The Griffin Federation

Learning Together for Excellence

Identifying special needs pathway

Teacher shares concerns about pupil's needs with SENDCo at any time. Teacher completes Initial Concerns form including support

Parent shares concerns about pupil's needs with teacher and/or SENDCo at any time.
Teacher completes Initial Concerns form including support already tried. VSEND

And / Or

Pupil placed on initial concerns register and evaluate progress.

SENDCo refers to outside agency

Pupil makes

Pupil makes limited or no progress

Advice provided and/or diagnosis

No impact upon provision in school.

Initial concerns continues while 2 stages of the assess, plan, do, review stage is

Pupil placed on SEND Register and Individual Educational Plan (IEP) in

No SEND provision needed.

Parents need to be kept informed at all

Initial Concern Form

Name:		Male/Female	DOB:
Class:	Home Language		
Teacher:	Date concern completed:		
Current Assessment Data:			
English	Reading	Writing	S&L
Maths	U&A	Number	Shape/S/M

ASSESS:

Language and Literacy

Writing : Letter formation, spelling, sentences, handwriting, fluency	
Reading: word attack skills, phonics, sight vocabulary, fluency and confidence	
Speech and Language :	
Language: Ability to understand words and sentences so that they can follow what is being said. Ability to organise thoughts and ideas using appropriate vocabulary into grammatically correct sentences ready for talking.	
Speech: ability to say sounds and combine sounds together to say words.	
Communication: is the ability to say the right thing, at the right time in the right way. Using speech and language skills to send the message they want to send.	
Non-verbal communication (NVC) ability to understand and use gesture, body language, facial expression and voice to help communicate a message.	

Mathematics

e.g. counting, number operations, number recognition, sequencing, sorting, matching, measurement, shape, space, time, money.	

General learning skills

e.g. concentration, co-operation, work completion rate, independence, dependent upon staff support, ability to work without support in groups.	

Personal and Social Development

e.g. self esteem, confidence, motivation, poor organisation of self and equipment, attendance and punctuality.	

Behavioural

e.g. disruption to others, frequently out of seat, general off-task behaviour, makes noises, aggressive behaviour towards others or property, response to 'authority.'	

Emotional Development

e.g. withdrawn, isolated, shy, few friends, anxious.	

Physical Development

e.g. co-ordination, gross and fine motor control, left handed, laterality, pencil grip, clumsy.	

Sensory Needs

e.g. hearing, visual, not hearing instructions or unable to copy or see accurately.	

Medical Needs

List any medical conditions / needs which could affect learning, periods of hospitalisation.	

Other factors

List any other factors which could affect learning. e.g. family issues, transfer between schools.	

Contact with parents made?
Telephone
Face to Face
email

Parental Comments:

What have you already done to support this child?

(Refer to SEN toolkit for strategies of support)

REVIEW What was the impact?		
Actions Taken	Outcome/Impact	Date

Assess/Plan/Do/Review (Round 1 – To be completed over 1 term):

Complete VSEND to assist with identifying needs and support from Provision overview/SEND toolkit

Date plan Started:				
ASSESS	**PLAN and DO**		**Termly Review**	**Date of Review:**
Targeted areas of need (Expected Outcomes)	**Steps towards achieving outcomes** (What intervention, what resources/strategies will be used, who will deliver this, frequency?)	**Strategies at home** (what to do)	**Have the expected outcomes been achieved?**	

Assess/Plan/Do/Review (Round 2 – to be completed over 1 term):

Further actions – What has worked? What has not worked? What needs adapting to support better? What further outcomes are needed?

Date plan Started:				
ASSESS	**PLAN and DO**		**Termly Review**	**Date of Review:**
Targeted areas of need (Expected Outcomes)	**Steps towards achieving outcomes** (What intervention, what resources/strategies will be used, who will deliver this, frequency?)	**Strategies at home** (what to do)	**Have the expected outcomes been achieved?**	

Agreed Next Steps:

The Griffin Federation of Schools

Provision Overview

2024 - 2025

The Griffin Federation

Learning Together for Excellence

Area of Need	**High Quality Teaching (All Pupils) Level 1-2 strategies**	**Resources**

❖ levels of attainment which are generally lower than those of their age equivalent peers and age-related expectations. ❖ some difficulty in acquiring early development skills or language, literacy and numeracy skills. ❖ difficulty in dealing with abstract ideas . ❖ some speech and language difficulties e.g. generalising information, understanding abstract language ❖ some difficulties with fine or gross motor skills ❖ some signs of frustration ❖ limited skills in verbal exchanges ❖ avoidance strategies ❖ difficulties remaining on task or settling to an activity. ❖ infrequent lapses in memory or longer processing times. Specific Learning Difficulty (SpLD) ❖ misconceptions or taking longer to understand new concepts ❖ not attaining in line with general ability and oral skills	❖ pupil's name and eye contact established before giving instructions ❖ clear and simple instructions, breaking down longer instructions and giving one at a time – perhaps written down/pictorial ❖ check understanding of vocabulary used - Clarify, display and refer back to new and/or difficult vocabulary ❖ pre-teach vocabulary ❖ opportunities for pupils to verbalise their learning/check for understanding by asking the child to repeat/explain to a response partner. ❖ consistent use of positive language, encouragement and praise. ❖ give thinking time before response is needed. ❖ visual cues and prompts/ Key vocabulary displayed, working walls, word mats ❖ visual timetable, Now/Next boards ❖ access to grouping that enables pupils to work with peers who will provide good role models for language and communication skills and for co-operative and independent application to task. ❖ repetition and reinforcement of skills ❖ tasks simplified or extended (differentiation) ❖ opportunity to access and record information in a variety of ways including IT – word processing, voice activated typing, comic strips, ❖ use of coloured IWB backgrounds (try to avoid white as much as possible) ❖ multi-sensory approach to learning (VAK) ❖ writing frames/scaffolding ❖ modelling, explaining and questioning ❖ links to prior learning made explicit to pupils ❖ opportunities for pre- and post-learning ❖ link learning to real world situations **Literacy** ❖ daily use of read write inc. ❖ focused guided reading and writing groups are led by a teacher ❖ support to access reading materials. For example, reading buddy, adult help or use of ICT ❖ effective spelling strategies and provision of subject specific spelling lists, specialist dictionaries and thesaurus ❖ appropriate learning resources are available. For example, pencil grips, sloping boards, concrete materials, spelling aids, talking tins **Numeracy**	❖ Flexible grouping ❖ Voice tins ❖ Illustrated dictionary ❖ Vocabulary cards ❖ Writing frames ❖ Spellcheckers ❖ Visual prompts ❖ Individual whiteboards for drafting ❖ Talk partners ❖ Clear rewards and sanction systems ❖ Coloured resources e.g. paper, overlay, fonts ❖ Reading rulers ❖ Writing board ❖ Pencil grips ❖ Number lines ❖ Maths equipment ❖ Brain Gym ❖ Music to aid concentration and focus ❖ ICT resources (Laptop, Ipad)

❖ evidence of discrepancies between attainment in different core subjects or within one core subject of the curriculum ❖ difficulties acquiring good learning routines such as concentration, and may be resistant to learning. The pupil may struggle with handwriting	❖ access throughout all phases to concrete resources. For example, hundred squares, number lines, Numicon, cubes ❖ teach in the sequence of language, concrete resources and diagrams before symbols ❖ use of a calculator when calculation is not the focus of the lesson. For example, when solving word problems ❖ opportunities for over learning such as through games ❖ planned regular revisiting of prior learning. ❖ link learning to real world situations and make explicit other cross curricular links **<u>Support for Memory</u>** ❖ Slow down delivery of information ❖ chunk information and allow thinking time ❖ provide visual support. For example, gesture, diagrams or illustrations ❖ pupils have access to memory aids. For example, alphabet strips, number squares, post –its, keyword lists, table squares ❖ use of planning tools. For example, mind mapping ❖ provide written instructions alongside verbal instructions (if they read) **Developmental Coordination Difficulties (DCD)** ❖ Core stability. For example, wobble cushion, exercises and games ❖ Correct seating position. For example, appropriate size tables and chairs ❖ development of letter formation. For example, using a multi-sensory handwriting scheme, pencil grips, or sloping board. ❖ gross motor skills. For example, throwing, catching and hopping ❖ fine motor skills. For example, hand and arm exercises, specialist scissors, specialist rulers, pegboard, threading, play dough, or putting pegs on washing lines. ❖ sequencing and organisation skills. For example, first and next boards, writing frames, visual timetables.	
Area of Need	**Enhanced Provision – Level 3-4 strategies**	**Resources**

