Home Page

How to use the Guidance – School Age

When starting to use the Guidance we recommend first reading through the introduction and the section for All Essex Pupils. The Section for ‘All Essex Pupils’ MUST be the starting point for all pupils, and then other sections of the Guidance used as appropriate for the pupil’s needs.

- Introduction – What is the Guidance?
- All Essex Pupils

Once you have read through these you can navigate to any of the individual sections below by clicking the buttons or the text. You can return to this home page at any point by clicking on the home page button (right) which appears at the top of every page of the Toolkit.

- Learning Difficulties and Disabilities
- Social, Emotional and Mental Health Difficulties
- Autism and Social Communication Difficulties
- Speech, Language and Communication Needs
- Physical and Neurological Impairment
- Sensory: Hearing, Visual and Multi-sensory Impairment

Early Years Provision Guidance

Some Early Years specific information can be found within the individual areas of need, however some are distinctive enough to have their own separate section. This is accessible by clicking the button below.

- Early Years
Glossary and Acronyms
This section has been included to link to terms and abbreviations that may be unfamiliar to you. Words and Acronyms will show as a clickable link within the document.

Frequently Asked Questions
We will develop information on Frequently Asked Questions. If you have any questions or suggestions for improvements, please let us know by emailing: ProvisionGuidance.Feedback@essex.gov.uk.

Navigating the Toolkit
Within all sections the levels read sequentially

1. High Quality Teaching  
   2. Additional School Intervention and Support  
   3. High Needs

We have added arrow buttons, colour coded to reflect the 3 levels, at the beginning and end of each section.

These will enable to move up and down the sequence of levels, and within the areas of need, with a single click.

If you want to locate another section of the Toolkit, please use the home button at the top of each page to take you back to the home navigation area.

You will find there are links to other documentations within the Provision Guidance Toolkit. Click these links to go to the relevant piece of documentation. Some links are not yet active and will be shown in red. As they go live they will be changed to blue.

If you find any broken links that are coloured blue please let us know by emailing: ProvisionGuidance.ProjectTeam@essex.gov.uk

Introduction - What is the Guidance?
Essex Provision Guidance

INDEX – clicking on a title will take you directly to that section of the Toolkit

Section

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   • The Graduated response and the Provision Guidance
   • How to use the Provision Guidance

2 All Essex Pupils

3 Learning Difficulties and Disabilities

4 Social, Emotional and Mental Health Difficulties

5 Autism and Social Communication Difficulties

6 Speech, Language and Communication Needs
   • Introduction
   • Attention and Listening
   • Receptive Language (Understanding)
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   • Speech and Phonological Awareness
   • Social Interaction

7 Physical and Neurological Impairment

8 Sensory: Hearing, Visual and Multi-sensory Impairment
   • Hearing Impairment
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9 Early Years

10 Information

11 Glossary and Acronyms

12 Frequently Asked Questions
The Essex Provision Guidance provides an evidence-based reference for schools and other practitioners who need to check that they are doing all that could be expected to meet the needs of children with special and additional needs. It also provides clarity and consistency when deciding the level and type of support a child needs.

The Provision Guidance draws on good practice in schools, and evidence-based, applied psychological theory and research. It is a practical resource and an evolving document, as the Local Authority (LA) is committed to continuous improvement in developing best practice in relation to meeting the needs of all pupils with special educational needs.

**Purpose**

The purpose of the guidance is to support school staff in the process of building on current good practice and to help schools to develop systems, skills and structures for responding to pupils’ needs.

The following are examples of ways the Provision Guidance can be used.

- As a self-help guide for practitioners when considering provision.

- Providing a point of reference for school staff when deciding which level of the graduated response pupils are working at.

- As an audit tool for individual pupils or for school practice, so that staff can check that they are providing appropriate and purposeful support for pupils at different levels. It may identify gaps in provision or new ideas for working with individual pupils.

- Partnership with parents and carers as a way of providing clarity and transparency when explaining provision the school is making for their child.

- Use by the Local Authority to determine whether schools are making appropriate provision to meet the needs of all pupils and to help determine whether schools have taken sufficient, relevant and purposeful action before requesting additional resources.
The cycle of improvement

High Quality Teaching needs be the essential element in the education of all children and young people. Where additional needs are identified, it is important that schools work through a cycle in order to recognise needs, aspirational outcomes, strategies and achievements.

