteria, providing support and activities to develop social and emotional skills. Using the information from the Boxall Profile, 'Strategies and Resources (Revised)' provides ideas about how to engage with vulnerable children and address their identified needs.	No	The Nurture Group Network: https://www.nurtureuk.org/product/beyond-the-boxall-profile/	Practical suggestions for activities. Resources need to be gathered in advance

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
'Recognise Emotions' books by Peter Rigg	Recognising and understanding emotions	Recognising Emotions' - 4 books of graded situations, describing emotions and selecting the faces that fit the scenario.	No	Learning Materials Ltd. Available online, e.g.: http://www.learningmaterials.co.uk/epages/BT4626.sf/en_GB/?ObjectID=17044943	
Starving the Anger Gremlin and Starving the Anxiety Gremlin	Anger/anxiety, and recognising and understanding emotions	Cognitive Behavioural Therapy Workbooks on Anger/Anxiety Management for Young People	No	K Collins-Donnelly (Author). Available online, e.g.: https://uk.jkp.com/collections/author-kate-collins-donnelly-pid-210607	

Sensory and Physical

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Clearvision	Visual Impairment	A postal lending library of braille and tactile books	No	http://www.clearvisionproject.org/	Need to become a member (free for parents)
Creating good listening conditions for learning in education	Hearing Impairment	A series of resources to set out the steps that can be taken to improve the listening environment in schools, nurseries and other education settings	No	http://www.ndcs.org.uk/professional_support/our_resources/acoustics.html	
CustomEyes	Visual Impairment	Custom made large print books available to buy	No	https://www.guidedogs.org.uk/services/children-and-young-peoples-services/customeyes	Need to become a member (membership free)
Success from the start: A developmental resource for families of deaf children aged 0 to 3	Hearing Impairment	Document the progress of children in the first 3 years after deafness has been diagnosed	No	https://www.ndcs.org.uk/documents-and-resources/success-from-the-start-a-developmental-resource-for-families-of-deaf-children-aged-0-to-3/	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Motor skills United	Limited fine and gross motor skills	An Occupational Therapy Programme consisting of colour coded activities to develop motor and perceptual skills. The activity cards are organised into colours for each skill base, covering hand-eye coordination, eye tracking, bi-lateral integration, core stability and balance, spatial awareness, proprioception and auditory/visual sequencing.	No, but training available	S Holmes and W Barry (Authors) Available from: https://www.tts-group.co.uk/motor-skills-united-occupational-therapy-programme/1002394.html	Teacher's notes/lesson programmes, resources need to be collected in advance.
NDCS Supporting the achievement of deaf children and young people	Hearing Impairment	The NDCS Supporting Achievement series provides education professionals with advice on deaf-friendly teaching and support, and includes specific resources for early years settings, primary schools and secondary schools.	No	https://www.ndcs.org.uk/information-and-support/being-deaf-friendly/information-for-professionals/supporting-the-achievement-of-deaf-children-and-young-people/	
Positive Eye – Resources	Visual Impairment	Resources offering useful practical tips to settings to support curriculum access for children and young people with vision impairment and SEND. Resources include:	No	https://positiveeye.co.uk/resources-2/	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
		• Item 24. Self Reflection School Based Teaching Assistants • Item 25. Self Reflection Class Teacher • Item 26. Quality First Teaching Audit			
RNIB Bookshare	Visual Impairment	Source for downloadable print resources, including education resources	No	https://www.rnibbookshare.org/cms/	Need to become a member (membership free)
SeeingEar	Visual Impairment	Online library and source for downloadable print resources, including education resources	No	http://www.seeingear.org/	Need to become a member (membership free)
Speed up! Book	Physical - handwriting	A kinaesthetic programme to develop fluent handwriting	No	L Addy (Author) Available online, e.g.: https://www.amazon.co.uk/Speed-Up-Kinaesthetic-Programme-Handwriting/dp/1855033860	recommended by OT
Write Dance	Physical - handwriting	Programme which uses music and movement to introduce handwriting to children	No formal training	R Oussoren (Author) Available online, e.g.: https://uk.sagepub.com/en-gb/eur/author/ragnhild-oussoren	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Write from the Start	Limited hand-eye co-ordination and pencil control	Consists of two pupil workbooks of graded activities to develop hand-eye co-ordination, form constancy, spatial organization, figure-ground discrimination, orientation and laterality.	No	I Teodorescu et al (Authors) Available online, e.g.: https://www.amazon.co.uk/Write-start-Programme-Perceptual-Handwriting/dp/1855032457	Photocopiable pupil worksheets and a teacher's manual

Miscellaneous (including subject specific resources)