❖ evidence of continuing difficulties with literacy, numeracy and co-ordination which affect progress in other areas of the curriculum ❖ they are working outside of the programme of study for their key stage in one or more core subjects and progress is slow ❖ often has difficulties with independent working and has difficulties with reasoning, understanding or expressing thoughts. ❖ low level to moderate but persistent difficulties in acquiring expected literacy or numeracy skills. For example, phonic learning very slow to develop ❖ dependent on context, there are some difficulties with the pace of delivery, understanding instructions and prioritising or organising work ❖ poor phonological processing, working memory and processing skill ❖ working up to one year below age related expectations in attainment ❖ lack of concentration in some lessons	❖ differentiation is used to ensure the development of literacy, numeracy, expressive language and communication skills and to minimise behaviours and emotional difficulties ❖ access to adults who are skilled and experienced in supporting students with general and specific learning difficulties ❖ assessments focus on how the pupil is learning, more in-depth analysis of strengths and weaknesses and progress in relation to time ❖ arrangements to support the use and delivery of approaches or materials for students with Specific Learning Difficulties (SpLD) which may include multi-sensory teaching strategies, a focus on phonological awareness and/or motor skills programme ❖ make reasonable adjustments to the learning environment. For example, appropriate seating, individual work-station, visual timetable, timings of breaks and transition arrangements within the school day, use of timers ❖ use materials which reduce or support note taking, copying of diagrams and charts or provide alternative approaches to recording ❖ effective use of IT equipment to support learning. For example, speech to text software, such as Dragon or various note taking programs, text to speech software, such as Read, Write, Gold, or writing software, such as Clicker or DocsPlus as well as mind mapping software ❖ adapted use of multi-sensory teaching, targeted at area of needs ❖ pre and post-tutoring ❖ breaking down of tasks into even smaller steps ❖ small group intervention, using time limited programme at least twice a week, in addition to the daily phonics and numeracy sessions ❖ daily overlearning of the reading of irregular words ❖ daily over learning of the spelling relevant to the pupils need (For example, Topic based, high frequency words or irregular words depending on pupil's needs) ❖ opportunities to transfer knowledge of spelling at word level to sentence level through dictation ❖ opportunities for frequent game-based activities to reinforce learning and develop skills. For example, games for memory, numeracy, reading, spelling and motor skills ❖ work systematically at the pupils' pace until mastery level is attained ❖ targeted intervention such as precision teaching, paired reading, spaced-learning, memory games ❖ some use of small group or 1:1 programmes, planned by the teacher and delivered by a TA, to address specific difficulties ❖ considered use of 1:1 support to encourage learner's independent access to the curriculum and their learning ❖ progress in interventions is recorded and shared with teachers so that learning is transferred and focussed teaching can be planned to address any difficulties	❖ Increasing range of specialist IT equipment e.g. keyboarding skills, ❖ Personalised programmes to support areas of need ❖ Maths games ❖ Phonics Games ❖ Read Write Inc cards ❖ Nessy Read/spell programme ❖ Toe by Toe ❖ Dictation software – note taking on the Ipads ❖ ICT resources to support reading and writing e.g. Clicker 7 ❖ Working memory resources (STT give suggestions in their reports) – see file in SENDCo room ❖ Visual memory resources (STT give suggestions in their reports) - see file in SENDCo room ❖ Auditory memory training (Speak to SENCo for ideas, or Google on internet)

❖ suspected memory difficulties ❖ possible low-level behaviour problems or work avoidance ❖ may find it difficult to follow lengthy (more than 2 or 3 step) instructions and routines ❖ support needed to organise resources or new activities ❖ difficulties with adaptive behaviour and social skills. For example, can seem immature when compared to peers	❖ opportunities are provided for skill reinforcement, over learning, revision, transfer and generalisation ❖ access to resources such as coloured paper, coloured overlays, handwriting grips, auditory and/or visual memory programme, coloured 'whiteboard', reading ruler, fiddle object, brain breaks, ear defenders, everyday readers ❖ advice from external agencies is implemented in the classroom ❖ classroom or teaching adjustments need to create psychological safety For example, cold call questioning or reading aloud in front of the class may be stress-inducing ❖ use of visual reminders, timers, resources and rewards to develop independence	
Area of Need	**SEND support Level 5-6**	**Resources**
❖ persistent difficulties with the acquisition or use of language, literacy and numeracy despite high quality teaching and relevant, focused small group interventions ❖ significant and persistent difficulties with concept development and logical thought ❖ displays poor learning habits and concentration difficulties and is often resistant to learning. ❖ significant difficulties in tasks involving specific abilities such as sequencing, organisation, phonological awareness,	❖ pupils will have continued access to good high quality teaching and targeted intervention ❖ daily highly individualised learning programmes using well researched evidence-based interventions, managed and monitored by the SENDCo, will be in place ❖ where a pupil does not make sufficient progress through the previous interventions and provision list above, staff should decide on more personalised intervention, which is time-bound and quantifiable. Advice and support should be sought from Specialist Teachers and professionals to best address the pupil 's needs ❖ monitor the progress of the pupil using structured methods. This support should be recorded following the graduated approach and reviewed in line with the SEND Code of Practice ❖ on-going opportunities for 1:1 support focused on specific personalised targets, with reinforcement in whole class activities, to aid transfer of skills ❖ mainstream class with regular, targeted, small group support ❖ further modification of level, pace, amount of teacher talk to address pupil's identified needs ❖ structured and multi-sensory approaches to learning to be addressed ❖ advice from external agencies is implemented in the classroom ❖ additional specific provision and or advice might include: o a detailed time-limited programme o personalised timetable o personalised curriculum o personalised resources	❖ Specialist support and interventions (EPs, Advisory teachers, Outreach, STT) ❖ Intervention programs Precision teaching key facts cards

concentration or short-term memory and which, in turn, impacts negatively on literacy and mathematics, significantly greater and more persistent than would normally be expected for students of their age ❖ learning assessments indicate difficulties with pace of delivery, understanding instructions and prioritising or organising work ❖ identified or suspected memory difficulties ❖ below average range for attainment, with a standard score of 80 and below or working up to 2 years below age related expected attainment levels ❖ regular behaviour problems or work avoidance ❖ may find it difficult to follow lengthy (more than 2-3 step) instructions ❖ support needed to organise resources or new activities ❖ difficulties with adaptive behaviour and social skills. For example, can seem immature when compared to peers	○ personalised learning environment ○ personalised resources from external agencies ❖ further enhanced opportunities to use technological aids or assistive technologies which are more personalised to the learner ❖ using the correct assessment tools to accurately capture pupil's attainment when working outside the expected range for the year group or key stage ❖ routine opportunities for over learning and practice of basic skills on a daily basis ❖ emphasis on automaticity, skill mastery, and generalisation of skill, at a level appropriate to the pupil's developmental stage ❖ some withdrawal for short periods with learning planned by the class or subject teacher or additional teacher and reinforced within the classroom ❖ individual diagnostic assessment of pupil's fundamental skills and knowledge to identify specific gaps that are preventing progress ❖ development of automaticity should be facilitated through overlearning opportunities ❖ implementation of SEND plans across all areas of the curriculum and curriculum leaders to be aware of adaptions made to support SEND learners in their area ❖ presentation and delivery may require modification and support through the use of real objects and links to real life (avoiding the abstract) ❖ personalised small steps targets within group programmes or 1:1 ❖ regular liaison between external professionals and school staff in relation to specific programmes and targets ❖ teachers access training and support from experienced teachers and teaching assistants, who can provide the most relevant up to date advice and guidance, to ensure quality delivery of SEND provision	

Communication and Interaction		
Area of Need	**High Quality Teaching (All Pupils) Level 1-2 strategies**	**Resources**

Speech Language and communication ❖ there is immature understanding of verbal language, with limited vocabulary beyond the everyday context. ❖ occasional difficulty in understanding instructions ❖ occasionally there are some difficulties with listening and attention ❖ there is immature use of verbal language, with limited vocabulary beyond the everyday context ❖ some subject specific vocabulary takes longer to acquire than for peers ❖ the pupil will take longer than peers to find the word they wish to use ❖ there are concerns about immature speech sound development ❖ there is inconsistent and slow progress in phonic development	**Speech language and communication** **Attention and listening** ❖ get down to the pupil's level and say the pupil's name to gain attention ❖ minimise noise and visual distractions ❖ simplify your language to the appropriate level ❖ chunk instructions ❖ provide visual support to reinforce understanding (objects, photos, pictures, symbols, prompt cards) ❖ model expectations by showing the pupil what they have to do ❖ practice and reinforce good looking, good listening, good waiting ❖ provide explicit praise when they remember and follow the rules ❖ provide additional processing time ❖ set time limits for pupils to complete tasks and make visual, For example, sand timer **Speech** ❖ develop phonological awareness (alliteration, segmenting, blending, rhyming) ❖ provide clear adult models of speech ❖ sensitively remodel what the pupil has said by repeating it back accurately ❖ respond positively to what the pupil has said rather than how they have said it ❖ encourage the use of gesture, objects and signing to support their speech ❖ use stories, tongue twisters and rhymes with repetitive use of individual sounds to reinforce and highlight clear articulation ❖ play sound discrimination games **Comprehension** ❖ Consider the sensory environment in order to limit distractions. ❖ modify your language as appropriate. Consider – pace and complexity. Chunk instructions into manageable parts. ❖ use a multi-sensory approach to teach and reinforce vocabulary and concepts. For example, real objects, concrete situations, photos, pictures, symbols ❖ make reference to pointing out the phonological structure of words when building comprehension as this helps the word to be more easily remembered and used ❖ explicitly teach and use classification or categorisation activities to reinforce and extend semantic links ❖ teach pupils how to recognise when they have not understood and what they could do ❖ provide opportunities to develop auditory memory ❖ develop awareness and understanding of question words and narrative structure **Expressive language** ❖ provide opportunities to talk	❖ Visual timetables/prompts – good listening etc, ❖ First / next board ❖ Simple Social Stories – See Miss Scarsbrook for examples ❖ Role-play scenarios ❖ Buddy system ❖ Circle time activities ❖ Monitoring cards, e.g. traffic lights or rating scale to see how a child is feeling ❖ Communicate in print vocabulary cards – this resource is on my laptop ❖ Colourful semantic cards for sentence extension – See Miss Scarsbrook ❖ Talking Tins – See SENCo for these (I have 4 in my room). ❖ Letters & sounds phase one