The Ofsted review of 2010 (The Special Educational Needs and Disability Review - a statement is not enough) highlights the importance of High Quality Teaching.

“We also recognise that as many as half of all pupils identified for School Action would not be identified as having special educational needs if schools focused on improving teaching and learning for all, with individual goals for improvement.”

The Lamb Report (Special Educational Needs and Parental Confidence 2009) also emphasised the need for pupils’ needs to be effectively identified and met:

“In some of the individual cases that inspectors saw, repeated and different assessments were a time-consuming obstacle to progress rather than a way for effective support to be provided.”

The Ofsted review of 2010 makes reference to and is clear that:

“What consistently worked well was rigorous monitoring of the progress of individual children and young people with quick intervention and thorough evaluation of impact. High aspirations and a determination to enable young people to be as independent as possible led most reliably to the best educational achievement.”
The Graduated Response

The Special Educational Needs and Disability Code of Practice will be used by school staff and other practitioners to inform the graduated response to identifying and meeting pupil’s needs.

The Provision Guidance is organised (and colour-coded) to reflect the graduated response.

Details are given about the type and extent of support that schools should be providing at each level and what they should do before moving a child onto a higher or lower level of support.

It is expected that in almost all cases, earlier levels of the Provision Guidance will have been effectively implemented and evaluated before higher levels of the graduated response are considered.

1. High Quality Teaching (HQT)

This is the essential foundation of all teaching, assessment and intervention for all pupils.

High Quality Teaching:
- seeks to engage and support the learning of all children and young people;
- builds on pupils’ prior learning and responds appropriately to the ‘pupil voice’;
- builds from the skilful design of learning;
- is construed as children and young people progressing in their learning;
- involves a curriculum that is methodically constructed and renewed to deliver small and efficient steps of progression.

2. Additional School Intervention and Support (building on HQT)

An assessment and intervention process which is usually co-ordinated by the SENCo working alongside other school staff. Interventions at this stage will be additional to those provided through classroom support. To support this process, the school may wish to ask for support from other agencies to help them with assessment and intervention for pupils at this stage.

3. High Need

Generally characterised by the school requesting the involvement of relevant external services in more detailed assessment and development of intervention programmes for a pupil. This level of intervention is for pupils with more complex and/or enduring difficulties and whose progress is considered insufficient, despite carefully planned interventions at the previous levels. If schools seek extra provision beyond their own resources, or an assessment for an Education, Health and Care Plan, there must be clear evidence that appropriate intervention as described in the Provision Guidance has been put in place and reviewed at the previous levels of the graduated approach.
### All Essex Pupils

#### High Quality Teaching (HQT)

**Pupil Characteristics**
- Pupils operate broadly within the expected range of abilities for their age but their progress/development may occur at a somewhat slower pace than that of other pupils.

**Provision for High Quality Teaching**
- The pupil should remain part of the mainstream teaching timetable for all activities.
- A consistent learning environment with established practices and routines.
- Consistency from all adults in the pupil’s education including non-teaching staff.
- Provision is based on the 4 part cycle: Assess, Plan, Do, Review, through school monitoring systems.

**Staff Knowledge and Understanding**
- All staff differentiate the curriculum appropriately.
- Effective systems of internal communication exist between school staff so that appropriate information is shared to enable effective teaching and learning.
- All staff are aware of national documents relating to Inclusion, SEN and Disability.
- Knowledge of the school’s SEN policy and criteria for placing pupils at Additional School Intervention level of support.
- All teachers manage and monitor group and individual programmes to meet specific identified needs.
- All teachers are able to plan and facilitate termly review meetings with parents.

**Assessment, Planning and Review**
- Assessment for Learning informs planning for suitably differentiated teaching.
- There are rigorous assessment, tracking and target setting systems for all pupils.
- Regular reviews take place to monitor pupil progress against expected outcomes as part of ongoing school assessment processes.
- Appropriate information from parents/carers is taken into account.
• Pupils are enabled to participate in the setting, monitoring and review of their learning targets, at an appropriate level.

• Regular communication is maintained with parents about how they can support their child’s learning needs, eg during parents’ evenings, parent workshops on specific learning themes.

**Expected interventions to support emotional well-being for learning**

• Differentiation enables success-based learning (to enhance both learning and motivation) and still provides an appropriate level of challenge.

• Visual evidence of their success as a result of their effort is regularly reviewed by pupils, to enhance confidence and intrinsic motivation.