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Kerboodle	Science (plus other subjects)	This is linked to AQA. Online teaching, learning and assessment service. It provides worksheets, extension tasks and revision.	No	Kerboodle https://global.oup.com/education/secondary/kerboodle/?region=uk	
Linguascope	Modern Foreign Languages	Revision to reinforce learned skills and vocabulary games	No	Linguascope http://www.linguascope.com/	
NASEN Early Years SEND Resources	All areas of SEND	Webcasts, miniguides and training materials related to SEND and Early Years	No	https://nasen.org.uk/early-years	
Maths Watch	To develop maths skills	Reinforces learned knowledge. Key skills are demonstrated and talked through then allows the student to practice and hone in on their skills. Available for primary, Key Stage 3 and GCSE.	No	Maths Watch Ltd http://mathswatch.co.uk/	
Method Maths	Maths	To provide students with exam techniques through interactive papers. Available for Excel, OCR and Key Stage 2.	No	Method Maths https://www.methodmaths.info/	
My Maths	To develop their maths skills	Online learning platform which reinforces learned knowledge	No	https://www.mymaths.co.uk/index.html	

Name of Resource	Which need does it meet?	What does it do? (Brief description)	Is formal training or a qualification required to use the resource?	Where is it available from? (e.g. Company name and/or web link if possible)	Any other comments?
Nessy Fingers - touch typing programme	Word processing	Suitable for ages 7+ years. Consists of games and strategies to develop and practise basic touch typing skills.	No	Nessy https://www.nessy.com/en-gb/product/nessy-fingers-school	Online programme including games to develop spelling skills.
Number Shark	Games to develop maths	Computer programme to improve understanding and use of numbers	No	White Space http://www.wordshark.co.uk/index.aspx	
The Key	All SEN matters	Answers questions for SENCOs and provides templates for policies, action plans etc. Gives ideas for interview questions etc.	No	https://schoolleaders.thekeysupport.com/	Need to subscribe and there is a cost
Twinkl	All SEN	Lots of resources are available on Twinkl - some are free, some you need to pay for.	No	http://www.twinkl.co.uk/resources/specialeducationalneeds-sen	
Well at school	Health issues	Website offering advice for supporting children and young people with medical conditions	No	https://www.wellatschool.org/	
Words First	Word recognition - where a pupil has difficulty with phonics	A structured approach to reading and writing the common words, in isolation and in context, by linking word recognition and comprehension skills in a series of graded steps.	No	Sound Learning http://www.shop-soundlearning.co.uk/	Teacher's notes/lesson programmes, photocopiable pupil worksheets and assessment. Supplementary resources can be added.

Appendix 6: Cheshire East Outreach Services

What is Outreach?

The Outreach Service can provide specialist support and advice on Special Educational Needs to Mainstream Primary and Secondary schools.

Adelaide Crewe	Social, Emotional, Mental Health Year 4 - Year 11
Adelaide Heath Knutsford	Social, Emotional, Mental Health Year 4 - Year 11
Oakfield Lodge Crewe	Re engaging pupils back into Mainstream Year 7 - Year 11
Corner Stone Academy Sandbach	Re engaging pupils back into Mainstream Year 1- Year 6
Church Lawton School Alsager	ASD - High Functioning EYFS - Year 13
Park Lane Macclesfield	Cognition and Learning/ ASD EYFS – Year 13
Fermain Academy Macclesfield	Re engaging pupils back into Mainstream Year 8 - Year 11
Springfield School Crewe	Cognition and Learning/ ASD EYFS - Year 13
Springfield School Wilmslow	Cognition and Learning/ ASD EYFS - Year 13
The Axis Academy Crewe	Mental Health Year 4 - Year 13

When is Outreach available for schools and settings

The Outreach Service has been set up to offer additional support and specialist advice to schools and settings at the earliest possible opportunity in order to support in meeting the needs of their children and young people.

It is an extra support mechanism that can be utilised at different stages and will share best practice, resources, guidance and training.

It can be utilised to support pupils on SEN Support and with an EHCP and can help to improve the inclusion and life chances of all vulnerable pupils.

Key aims of the service

- To advise and support on interventions and strategies for pupils with SEN.
- Offer schools a range of training opportunities.
- Observe pupils in their setting and offer advice to support staff.
- Support and advise on behaviour strategies.
- Deliver a bespoke support package.
- Devise an initial support programme.
- Evaluate and establish next steps.
- Produce a report containing suggested strategies.
- Opportunities for staff to spend time in a special school for CPD.

What does it look like?

- Schools complete a referral form outlining the reason for the request.

- Outreach workers will review the form and decide on the best service to meet the request from the offer below.
- An initial visit is made to the school or further discussion regarding training.
- For individual pupil support there is a maximum of 6 visits working alongside the pupil, TA and teacher in the classroom.
- A record of strategies will be provided for the school.

What Outreach does not include.

- Attending annual reviews
- Writing reports for EHCP's
- Advising parents on specialist provision
- Making judgement on a child's SEN needs
- Making decisions for schools on a change of setting

Cheshire East Outreach Service

In conjunction with CE Special Schools

Support menu

Referral

Please complete the attached referral form if you would like to access support from Cheshire East's Outreach Service

Cheshire East Outreach Model (office.com)