	❖ to support spoken narrative use real objects, photos, pictures, symbols and explicitly investigate: appearance, where it is found, what it is used for , what category it belongs to ❖ model the language: Repeat. Emphasise. Expand. ❖ provide additional processing time in order that the pupil can formulate their response ❖ use multi-sensory approaches to teach grammatical features ❖ use colour coding to teach and reinforce grammatical features ❖ use forced alternatives For example, is it… or … ❖ use questions to support word finding, for example, what does it look like? can you draw it? can you show me? what is it used for? ❖ support and scaffold spoken narrative through the use of drama, puppets, story grids, boards and maps ❖ scaffold writing experiences through the use of story grids, boards or maps **Grammar and syntax** ❖ model appropriate use of grammar ❖ link speech with writing ❖ focus on one grammatical feature at a time and ensure that the objective is explicitly shared ❖ use a multi-sensory approach to teach grammar ❖ colour code the different aspects of grammar ❖ play barrier games ❖ use of sentence makers: ❖ say the sentence ❖ write the sentence ❖ cut the sentence up ❖ re-sequence the sentence ❖ social interaction ❖ provide regular opportunities to learn and play rule based and turn taking games, including, Circle Time ❖ model appropriate social phrases in context ❖ use visual support to reinforce expectations and rules, For example, good looking, good sitting, good listening, good waiting ❖ role play with adult support to mediate as appropriate ❖ plan opportunities to teach specific skills, For example, listening, turn taking, sharing ❖ use a range of non-verbal and verbal cues to maintain the topic of conversation ❖ explicitly encourage topic maintenance through the use of key phrases, For example "you can tell me about that later. now we are talking about…"	

	❖ ensure that all members of staff are aware of the pupil's social interaction difficulties and personal targets and plan ❖ manage access arrangements for internal and external examinations and assessments. For example, reader or scribe, extra time for assessments as needed. Ensure these are the normal way of working.	
Social communication difficulties ❖ the pupil finds social situations confusing or upsetting ❖ they are unclear about appropriate responses and how to form relationships, with limited development of conversational skills ❖ the pupil has a number of specific interests which can at times impact on engagement in learning activity, as they prefer to follow their own plans ❖ the pupil is reluctant to take turns and is unsettled by changes to routine ❖ difficulty making and keeping friends, loner, or has 'key' friends ❖ copes better with adults ❖ possible low-level behaviours ❖ "Quirky" ❖ conforming, but reported to be unhappy after school ❖ quiet or passive in nature, withdrawn ❖ some identifiable sensory needs ❖ signs of anxiety or 'meltdowns'	**Social communication difficulties** ❖ there is whole school awareness and understanding of SCD and ASC and its implications for the curriculum, both academic and social or emotional ❖ Autism Education Trust making sense of autism training is up to date for all setting staff. (Access through working together team) ❖ tasks may need to be differentiated by level, outcome, pitch or pace and grouping. Aspects of structured teaching (TEACCH) may be helpful to provide clarity of expectation (see resources section) ❖ class teacher uses appropriate social communication and sensory assessments to inform the plan, review, assess cycle ❖ staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for pupils with individual needs. For example, explicit, visual instructions, clear example of what finished looks like, alternative methods of recording considered ❖ provide effective home and school liaison; 'Success Book', communication book, regular email feedback ❖ whole class good practice strategies are embedded. For example, use of visual timetable ❖ pupil has regular opportunities to evaluate their performance in learning and social activities ❖ pupil's self-assessment routinely used to set individual learning and social targets ❖ effective home and school liaison is provided in a way that works for the setting, the family and the pupil ❖ seating is carefully considered ❖ there is consistency across staff, including routine, language and approach ❖ instructions are broken down at a whole class level ❖ teacher limits language, speed of delivery, vocabulary, duration of delivery ❖ pupil's name is used with specific instructions ❖ pupil and family are involved in developing strategies ❖ communication is explicit. For example, concrete positive instructions, praise for specific action, clearly defined expectations	

❖ frequent sickness, may be related to anxiety rather than poor health	❖ whole class good practice strategies are embedded. For example, use of visual timetable ❖ there are regular opportunities to self-assess performance in learning and social activities. Outcomes are routinely used to set individual learning and social targets ❖ "first, then" examples with objects or pictures are deployed (move to symbols and then words as appropriate)	

Area of Need	Enhanced Provision – Level 3-4 strategies	Resources
Speech Language and communication ❖ persistent delay or disordered speech sound production impacts on acquisition and development of literacy skills ❖ difficulties with spoken language or comprehension and in using language for learning impact on access to curriculum without universal school-based support ❖ performance may show a marked discrepancy between attainment levels in English and other areas of learning ❖ lower than expected attainment across a number of curriculum areas, compared to evidence of learners underlying ability ❖ significant speech or language difficulty prevents access to a large part of the National Curriculum ❖ limited range of vocabulary understood in writing and oral communication, compared to age-expected range ❖ difficulty in understanding instructions with multiple elements ❖ tires easily when listening and can sometimes appear inattentive or distracted ❖ the pupil sometimes struggles to express themselves verbally	**Speech Language and communication** ❖ the key person or practitioner takes responsibility for sharing knowledge of the child's strengths and areas for development with all staff. They ensure that resources and approaches are embedded and consistent across the provision to assist with securing best outcomes through the use of: o visual support to identify areas and resources o visual support to offer choices and opportunities o use of Makaton signing to support communication ❖ use of visual reminders, timers, resources and rewards to develop independence ❖ visual clues sensitively placed in the environment and referenced which support a clear daily routine ❖ if child struggles with these early concepts it is likely they will struggle with negative commands such as "don't run", instead try to re-phrase language such as "walk please" ❖ if child tries to say a word, say it back to them so that they can hear the name of the object clearly (don't make the child repeat the word correctly) ❖ specialist services should guide assessment, target-setting and intervention programme ❖ pre and post tutoring should enable the pupil to engage with learning in the classroom ❖ a range of supports within the classroom, including: o visual timetables o now and next o visual aids o natural gesture and signing o use of ICT o audio visual aids, should support understanding ❖ group work should be planned and opportunities tailored to meet identified need ❖ small group support For example, Circle of Friends, self-esteem group should be available ❖ specialist recommendations should be implemented and reviewed through the pupil's Individual Education Plan (IEP)	❖ TA/Mentor time ❖ Social Stories (see SENCo) ❖ Personalised learning station for time out etc ❖ Exit strategy / card ❖ Lunch time club ❖ ELSA ❖ Talkingpoint.org.uk ❖ Resources for word and sentence development, ❖ Colourful semantics cards and programme ❖ First Call resources in First Call Folder ❖ WELLCOM assessment and activities to support ❖ Phonics programme with strong phonological awareness ❖ First Call activities ❖ SALT Referral by SENCo

❖ most new vocabulary will take longer to acquire than for peers ❖ they may confuse words and will frequently use words out of context ❖ speech sounds are consistently immature, with motor difficulties relating to formation of sounds		
Social communication difficulties ❖ difficulties with social interaction (other areas of expressive language appear age-appropriate. The pupil's responses to verbal and non-verbal communication are often inappropriate ❖ challenging behaviour observed in variety of learning or social settings ❖ the pupil may exhibit passive behaviour, or elect not to speak across a range of contexts within the school day ❖ unstructured or social times are sometimes challenging and can result in low-level distress - they may isolate themselves ❖ the pupil can exhibit highly atypical behaviour, such as: obsessive, challenging or withdrawn behaviours, inappropriate use of language, abnormal responses to sensory experiences and signs of	**Social communication difficulties** • work with the parent or carer and the pupil to write, implement and monitor progress against personal targets is ongoing • a record of consultations with any external professionals, such as speech and language therapists, educational psychologists or specialist teacher is systematically kept and outside agency advice reflected in the Individual Education Plan (IEP) • interventions to develop social communication skills. For example, small group work, negotiating activities, turn-taking and sharing and role play, social stories are delivered as appropriate. Opportunities to rehearse, embed and generalise in real time through a rolling programme of support are built in • break times and lunchtimes are monitored with strategies in place to reduce anxiety during unstructured times. For example, support or adaptations • additional access to information technology (I.T.) may be necessary • pupil may need access to: o flexible teaching arrangements o help in acquiring, comprehending and using language o reference to blank language levels to adapt and develop language skills o help in articulation and acquiring literacy skills o where necessary, help in using low level alternative means of communication o support in using different forms of communication confidently for a range of purposes o regular reset breaks to maintain capacity for the environment and learning (before times of stress, anxiety or high arousal) o withdrawal facilities provided for times of stress	

distress requiring significant adjustments ❖ there are sometimes difficulties in understanding and using non-verbal communication, and in understanding social 'rules' (including how to maintain a conversation) ❖ the pupil has very strong interests that can sometimes take precedence over instructions ❖ there is sometimes difficulty in switching tasks, maintaining attention in directed tasks, and in organising or conceptualising future activity ❖ difficulty making relationships with peers ❖ comfortable with familiar adults ❖ likely difficulties reported from home ❖ some identifiable sensory needs ❖ meltdowns ❖ anxiety behaviours are displayed. For example, timings, staffing, routines ❖ some inflexible or rigidity in thinking, a need to complete an activity in a certain way, a need to know changes in advance ❖ avoidance of eye contact ❖ some rigidity of thoughts which affects learning and	○ opportunities for the development of social interaction and communication skills from individual starting points • assessment captures small steps of progress • access to classroom teaching is supported through 'scaffolding' and pre-learning approaches • overlearning and repetition of learning in a range of environments to aid generalisation of communication and social skills • strategies used to facilitate transfer from one school or teacher to another, may include passports, one-page profiles, a familiarisation book of photos of the new environment, a file of coping strategies/equipment and social scripts • structured programmes of work may need to be clearly set out via a visual schedule or **'now and next'** approach • there should be consistency within the classroom in terms of organisation, structure, routines, space and place • the pupil may need access to a workstation or equipment for Augmented and Alternative Communication (AAC), e.g. Picture Exchange Communication System (PECS) (direct adult input and support will be necessary in early stages), signing or due to sensory integration differences • spaces to support sensory needs are available; offer a range of sensory equipment. For example, stress balls, fiddle toys, classroom jobs, and movement opportunities • strategies such as social stories, comic strip conversations, **LEGO Therapy** , **PIKAS** and Circle of friends may be used to promote social success and appropriate behaviour • use of 'twiddle items' in learning times • personalised visual timetable are provided, prompts, checklists, plan of the day • recognition and adjustment for the pupil seeing the detail and not the concept (fragmented perception) • **Bloom's Taxonomy** – for adult questioning • quiet space available – time out cards, lunch passes • sensory adaptations, uniform, additional snacks, drinks, toilet breaks, ear defenders, distance from unpleasant sensations, fidgets, or alternative seating. • staff have received focused training on autism or social communication differences in order to understand the individual's profile of strengths and areas to develop • consistency amongst staff, routine, language and approach • implementation and monitoring of agreed actions following specialist advice • assess social progress using a resource such as the Autism Progression Framework (see Resources)	