• Teachers take into account the impact which emotional needs may have on pupils’ learning, and appropriate support is provided.

• Teachers increase their use of effective praise that focuses on the learning behaviour and process.

• ‘Process feedback’ and recognition is given which includes specific feedback about: Strategies, Effort, Perseverance, Challenge-seeking and Improvement. This leads to greater confidence and intrinsic motivation (as opposed to ‘person feedback’ which refers to the intelligence or talents of the student or ‘outcome feedback’ which puts the focus on the final product.)

• Effort, challenges and mistakes are valued because they lead to learning.

• There is a whole-school approach to teaching about developing self-efficacy and a Growth Mindset (such as the work of Carol Dweck). Pupils are taught about the brain science of learning.
Pupil Characteristics

- Progress with learning and development is at a very slow rate and additional support is needed to achieve this.

- Pupils are attaining at a level significantly below age-related expectations expected outcomes and there is evidence of an increasing gap between them and their peers.

- The SEND Code of Practice states that where a child does not make sufficient progress through the usual approaches to teaching and learning, staff should decide on ‘additional to’ or ‘different from’ interventions.

From previous Essex Banding Descriptors (for reference only)

<table>
<thead>
<tr>
<th>P/NC levels</th>
<th>Age 5</th>
<th>Age 6</th>
<th>Age 7</th>
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Provision for Additional School Intervention and Support

- Provision is based on the 4 part cycle: Assess, Plan, Do, Review (refer to SEND Code of Practice).

- An individual plan will be written and reviewed regularly in line with the SEND Code of Practice.

Staff Knowledge and Understanding

- Effective systems of internal communication exist between school staff so that appropriate information is shared to enable effective teaching and learning.

- Staff have knowledge of the school’s SEND policy and criteria for placing pupils at Additional School Intervention level of support.

- All staff make increased use of appropriate differentiation strategies.

- There is awareness by all staff involved with a pupil with special educational needs of the nature of their needs and how to meet them.

- Teachers plan personalised access for learning and develop provision plans to meet specific identified needs (following advice from the SENCo and staff from outside agencies).
Assessment, Planning and Review

- A formal cycle of assessment, analysis, targets, intervention and review is in place where needs are identified and an individual plan to meet specific and identified outcomes for the pupil is produced, regularly monitored, revised and quality assured (eg One Plan). At this stage pupils may have certain elements of the curriculum or the school day planned for them in a different way.

Pupil and parent/carer involvement

- Pupil and parents/carers are actively supported to participate in the target setting, planning and review process, so that a person-centred planning approach is used. Further information is available in the Enabling Pupil Participation resource.

- Appropriate visual pictorial or software/ICT/apps-linked resources are used to support the gathering of pupil/student views when appropriate in terms of learning level or physical access.

- Parent consent is given, and consultation and/or referral takes place with external agencies where appropriate eg Educational Psychology Service, Specialist Teaching Services, Speech and Language Service, Occupational Therapy Service, other medical professionals.

Assessment

- More detailed assessment is carried out to identify gaps in learning or barriers/access routes to learning. Results are systematically used to inform effective targeted teaching and monitor pupil progress.

- If standardised tests are used, these must be well-constructed and up-to-date.

- Any assessment and intervention advice provided by external professionals is incorporated into the pupil’s individual plan, as appropriate.

- Assessment needs to take into account the range of possible needs contributing to a pupil’s difficulties, for example, learning needs underlying behaviour difficulties, working memory/language/literacy needs underlying attention difficulties.

Target-setting

- Individual pupil targets are clearly based on appropriate assessment results, are SMART, set and recorded in an individual plan, and clearly identify interventions (including who, what, when) and review outcomes.

Intervention

- Interventions (whether group or individual) are identified and put in place on the basis of the identified need.

- Evidence of implementation of advice from external professionals is maintained and available.

- Evidence of impact of the intervention should be recorded, to inform decisions about whether that intervention remains appropriate.
Review of outcomes
- Provision, evidence of impact and level of pupil engagement with tasks is accurately recorded over time to inform decisions about whether chosen interventions or strategies promote and maintain effective curriculum access.
- Progress is reviewed at least termly with pupil and parent/carer involvement.
- Targets and interventions are reviewed in the light of outcomes.