affecting being a member of a group in some contexts ❖ moderate difficulty with understanding language and communicating ❖ appears highly verbal but requires visual support to understand language ❖ responds to simple instructions in context or uses simple language to express needs, sustains listening concentration for short periods ❖ being quite literal in interpreting situations	• individualised targets, including at least one target focusing on the pupil's social development • parent or carer to be involved in the formulation, monitoring and implementation of targets • use of a home-school liaison in an agreed mode to aid communication. The pupil may need an individual risk assessment and support, de-escalation plan • staff able to implement assess, plan, review cycle using appropriate tools. Staff able to monitor and assess for access to special exam arrangements • the school will monitor and assess for access arrangements for examinations, and, where the pupil meets the JCQ criteria, the school will make application for appropriate adaptions in consultation with parents or carers	
Social communication difficulties ❖ the impairments resulting from the pupil's SCD or ASC affecting their social development, communications and rigidity of behaviour and thought are enduring, consistently impeding their learning and leading to severe difficulties in functioning within the setting environment ❖ evidence of the pupil's need for a more specific programme of support to develop their social communication skills ❖ evidence of significant difficulties persisting for the pupil as a result of their inflexibility of thoughts (resistance to change and new	**Social communication difficulties** • highly individualised learning programme developed by the leader of SEND (SENDCo, Inclusion Manager) with support from external professionals as required, recognising their journey towards that outcome may be different to their peers and evidencing: o advice from external professionals, interventions implemented and impact on progress o planned strategies to support the individual pupil with expected outcomes o strategies recommended by specialists and assessment tools and resources will inform outcome setting and cycles of assess, plan, do, review • regular or daily small group or 1:1 teaching of social skills with support to rehearse, embed and generalise those skills in real time will be provided • activities to target: o peer awareness o social understanding and insight o recognising and understanding emotions in themselves & others o use of language to communicate o specific conversational skills o non-verbal skills- body language o group work skills-roles and turn taking	

experiences, impaired theory of mind). ❖ high levels of anxiety ❖ co-occurring difficulties or neuro diverse needs. For example, co-ordination difficulties, attention difficulties ❖ additional speech and language difficulties ❖ more prominent sensory needs ❖ more intensive rigidity or single mindedness. Has persistent patterns of behaviour that interfere with their ability to learn ❖ they struggle to understand social interactions and interpret other people's behaviour, intentions, social cues and norms and non-verbal communication such as eye contact, gesture, and do not always recognise conversational breakdown ❖ they lack the ability to manage conversations with either adults or peers, and social interactions needed to make and maintain friendships. ❖ may have intense or obsessional friendships or relationships ❖ high anxiety manifested in avoidance or stress indicators often leading to challenging behaviour	○ how to use unstructured times ○ friendships-qualities of a friend, maintaining a friendship and resolving conflict for example • teaching style adapted to suit pupil's learning style. For example, level, pace, use of language, volume, amount of teacher talk reduced, practical activities • some targeted, high quality support from adults in class which supports engagement in learning and encourages independence from the earliest time • chunking work into small steps of learning • awareness of social and emotional aspects of need and focused work to support development of these skills • established communication strategies to facilitate communication and to assess learning. For example, PECs or visual communication support • personalised motivation systems known to all staff in school that have contact with the pupil, implemented consistently across the curriculum. These are updated regularly to engage and motivate. identified regular support to undertake the following: ○ prepare and make relevant visual supports and structure ○ consistent use of personalised Social Stories, where appropriate ○ facilitate alternative recording strategies. For example, keyboard for writing if needed • modified and adapted PE lessons as required • ICT equipment as necessary in exams • adjusted, flexible timetable introduced in negotiation with pupil, parents and staff. For example, temporary withdrawal from some activities, including assemblies, specific lessons • time-limited intervention programmes with staff that have knowledge or skills to address specific needs, may include withdrawal for social interaction or communication groups though should not be from preferred activities or subjects • individual work around recognition and understanding of emotions, including personalised visual supports and resources or interventions. For example, 5 Point scale, feelings board, zones of regulation, blob trees • use of key-working approaches or mentor to ensure the pupil has trusted adult to offer support for both self and mutual regulation during vulnerable times • peer awareness is actively promoted and embedded in everyday practice • detailed time limited intervention programme. For example, socially speaking, Lego therapy, musical interaction	

❖ experiences 'meltdown' regularly
❖ prefers to play alone and tends to focus on own choice of activities. Limited interest in pretend and imaginative play, prefers concrete and repetitive activities
❖ difficulties with change in routine or in response to expectations, even with forewarning. Times of change can trigger obsessive and repetitive behaviours or short-term distress
❖ has sensory issues such as oversensitivity to noise
❖ pssible mental health difficulties
❖ consistent difficulty with understanding language and communicating
❖ pupil's language difficulties affect curriculum access, indicated by attainments below expected level, and poor social relationships. For example, appears highly verbal but requires visual support to understand language
❖ the pupil's ability to communicate effectively may fluctuate depending on their level of emotional regulation
	• use individual work station, where deemed appropriate throughout the school day, to develop independence, to practice and reinforce learning where appropriate to the pupil
	• use autism champion in school to support planning
	• short term small group or individual intervention, to develop engagement in specific areas of curriculum as identified by the subject teacher or EP, specialist teacher, following a programme designed or recommended by that professional
	• use of specialist interests of the pupil to help engage and motivate in lessons
	• individual support for pre and post teaching including to retrieve prior learning
	• individualised support to implement recommendations from support services. For example, SEST, SALT,
	• programmes developed to include 1:1 or group teaching of social communication and interaction skills and emotional regulation and support to recognise and apply in real time
	• consideration given to delivery of PSHE to ensure key messages are understood
	• individual emotional 'checking in' and 'checking out' at beginning and end of session or day to encourage self -monitoring. Adult modelling is essential
	• highly individualised learning programme developed by the Leader of SEND (SENDCo, inclusion manager) with support from external professionals as required which evidences:
	  ○ advice from external professionals, interventions implemented and impact on progress
	  ○ planned strategies to support the individual pupil with expected outcomes
	  ○ class teacher and supporting staff will use advised strategies and assessment tools or resources to inform outcome setting and using the plan, review, assess cycle
	  ○ use of **Engagement Steps** model
	  ○ working within their perception of a social situation
	  ○ opportunity for positive social experiences-being able to reflect on what went well
	  ○ use of relax room or safe space when feeling overwhelmed
	  ○ evidence of recognised, relevant and explicit social communication differences, autism specific interventions having been attempted or implemented and which have been monitored and reviewed in collaboration with external professionals
	  ○ further modification of level, pace, amount of teacher talk to address pupils' identified need	

	○ personal handling plan, positive handling plan to identify de-escalation techniques ○ risk assessments to identify and address possible areas of risk for the pupil ○ specific training or workshops on areas of need - **AET Complex Needs and participation: structured teaching** , autism and anxiety, supporting pupils with a profile of demand avoidance	
Area of Need	**SEND Targeted support- Level 5-6 strategies**	**Resources**
Speech Language and communication ❖ the pupil finds it difficult to understand language (written and verbal), concepts and vocabulary beyond the everyday context – this may result from verbal dyspraxia, disordered language etc. - affecting reasoning and predicting skills ❖ frequently listening and attention difficulties, and associated difficulty in understanding age-appropriate adult instructions ❖ difficulty in processing language in particular settings e.g. in whole class listening and discussions ❖ there are moderate difficulties in expressing themselves verbally, in terms of grammar, word-finding and/ or vocabulary ❖ poor generalisation of concepts and transfer of skills	**Speech Language and communication** ❖ additional adults support the child individually, under the direction of the teacher or speech and language therapist to: ○ work on modified curriculum tasks. For example, shorter more interactive repetitive stories, support for learning to include access to rebus symbols and Makaton signing ○ access regular individual support. For example, for skill building activities as advised by a speech and language therapist ○ encourage independence by the use of communication mats, communication books, demarcation and labelling of areas, the use of Makaton signing ❖ highly individualised learning programme developed by the SENDCo (or named person with responsibility for coordinating SEND) with support from, and in collaboration, with external specialists which evidences: ❖ individualised 1:1 support working on personalised targets as advised by the Speech and Language Therapy team or ECLIPS. Where specific language targets have been set, 1:1 time needs to be allocated for 20 minutes, 2 to 3 times weekly ❖ speech and language Therapist's or ECLIPS advice reflected in lesson and curriculum planning and delivery overseen by the SENDCo ❖ explicitly teach the use of sarcasm, metaphors, multiple meanings, and other forms of non-literal language ❖ identify any idioms or slang that is used in everyday conversation and explain its meaning ❖ give a vocabulary list of topic related non-literal language with explanations of meanings using pictures where possible	❖ High level of TA support ❖ Specialist team involvement, e.g. Gosberton House (WTT) ❖ Alternative teaching space ❖ Training for staff in social communication difficulties ❖ SALT programme & advice ❖ Training for staff in SLCN ❖ Makaton training for adult ❖ Communicate in Print for curriculum differentiation – See SENCo for this resource ❖ Advice from SALT ❖ Cued articulation cards

❖ they use alternative forms of communication when tired or stressed ❖ the pupil has poor speech intelligibility and therefore struggles to make themselves understood ❖ severe language delay, moderate language disorder. Severe or moderate problems in either, or both, understanding and expression ❖ in addition, one or more of the following also applies: o frequent difficulty communicating verbally beyond basic needs o frequently relies on a trained listener or family members for expressing themselves out of context o frequent difficulties participating in social activities in unfamiliar contexts or with unfamiliar people o frequent difficulties participating independently in unfamiliar educational activities	❖ an appropriate level of adult support to work towards specific targets ❖ adult support in class to transfer and generalise language skills learnt in 1:1 environment ❖ wide multidisciplinary team involvement may be required ❖ schools may plan and provide access to more specialised training for key workers from SALT or ECLIPS. For example, ELKLAN ❖ pre-teaching and over learning of key vocabulary and concepts ❖ classroom support time will include the supply of teaching and learning resources and delivery of intervention ❖ enhanced use of visual support for language and learning. For example shape coding, Makaton, cued articulation and vocabulary mats	❖ Adult support for speech application throughout the day ❖ First Call resources

Social, Emotional and Mental Health (SEMH)

Area of Need	Quality First Teaching (All Pupils)- Level 1 and 2 strategies	Resources
Behaviour for learning ❖ difficulty in following whole class instructions ❖ poor concentration ❖ possible developmental delay ❖ some signs of low-level disruptive behaviour, for example, calling out. ❖ occasional refusal or lack of capacity to follow reasonable routine requests ❖ some difficulties following classroom routines **Social skills** ❖ difficulties working in groups, sharing and taking turns ❖ underdeveloped social skills may create difficulties getting along with others ❖ difficulties forming positive relationships with peers or some teachers ❖ sometimes isolate themselves, for	**Behaviour for learning** ❖ strategic focus on building trusting and secure relationships. for example meet and greet every lesson. All teachers make time to engage on a personal level ❖ teachers adopt an attitude of Playfulness, Acceptance, Curiosity, Empathy (**PACE**) to build relationships as basis for learning ❖ make adjustments to behaviourist approach so pupil does not experience shame via classroom behaviour chart ❖ use logical and proportionate consequences ❖ consistently apply boundaries with empathy, using connection before correction so discipline does not risk relationship. An incident is a teachable moment. See empathic boundary setting, in training for professionals ❖ appropriate behaviour is noticed, praised and rewarded ❖ routine changes are explained and discussed with time to prepare for them ❖ differentiate tasks by level, outcome, pitch or pace and group to match learning needs, concentration level, interest and motivation ❖ consider classroom organisation, seating and group dynamics – informed by the pupil and how they feel safe ❖ assign age appropriate jobs or tasks to help build confidence, give responsibility and take any opportunities for praise ❖ use a behaviour diary to identify trigger points in the day so teaching staff can meet the need before it is presented **Social skills** ❖ teach social skills, through strategies such as circle time, friendship circles, discussion groups, mentoring or buddying, the PSHE curriculum ❖ consider seating plans and social expectations during group or paired activities ❖ increase opportunities for commentating social skills during group or paired work	❖ Visual prompts for positive behaviours ❖ Reward chart/system ❖ Time out/quiet areas ❖ Short sensory /eye/movement breaks for the whole class – google ideas on internet.

example- spending break times alone, low-level anxiety in social situations ❖ shows some distress when their plans are not followed or when required to take turns **Emotional regulation and self-regulation** ❖ low level or low frequency of social and emotional behavioural difficulties which interrupt learning in some situations ❖ some patterns of stress or anxiety in specific situations ❖ unpredictability, inconsistency ❖ immature social or emotional skills, for example - difficulties with turn-taking, reciprocal attention, sharing resources ❖ difficulties responding appropriately to social situations ❖ becomes disproportionately agitated and upset and takes longer than peers to calm down ❖ low self-esteem and confidence levels and is reluctant to attempt some activities as afraid of failure. ❖ sometimes (more than once a month) show signs of low mood or anxiety	**Emotional regulation and self-regulation** ❖ apply the three Rs - Regulate, Relate, Reason for the pupil to strengthen resilience and capacity for self-regulation over time ❖ parents and carers can understand the three Rs to reinforce the approach at home ❖ provide time-in rather than time out when pupil needs co-regulating ❖ use brain breaks within the classroom to support emotional regulation (See BOSS toolkits for regulation, in training for professionals) ❖ teach emotional skills, through strategies such as circle time, friendship circles, discussion groups, mentoring and buddying, the PSHE curriculum ❖ display language of emotions clearly, both in words and pictures, to assist with the development of emotional literacy. (accessible to the age in the class) ❖ use transitional objects' between home and school if difficulties are rooted in separation anxiety ❖ talk aloud to model emotional vocabulary. For example I'm feeling x because… ❖ be aware of worry indicators ❖ stay connected during conflict with short, concise sentences to contain emotions ❖ promote regulation with whole school mindfulness approaches ❖ growth mindset approaches (Dweck 1999) encourage pupils to give things a go even if they get them wrong ❖ adopt a trauma-informed approach school-wide, providing an emotionally regulating climate for all pupils	

❖ some difficulties complying with adult direction and are unwilling to acknowledge or accept responsibility for their own actions ❖ signs of anxiety in the classroom environment and reluctance to engage		

Social, Emotional and Mental Health (SEMH)		
Area of Need	**Enhanced Provision – narrowing the gag- Level 3-4 strategies**	**Resources**

Behaviour for learning ❖ emerging, frequent patterns of reluctance to following reasonable instructions or requests ❖ continued difficulties following routines ❖ poor concentration ❖ signs of disruptive behaviour ❖ increased absence or lateness ❖ responses causing interruptions for the whole class ❖ regular failure to engage with appropriate learning tasks and struggle with appropriate learning behaviour. For example sustaining attention and concentration, motivation to engage with work-related tasks ❖ relationships with adults in authority are difficult. They sometimes challenge rules and show resistance to adult intervention to help them manage their behaviour ❖ approach situations in ways which cause a barrier to learning such as disengaging, destroying own or others' work, using work avoidance strategies, often with limited concentration **Social skills** ❖ some difficulties forming positive relationships with peers or some teachers ❖ possibly isolated or withdrawn ❖ bully or victim role	**Behaviour for learning** ❖ Pastoral Support Plan (PSP) may be used to ensure that there is a coherent plan, supported by family and school. This involves a differentiated approach to behaviour policy ❖ regular communication is maintained with parent or carer through either a communication book or other agreed mechanism. Positives and strengths are shared as well as issues ❖ work station within the classroom reduces triggers or sensory overload. ❖ teaching is differentiated. For example level, pace or amount of teacher talk reduced, visual reinforcement or access to practical activities ❖ time out cards are used in conjunction with five point scale. Pupil knows when to use (at three) where to go and has regulating strategies to draw on ❖ baseline recording of particularly difficult or significant behaviours should be made in order to carry out an 'ABC analysis' to inform interventions and evaluations (Antecedents, Behaviour and Consequences) ❖ a choice of tasks to secure learning goal is provided ❖ pupil has access to calm box, fidget gadgets or other supports identified as stress-reducing ❖ the timetable may be personalised – For example - withdrawal from some curriculum areas for work on social and emotional skills or because they are anxiety-provoking and counter-productive ❖ reasonable adjustment to homework policy may be necessary. For example, reading only ❖ classroom or teaching adjustments need to create psychological safety. For example cold call questioning or reading aloud in front of the class may be stress-inducing	❖ SEMH small group work with pastoral TA ❖ Pastoral Support Plan for children who are at risk of disaffection and exclusion ❖ Personalised curriculum and structured activities ❖ Lunch Club ❖ BOSS referral and support/BIP

❖ difficulties working in groups, sharing and taking turns ❖ struggles with unstructured times and changes in routine ❖ signs of aggression or confrontational behaviours with peers ❖ struggles forming and sustaining relationships with peers and adults. For example they are withdrawn, or display a lack of empathy, victim or perpetrator of bullying **Emotional regulation and self-regulation** ❖ sometimes (weekly) displays distressed or ritualistic behaviours resulting from underlying emotional needs ❖ often (weekly) show low mood or refuse to communicate for periods of time. Increasing levels of anxiety are apparent at particular times ❖ sometimes use non-harmful coping strategies to hide their anxiety. For example presenting cheerfully ❖ significant self-esteem issues affecting relationships and behaviour patterns ('acting in' or 'acting out') and they will often pre-empt their own failure in school tasks ❖ experiences issues around identity, belonging and body image.	**Emotional regulation and self-regulation** ❖ help is provided to understand the anxiety curve and changes in body and mind that happen as anxiety increases. For example the 5 point scale (see resources section) ❖ grounding and regulating skills such as box breathing are taught (see resources) ❖ pupils have access to a key adult, for daily check-in and check-out and during crisis ❖ the pupil may need an individual risk assessment ❖ pupils have access to solutions focused coaching (key adults are trained). For Lincolnshire' solutions focused workbook, **email PRT** ❖ weekly intervention programmes with staff who have knowledge and skills to address specific needs. Include withdrawal for individual programmes. For example therapeutic stories, or targeted group work. For example, FRIENDS. Therapeutic Story Writing, Dealing with Feeling ❖ strategies to support self-regulation. For example use of a calm box, exercise, mindfulness, breathing techniques, sensory breaks or sensory circuits - walking, running, trampoline.	