Expected interventions to support emotional well-being for learning
- Increased differentiation is implemented that enables success-based learning (to enhance both learning and motivation) and still provides an appropriate level of challenge.
- Some pupils will require ‘errorless learning’ skills practice for some areas of the curriculum to support their confidence, learning and motivation.
- There is increased use of effective praise that focuses on the learning behaviour and process.
- Small group and individual teaching on ‘how to be an effective learner’, focusing on strategies for learning, problem-solving and developing self-efficacy are put in place.
- Pupils have a key adult who regularly asks them how they feel about their learning and progress, so that further support is provided as appropriate.
**Pupil Characteristics**

**General**
- Pupils have significant and persistent learning difficulties despite access to appropriate learning opportunities and support.
- Provision required to meet the pupil’s needs cannot reasonably be provided from within the resources normally available to mainstream early years’ providers, schools and post-16 institutions.
- Pupils may have life-long learning difficulties or disabilities, across several areas of development, and will require more targeted and specialist intervention.

**Specific**
- Pupils are likely to have specific characteristics and levels of need in relation to one or more particular areas of need. Other sections of the Provision Guidance should be referred to as appropriate.

**Learning levels**
- See Provision Guidance section on Learning Difficulties and Disabilities for more information.

*From previous Essex Banding Descriptors (for reference only)*

### ‘Complex’

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**HN: All Essex Pupils**

**High Needs**
(building on HQT and ASI)
Provision for High Needs

Staff Knowledge and Understanding
- Staff are aware that children/young people with learning difficulties will learn at a slower pace than other children and may have greater difficulty than their peers in acquiring basic literacy or numeracy skills or in understanding concepts, even with appropriate differentiation.
- Teaching staff have received relevant training on how to assess and meet the needs of pupils with significant learning difficulties and/or disabilities using a range of approaches.
- Staff have attended relevant training on particular learning difficulties.

Assessment, Planning and Review

Pupil and parent/carer involvement
- Parent and pupil involvement is central to planning and review processes.
- Parents are fully aware and jointly engaged with how pupil progress is assessed and measured.

Assessment
- As for Additional School Intervention and Support, plus: schools use assessment approaches such as P Scales, and also more detailed assessment and monitoring systems such as PIVATS and/or BSquared.
- Regular, detailed analysis of skills and progression must be carried out and accurately recorded.

Target-setting
- Short-term SMART targets (such as for a half term) are based upon ongoing assessment and are derived from long-term objectives (such as in the pupil’s EHC Plan).

Intervention
- Assessment informs daily teaching, and all staff working with a pupil are aware of, and are working towards agreed targets and using agreed intervention strategies consistently.
- Pupils have personalised provision plans and intervention strategies.
- Interventions as advised in the pupil’s individual plan/One Plan or EHC Plan are in place.

Review of outcomes
- There is ongoing review of pupil outcomes by school staff, which informs daily teaching.
Termly reviews of progress with pupil and parent/carer involvement take place.

There are reviews as required by national and local authority guidance, such as for the Essex One Plan, and the SEND Code of Practice personalised and holistic Education, Health and Care Plan.

Expected interventions to support emotional well-being for learning
- Functional Behaviour Analysis of any behaviours causing concern is undertaken, to identify and support unmet needs communicated by the pupil through the behaviours.
- There is an analysis of stress levels due to any sensory needs, and consistent implementation of appropriate strategies to reduce these.
- See other relevant High Needs sections of Provision Guidance.
LEARNING DIFFICULTIES and DISABILITIES

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Learning Difficulties and Disabilities
High Quality Teaching (HQT)

Pupil Characteristics
- Pupils operate broadly within the expected range of abilities but their progress/development may occur at a slower pace than that of other pupils.