❖ some patterns of stress or anxiety in specific situations. Unpredictability, inconsistency ❖ struggle with self-regulating emotion, experience strong emotions with no outlet resulting in inappropriate language or frequent (weekly) angry, emotional or aggressive outbursts, sexualised language, anxiety, mood swings, and unpredictable behaviour which affects relationships, learning and response to set-backs	❖ all pupils are taught about the impact of trauma and adversity so that they are better able to support one another and understand themselves - **The Compassionate and Connected Classroom** ❖ there is careful support for transition, both between lessons and between activities, to lower arousal	

Social, Emotional and Mental Health (SEMH)		
Area of Need	**SEND Targeted support**	**Resources**

Behaviour for learning ❖ inhibited participation in learning, understanding and contribution to activities in the classroom. ❖ non-compliance on a daily basis or disruptive behaviours ❖ difficult to learn from previous experiences, make good choices and understand the consequences of their actions. ❖ uncommunicative, significantly withdrawn behaviours or overly keen and attention needing behaviours such as calling out and making regular interjections that are not always linked to learning. ❖ little regard for school rewards and consequences. They often struggle to understand the consequences of their behaviour on themselves and others, which may result in aggressive behaviour towards peers or staff, or in unsafe decision-making more than once per week ❖ may show patterns of stress or anxiety related to specific times of the day in response to particular activities and instructions **Social skills** ❖ complex mental health needs which impact on their social relationships ❖ challenges in understanding the consequences of their behaviour	**Behaviour for learning** ❖ discuss seating arrangements with the pupil and decision making is informed by observations and sharing good practise with other practitioners ❖ set realistic targets regarding expectations, challenge non-compliance in line with the individualised plan for the pupil ❖ use consistent language and de-escalation strategies following non-compliance to avoid escalation ❖ challenge non-compliance discreetly to avoid negative impact on social inclusion ❖ strategies aimed at building the pupil's stamina to wait and regulate during question and answer sessions should be utilised. Staff to be mindful of expectations linked to diagnosed needs such as ADHD ❖ extra-curricular activities and trips are encouraged, supported by risk assessment. Focus on capturing the pupil's interests ❖ vocational learning or work experience may supplement the core offer for key stage four learners ❖ any access arrangements such as separate room and rest breaks are used for all formal assessments (ER and SR) ❖ group supervision enables staff to identify strengths and strategies that have proven effective as well as to problem-solve ❖ pupils may access alternative provisions, bespoke or personalised package **Social skills** ❖ ensure there are opportunities to plan for social expectations both in the learning and unstructured context ❖ the timetable may be adjusted to allow more time with key adult and solutions focused or other social and emotional work	❖ Access to 1:1 key adult time ❖ Interventions such as art/play/ELSA therapeutic approaches ❖ Feelings Detectives ❖ Referral for intervention placement

on themselves and others, and they may find it difficult to learn from previous experiences which may result in aggressive behaviour towards peers or staff, or in unsafe decision-making ❖ significant difficulties with social interaction, deteriorating relationships with adults or peers ❖ inappropriate language or communication (inability to adapt to context) ❖ inappropriate or risk taking behaviours ❖ possible sexualised behaviour towards others ❖ instances of aggressive or violent behaviour increase in frequency and severity ❖ significantly withdrawn and finds it very difficult to form social relationships, or disengages from relationships with most peers. ❖ over-friendly or withdrawn with strangers, and unaware of vulnerable situations. ❖ deteriorating attendance **Emotional regulation and self-regulation** ❖ the development of habitual behaviours impacts on participation in daily life on a weekly basis ❖ sometimes engage in in harmful coping strategies. For example	❖ planning for unstructured times must be provided. This could include small group or structured play opportunities to scaffold social skills ❖ opportunities for intervention linked to risk taking behaviours **Emotional regulation and self-regulation** ❖ daily interventions to develop emotion-regulation skills. These will directly teach the pupil the skills of recognising and regulating their emotions and learn strategies to lessen their effect and manage them. For example, through scenario-based discussions, visual approaches like comic strip conversations, role-play and enable the child or young person to practice these skills ❖ the above work would also focus on equipping the pupil with the emotional vocabulary to be able to highlight and pro-actively seek	

self-harm and activities which deliberately put them in dangerous situations. Leaving school, leading to extreme social isolation, vulnerability and disengagement ❖ persistent anxiety relating to separation from parent or carer beyond age-appropriate expectations and low levels of emotional resilience, meaning that any criticism or unforeseen upset results in high levels of distress or destructive behaviour ❖ difficulty regulating their emotions. For example intense emotional or aggressive outbursts, uninhibited unpredictable outbursts, inappropriate sexualised behaviour, high levels of anxiety, hyper-vigilance and mood swings to the extent that learning and progression is limited	support (which over time would move to self-management) when the pupil is feeling distressed ❖ time out cards enable access to a safe base and co-regulating adult, there is time in, not time out. Staff to be mindful that this requires executive functioning therefore explicit teaching and rehearsal must be implemented ❖ grounding and regulating strategies are taught, practiced and deployed within the daily routine **General** ❖ specialist advice, for example from BOSS, HML or CAMHS, may inform the support plan which will be underpinned by an up-to-date assessment such as Boxall ❖ there is a daily check-in and check-out with key adult, long enough to ensure that any worries are shared and mitigated ❖ the key adult makes regular contact with home, developing a close link and acting as advocate, safe base or single point of contact ❖ access to therapeutic approaches. For example, Cognitive Behavioural Therapy (CBT), solution focused, motivational interviewing and narrative therapy	

	❖ all staff are aware of emotional vulnerability and understand behaviour as communication. They are updated as required on events outside of home or in the past which have impacted and also the current management strategies that are in place ❖ staff should use therapeutic approaches, on a daily basis, to support and contain the pupil. For example through the use of principles like validation and containment in their day-to-day interactions with the pupil, as well as opportunities for appropriate therapeutic support ❖ social and emotional targets are SMART and owned' by the pupil. Staff are aware of these and progress ❖ time-limited intervention programmes with familiar staff that have knowledge, skills and experience to address pupil's specific needs, which may include withdrawal ❖ teaching focusing on both learning and social emotional curriculum or outcomes throughout the school day. Targets informed by specialist assessment or pastoral support programme (PSP)	

Physical or sensory		
Area of Need	**High Quality Teaching (All Pupils) Level 1-2 strategies**	**Resources**
Hearing Impairment ❖ hearing loss classified as mild loss, conductive or unilateral (21-40dB) ❖ pupils with a unilateral (hearing loss in one ear) or mild loss may be making satisfactory progress but are at risk of falling behind	**Hearing Impairment** ❖ if there are concerns regarding a pupil's hearing then the family need to talk to their GP for a referral to audiology service to have the pupil's hearing thresholds checked ❖ for a pupil with a diagnosed hearing impairment a referral should be made to the Sensory Education Support Team (parental consent and medical information will need to be received before a visit can be undertaken) ❖ arrangements in place for regular (daily where required) monitoring and checking of specialist equipment. For example, hearing aids and radio aids, by setting staff	❖ Visual aids and prompts ❖ Subject vocabulary dictionary ❖ Development of visual learning environments

❖ pupils sometimes mishear words or instructions and needs reinforcement and reassurance before beginning tasks ❖ fluctuation in attention; may struggle to listen for long periods of time ❖ difficulty in understanding peers in group discussions or on the playground; this could lead to anxiety and feeling isolated ❖ for children with a conductive element to their loss, frequent ear infections and absences for medical appointments ❖ a pupil with a unilateral loss may struggle to locate sounds and voices, especially during PE or sport and when there is a lot of background noise ❖ the pupil has a reoccurring conductive deafness (may be associated with middle ear infections, temporary perforated eardrums)	❖ classroom strategies to be put in place following individualised advice from the Sensory Education Support Team, which may include: - classroom observation, management advice and training for key staff - speech discrimination and language assessments - environmental assessments - parental support on issues related to hearing loss - appropriate lighting (For example, to aid lip-reading) - reduction of background noise ❖ deaf awareness training for all staff to raise awareness of different types of hearing impairment and strategies to reduce barriers to learning ❖ attention will need to be paid to seating position in classroom and the listening environment ❖ consistent use of any audiological equipment provided ❖ use of specialist materials. For example, National Deaf Children's Society (NDCS) Phonics Guidance and NatSIP – access arrangements for exams ❖ differentiated learning opportunities and reasonable adjustments are made to create a good acoustic environment and ensure access For example: - repetition of instructions - multi-sensory approach - additional support during speaking and listening activities - new vocabulary shared with parents - home-school book	❖ Use of carpets and curtains to support acoustics ❖ Vocabulary cards and cues ❖ Disability awareness training ❖ Clean whiteboards and good quality pens ❖ Sloping boards ❖ Use of blinds/curtains to block sun ❖ Range of pencils and grips ❖ Brain Gym ❖ Access to IT programmes and support tools ❖ Processing and keyboard training ❖ Handwriting practice
Vision Impairment ❖ some deterioration in certain areas of academic performance that are due to visual behaviours. For example, deteriorating handwriting, slowness in copying from the board and moving text closer to eyes or squinting ❖ increasingly asking for written instructions to be given verbally ❖ a recognisable ophthalmic condition which has potential to affect the learning process	**Vision Impairment** If there are concerns regarding a pupil's vision then the family need to talk to their GP, optician or ophthalmologist. ❖ For a pupil with a diagnosed vision impairment (corrected visual acuity worse than 6/12) a referral should be made to the Sensory Education Support Team (parental consent and medical information will need to be received before a visit can be undertaken). ❖ a member of the SEST may visit and undertake a more detailed assessment, which may include: - classroom observation, management advice and training for key staff - environmental assessments - parental support for vision impairment - informal functional vision assessment of the pupil ❖ resources in place to support inclusive learning	

	❖ SENDCos can make direct referrals to the Visual Processing Clinic ❖ classroom management strategies to be put in place following individualised advice from the SEST ❖ ensure that pupil uses glasses to correct vision if required ❖ sign up to RNIB Bookshare for free resources, training and access to 1000's of books ❖ awareness of implications of vision impairment on learning ❖ understanding of the impact of eye conditions on learning and the needs related to identified vision impairment ❖ resources may include RNIB (eye condition leaflets), VIEW (teaching and learning strategies), NatSIP (accessibility guidance for assessment)	
Medical Need ❖ fine or gross (or both) motor skills developing at a slower pace than peers. They may appear clumsy, poorly coordinated or lack strength ❖ untidy handwriting ❖ fidgety on a chair ❖ weaker PE skills, uncoordinated ❖ mild delay in development of skills, e.g. pencil skills, independence skills, use of cutlery ❖ mildly uncoordinated and with practice and/or appropriate intervention difficulties will be rectified ❖ the CYP has a mild mobility impairment that is easily managed with medication, stress relief or time out ❖ the pupil has a physical or medical condition which may influence tiredness and concentration levels. ❖ verbal communication is limited for physical reasons ❖ pupil may have fluctuating medical need which impacts on their self-	**Medical Need** ❖ access to word processors. Some limited items of special equipment and teaching approaches ❖ may need more supervision in potentially hazardous situation e.g. science lab, swimming, using PE apparatus ❖ differentiation may be required to access some curricular areas. For example, PE, handwriting tasks, unstructured times, take account of slower pace or to catch up following periods of absence ❖ extra help may be required at times in the school day. For example, dressing, undressing, stairs ❖ focussed support via a provision map in place by class or form teacher to allow the pupil to catch up following periods of absence ❖ suitable arrangements may be needed for administration of emergency medication and training to school staff or other emergency measures in school ❖ supervision of health and hygiene procedures ❖ access to alternative methods of recording if required ❖ class or subject teachers are responsible for working with the student on a daily basis, delivering any individual programmes ❖ some additional support may be required at periods throughout the day and social situations such as breaks may need particular attention ❖ possibly teaching assistant trained in managing care needs. Training in Manual Handling may be necessary ❖ differentiation required and environmental adaptation ❖ medical condition will be generally stable and under control, but may need monitoring in school and close liaison maintained with home ❖ school curriculum promotes personal care and safety and school staff arrange and take responsibility for any regular medical intervention to be carried out	

esteem and confidence. For example, weight difficulties, incontinence ❖ pupil may need access to specific items of small equipment if medical conditions have resulted in minor motor impairments ❖ medical conditions may result in bullying and social isolation	❖ risk assessment and emergency plan for medical emergency ❖ teaching staff and therapist to assess changing needs ❖ input to the provision map or IEP may be required from a physiotherapist, occupational therapist ❖ consideration of access arrangements for examinations. ❖ specific information on the causes and implications of the medical condition may need to be circulated to relevant members of staff ❖ adults direct pupils to targeted motor activities, whole class teaching, with TA support for targeted intervention ❖ pencil skills programmes. For example, Write from the Start (Teordorescu), targeted fine motor programmes to work specifically on pupil's hand skills, targeted gross motor programme to work specifically on pupil's particular gross motor difficulties ❖ resources include: Pencil grips, Easi-grip scissors, sloped work surface, movin' sit cushion, laptop or tablet	
Area of Need	**Enhanced Provision – Level 3-4 strategies**	**Resources**

Hearing Impairment ❖ moderate or severe high frequency, bilateral, hearing loss and will be prescribed hearing aids ❖ may have delayed language development and difficulties in perceiving some speech sounds ❖ may be ongoing difficulties in the acquisition of new and the understanding of subject specific vocabulary ❖ may take longer to process and follow verbal instructions ❖ may become tired towards the end of the school day, especially in more noisy environments ❖ difficulties accessing specific activities which involve listening without lip-reading. For example, CDs, DVDs spelling tests, video, You Tube clips and any electronically recorded speech ❖ may find it harder to function in less favourable acoustic conditions or when there are high levels of background noise ❖ may have issues with self- esteem, emotional well-being and social knowledge and the hearing loss may affect the pupil's social interactions **Vision impairment** ❖ may have problems accessing work from the board or print ❖ may have problems identifying peers in the playground	**Hearing Impairment** ❖ in addition to the basic strategies, these pupils are likely to need daily support from an adult in school. For example, teaching assistant or SENDCo ❖ for checking of specialist equipment ❖ to monitor understanding of language ❖ to monitor and support classroom instructions ❖ to prepare and provide visual resources ❖ to reinforce key vocabulary and concepts ❖ to deliver an individual programme particularly pre and post tutoring, speech, language, literacy and listening ❖ to develop social skills ❖ may require advice or support from a speech and language therapist ❖ classroom organisation strategies. For example seating position, reducing background noise ❖ usually benefit from assistive listening devices such as radio aids and will require a speedy response to any problems with this technology ❖ daily personalised or small group learning to target identified areas of need with ongoing cycle of assess-plan-do-review. Close monitoring of the above by SENDCo or class teacher ❖ need access to quiet working space for small group, checking of equipment and specialist assessment ❖ regular audiological reviews and monitoring will be undertaken by the Health Authority ❖ staff to have some basic Deaf Awareness training and key staff should attend training delivered by the Sensory Education Support Team. Training for staff may include bespoke training for staff in meeting needs of a deaf pupil ❖ hearing peer group to receive some advice on how to be supportive and have some awareness of deafness ❖ differentiated learning opportunities, for example, use of radio aid in all lessons ❖ may need alternative communication approach. For example, total communication, Signed Supported English (SSE) and oral or aural ❖ key adults should have a good understanding of the individual's hearing loss and how it affects their understanding and access to learning and social opportunities **Vision impairment** ❖ in addition to High Quality Teaching strategies, these pupils may need daily support from an adult in school. For example, TA or SENDCo o to access written materials o to provide opportunities to explain use of materials or presentations	❖ Variable TA/mentor time ❖ Radio Aid ❖ Teacher of the Deaf support ❖ Large print books ❖ Electronic books ❖ Low vision aids ❖ Exam modifications ❖ Personal laptop/ iPad ❖ Differentiated equipment across subjects ❖ Equipment to aid skills

❖ may become tired towards the end of the school day due to having to concentrate so hard on 'looking', especially in adverse lighting conditions or where appropriate modifications have not been provided
❖ may have
  ○ issues with self- esteem, emotional well-being and social interaction
  ○ difficulties with depth perception.
  ○ difficulties with "visual clutter"
  ○ difficulties with peripheral vision
  ○ difficulties distinguishing different colours.
	○ to support social interactions
	  ○ to prepare and provide visual resources
	  ○ to prepare student for class activity or learning experience
	❖ may benefit from advice and support from a habilitation specialist from SEST with regard to assessing and improving learning environments for visually impaired student. Attention will need to be given to learning environment and reasonable adjustments made. It may also include orientation around environments, development of mobility, self-help and independence skills. May benefit from additional specialist equipment
	❖ attention will need to be paid to glasses wear, seating position in classroom and clear presentation of visual learning materials
	❖ positive learning environment that encourages pupil confidence to use low vision aids such as magnifier.
	❖ some modifications to the learning environment, factors such as glare, lighting and blinds are considered
	❖ advice from SEST is implemented in the classroom
	❖ access to specialist equipment where required
	❖ promotion of social skills and self-advocacy in relation to their vision impairment.
	❖ awareness that pupil may need more time to complete tasks and that equality of access may mean that they need to do some things differently
	❖ peer group to receive some advice on how to be supportive and have some awareness of vision impairment
	❖ key adults should have a good understanding of the individual's vision impairment and how it affects their understanding and access to learning and social opportunities
	❖ additional time may be required for pre- learning and consolidation
	❖ specific and consistent use of language across all learning environments
	❖ appropriate differentiation or modifications to the curriculum or to the environment
	❖ strategies to include a learner with an eye condition are in place and identified
	❖ differentiated questioning and explicit language used to explain whole class responses
	❖ flexibility of groupings allows for buddy support, good role models and focused teaching
	❖ building up a picture of need in relation to exam access arrangements will be required. Such arrangements may include additional time, enlarged papers, rest breaks and use of equipment. This must reflect the child's normal way of working.
	❖ training for staff may include:
	  ○ training in the use of specialist equipment to support access to learning
	  ○ bespoke training for staff in meeting needs of a vision impaired pupil
	  ○ additional courses provided by RNIB or VIEW to enhance understanding of vision impairment.	

	❖ resources may includeRNIB (eye condition leaflets), RNIB Bookshare for free resources, VIEW (teaching and learning strategies), NatSIP (accessibility guidance for assessment)	
Medical needs ❖ medical condition may necessitate supervision or support for medication needs at specific times. For example, medication, diet, toileting ❖ their physical health or medical condition has a moderate impact on their self-care functions ❖ progress within the curriculum may be affected by condition or medication ❖ may participate in most, or all activities but at a slower pace that peers or show signs of increasing fatigues during the school day ❖ student has short term health need requiring pupil to be educated in alternative provision identified by the student's consultant ❖ mild-moderate difficulties with fine or gross (or both) motor skills– their physical condition varies from day to day. This impacts on their ability to record their work. For example, delay in pencil skills or untidy handwriting	**Medical needs** ❖ access to word processors. Some limited items of special equipment and teaching approaches ❖ may need more supervision in potentially hazardous situation e.g. science lab, swimming, using PE apparatus ❖ differentiation may be required to access some curricular areas. For example, PE, handwriting tasks, unstructured times, take account of slower pace or to catch up following periods of absence ❖ extra help may be required at times in the school day. For example, dressing, undressing, stairs ❖ focussed support via a provision map in place by class or form teacher to allow the pupil to catch up following periods of absence ❖ suitable arrangements may be needed for administration of emergency medication and training to school staff or other emergency measures in school ❖ supervision of health and hygiene procedures ❖ access to alternative methods of recording if required ❖ class or subject teachers are responsible for working with the student on a daily basis, delivering any individual programmes ❖ some additional support may be required at periods throughout the day and social situations such as breaks may need particular attention ❖ possibly teaching assistant trained in managing care needs. Training in Manual Handling may be necessary ❖ differentiation required and environmental adaptation ❖ medical condition will be generally stable and under control, but may need monitoring in school and close liaison maintained with home ❖ school curriculum promotes personal care and safety and school staff arrange and take responsibility for any regular medical intervention to be carried out ❖ risk assessment and emergency plan for medical emergency ❖ teaching staff and therapist to assess changing needs	

❖ they have difficulties with their core stability ❖ physical difficulties impact on their spoken language ❖ their mobility is moderately impaired, causing difficulties on stairs, with spatial orientation and in crowded areas or uneven ground ❖ they have an unpredictable long-term medical condition, for example, they experience fluctuating levels of pain, which at times impacts on their ability to access daily activities ❖ growth is impacted by their diet (either under or over-eating)	❖ input to the provision map or IEP may be required from a physiotherapist, occupational therapist ❖ consideration of access arrangements for examinations. ❖ specific information on the causes and implications of the medical condition may need to be circulated to relevant members of staff ❖ adults direct pupils to targeted motor activities, whole class teaching, with TA support for targeted intervention ❖ pencil skills programmes. For example, Write from the Start (Teordorescu), targeted fine motor programmes to work specifically on pupil's hand skills, targeted gross motor programme to work specifically on pupil's particular gross motor difficulties ❖ resources include: Pencil grips, Easi-grip scissors, sloped work surface, movin' sit cushion, laptop or tablet	
Area of Need	**SEND Targeted support- Level 5-6 strategies**	**Resources**
Hearing impairment ❖ will have a severe or profound hearing loss and will have hearing aids or cochlear implants ❖ will need to focus their visual attention for long periods of time. For example, to lip read the different speakers or to watch someone using sign support ❖ may have difficulties with literacy. For example, reading comprehension and grammatical structure and content in written English ❖ may not be able to benefit from usual approaches to learning to read	**Hearing impairment** ❖ need intensive hearing speech and language rehabilitation following hearing aid fitting or cochlear implant surgery ❖ require a specialist TA for sign supported english and frequent reinforcement of key vocabulary and concepts in order to keep up with the demands of the classroom ❖ need monitoring of social and emotional well-being and inclusion ❖ needs an adult who is skilled in monitoring and managing the learning environments for deaf learners, can prompt subject and class teacher to make adjustments and ensure assistive technology is appropriate ❖ need group discussions to be carefully managed and paced in order to participate and benefit from teacher led small group sessions Benefit from assistive listening devices such as radio aids and will require a speedy response to any problems with this technology ❖ need access to quiet working space for small group, checking of equipment and specialist assessment ❖ need personalised programmes of work and language development ❖ need advice on good acoustic environment ❖ need access to additional specialist curriculum	❖ Teacher of the Deaf time ❖ Specialist advice and support (physio/occupational Therapist) ❖ TA support to review language and notes ❖ Individual or small group sessions

❖ may have delayed language development, gaps in vocabulary and general knowledge ❖ may have significant difficulty in processing verbal information at the same speed as their peers ❖ may miss out on incidental learning as they are unable to overhear conversations, programmes on the radio ❖ may need support with social interactions with their peers and find it difficult to maintain positive self-esteem and social confidence ❖ may need support to fully develop an understanding of others and maintain positive relationships with peers ❖ without specialist support they will be at high risk of not achieving and maintaining levels of attainment in keeping with their age and abilities or making expected progress	❖ require regular direct input, where appropriate. For example, pre and post tutoring for curriculum, language programme ❖ personal understanding of deafness at all levels in order to come to terms and manage their hearing loss and equipment ❖ specialist teams might include audiology departments, cochlear implant centres, qualified teacher for children and young people with a hearing impaired (QTHI), community paediatrician, Specialist Speech and Language Therapist, and educational psychologist ❖ further information on some of these services can be found on Lincolnshire's Local Offer.	
Vision impairment ❖ may need to access their learning through large print or braille ❖ the vision impairment may have a severe impact on a learner's ability to function independently in the school environment ❖ may need a high level of adult support in order to access the curriculum ❖ may need all texts and diagrams produced in a tactile format and	**Vision impairment** ❖ assistive technology to access everyday learning tasks and or large print learning resources to enable full access to curriculum ❖ intensive teaching of the Braille code in order to access the curriculum ❖ specialist equipment to change texts/diagrams into tactile format. For example, Braille ❖ the pupil will struggle to access information displayed on a board and will require either specialist technology, or a trained member of staff to enable access ❖ ICT equipment may enhance access to learning. For example iPad linked to interactive whiteboard or enlarged print electronic resources on iPad or kindle. Speech, magnification software ❖ group discussions to be carefully managed and paced in order to participate	

may need high level of teaching of Braille outside the classroom environment ❖ may take longer to complete tasks, often in a different medium ❖ may need help with social interactions with their peers and find it difficult to maintain positive self- esteem and social confidence ❖ may need support to fully develop an understanding of others and maintain positive relationships with peers ❖ without specialist support they will be at high risk of not achieving and maintaining levels of attainment in keeping with their age and abilities or making expected progress	❖ access to quiet working space for small group, consolidation, checking of equipment and specialist assessment ❖ high level of input from a habilitation specialist to develop mobility, orientation, self-help and independence skills ❖ teacher led small group sessions ❖ building may need an environmental audit by a qualified habilitation specialist ❖ the pupil may use a cane to help navigate the school building and need an adult to help them move safely around the school environment ❖ several members of staff may need to learn the Braille code ❖ differentiation may be necessary taking into account pace of learning and visual presentation of learning materials ❖ teaching of strategies to facilitate independent learning ❖ environmental factors such as glare, lighting and blinds are considered. Consideration of seating position ❖ pupil always has own copy of all learning resources which are clear and produced in specified format ❖ advice from SEST is implemented in the classroom ❖ positive learning environment that encourages pupil confidence to use low vision aids such as magnifier or specialist ICT ❖ differentiated questioning and explicit language used to explain whole class responses ❖ awareness that a pupil may need more time to complete tasks and that equality of access may mean that they need to do some things differently ❖ flexibility of groupings allows for buddy support, good role models and focused teaching ❖ building up a picture of need in relation to exam access arrangements will be required. Such arrangements may include additional time, enlarged papers, rest breaks and use of equipment. This must reflect the child's normal way of working. ❖ staff training to raise awareness of different types of vision impairment and strategies to reduce barriers to learning. Such training may include braille courses for those supporting braille learners. For example,UEB online	
Medical needs ❖ student has severe difficulties with the ability to function independently in the school environment and in their everyday life	**Medical needs** ❖ needs differentiation of opportunity and extra time to access the curriculum ❖ needs one-to-one adult support 100% of the time ❖ needs help to record work. May need help eating and drinking ❖ may need adaptations for PE curriculum and all practical subjects ❖ may need support with transport arrangements	

❖ physical difficulties with eating or drinking ❖ may require daily therapy and medical intervention to crucially avoid pressure damage and maintain joint integrity ❖ may show signs of fatigue during the school day, which may impact on their attendance or engagement at school ❖ may have a medical condition that is increasingly difficult to manage and experiencing considerable pain and disruption to their ability to focus. ❖ may be independently mobile, have an abnormal walking pattern, slower than peers at walking, need an aid to support walking, or may need a wheelchair for longer distances due to fatigue ❖ may have a chronic condition, potential degenerative condition, newly acquired condition or has special educational needs in addition to physical difficulties ❖ they have difficulties resulting from a medical condition in communicating, addressing self-care needs, moving independently, managing a medical condition (including self-managing when appropriate) ❖ may need an adapted school chair. For example, Fox Denton, Movin' Sit cushion ❖ may wear splints on leg(s) or arm, hand or both	❖ Staff should consider and implement as appropriate: ❖ likely to require modification or differentiation to tasks to enable access to aspects of the curriculum ❖ whole class teaching but with regular and focused individual support which aim to develop the pupil's skills and independence ❖ equipment to support pupil. For example, pencil grips, easi-grip scissors, laptop or tablet, sloped work surface, cushion for seat, foot box, adapted class chair. ❖ a programme of support planned by physiotherapist or occupational therapist, may include access to activities or equipment which have been advised by pupil's therapist for: o fine motor development o gross motor development o life skills	

❖ their ongoing medical needs restricts their confidence and resilience and may result in poor attendance		