Provision for High Quality Teaching

Expected interventions to support learning
- Pupil’s name and eye contact established before giving instructions.
- Clear and simple instructions, breaking down longer instructions and giving one at a time.
- Tasks are clearly explained, modelled or scaffolded, and staff check for understanding.
- Key points/instructions are jotted down.
- New learning broken down into small steps.
- Link new learning to what pupil already knows, for example, start a lesson with a class mind-map of what they already know about a subject.
- Specific activities are differentiated appropriately, eg words for spelling practice, times tables practice, methods of recording. There are opportunities for practical and interactive, as well as paper and pencil tasks.
- Give pupils ‘thinking time’ or opportunities to work with talk partners before answering questions, or say “I’m going to come back to you in a minute for your idea”.
- A range of lesson activities are planned to take account of different learning strengths, and practical activities offered where possible, eg learning from pictures, diagrams, mind-maps, using practical equipment, handling objects, moving and doing rather than sitting.
- Multiple examples of new concepts are provided and staff aim to take these examples from children’s own real life experience rather than talking in the abstract.
- A list of key vocabulary for a particular topic or lesson is put up and staff teach the meaning of each word.
- A range of aids and resources is easily accessible to support learning and aid independence, such as letter and number charts, word banks of high frequency and topic words, number lines/squares, calculators, dictionaries, computer and internet access (where appropriate).
- Visual cues and prompts, visual timetables are used.
- Staff provide writing frames and templates (eg writing up a science experiment) to help structure thinking.
- Staff provide prompt sheets: questions to answer, key words to build each section or paragraph around, sentences or paragraphs to put in correct order, paragraph openings, etc.
- Explicit teaching of independent and study working skills is routine. Pupils are encouraged to take charge of their learning and develop strategies that work for them.
• There are opportunities for flexible grouping and pairing, for example by ability and mixed ability, including buddy systems/study buddies.
• Marking policies celebrate positive aspects of pupils’ work and how their work can be developed/improved.
• Homework and independent tasks are differentiated to present an equal level of challenge to all pupils.
• Personal jotters or logs may be used to record homework tasks and other information, to aid memory.

There are support materials available on the Local Offer
Pupil Characteristics

- Progress with learning and development is at a very slow rate and additional support is needed to achieve this.
- Pupils are attaining at a level significantly below age-related expectations expected outcomes and there is evidence of an increasing gap between them and their peers.
- The current SEND Code of Practice suggests that where a child does not make sufficient progress through the usual approaches to teaching and learning, staff should decide on ‘additional to’ or ‘different from’ interventions.

From previous Essex Banding Descriptors (for reference only)

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<th>Additional Needs’</th>
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<td>PSD</td>
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Provision for Additional School Intervention and Support

Assessment, Planning and Review

- Click here for assessments appropriate for literacy skills
- Click here for assessments appropriate for maths/numeracy skills

Expected interventions to support learning

SENCo and other staff are aware of and use appropriate evidence-based teaching approaches and interventions, such as described in the following sources.

- Literacy interventions: click here for more information
- Maths interventions: click here for more information
- Memory interventions: click here for more information
- Sutton Trust Toolkit (interventions evaluation): click here for more information
- John Hattie, Visible Learning (interventions evaluation): click here for more information

Evidence-based principles of effective teaching and learning are applied:
- Distributed Practice (little and often, eg daily short practice sessions rather than longer weekly sessions) to enhance acquisition and retention of learning.
- Instructional Hierarchy followed (structured, systematic teaching of increasingly complex skills).
- Teach one skill at a time.
- Teach generalisable skills (teaching most useful and widely applicable skills first, and explicitly how to generalise them to different contexts)
- Direct Instruction (includes clear success criteria explicit to pupil, a ‘model, lead, test’, or ‘my turn, together, your turn’) method, guided practice, checking for understanding, and independent practice.
- Mastery Learning/learning to automaticity.
- Interleaved or Cumulative learning to improve retention (small amount of material is learnt to fluency, then a small amount of new material to learn is added and practised alongside the previous material – new material is always combined with the old).

- Worked Examples used (pupils given problem statement and appropriate steps to the solution).
- Specific feedback is given – self-evaluation and teacher/peer evaluation.
- Ongoing teaching through assessment is used.
- Regular and explicit teaching of metacognitive strategies (learning how to learn).
- There is increased differentiation of activities and materials at group/individual level.
- Teaching approaches involve visual and practical resources.
- Pre-teaching of vocabulary and key concepts is used.
- Regular group or individual intervention support is provided by the teacher/other adult.
- Any support provided by an additional adult must continue to be planned and monitored by the teacher.
- Pupils are provided with planned, regular opportunities to develop independent working skills.
- Timetable planning allows for required interventions to be implemented consistently.
- Individual programmes to address specific targets may be delivered in small group/individual sessions but also explicitly reinforced in whole class activities to aid the transfer of skills.
- Uneven pupil performance from day to day and from task to task is understood by staff to indicate that increased skill practice at developing automaticity/fluency is required, and after this, increased practice at generalising skills to different contexts (cf Haring’s Hierarchy of Learning. Click here for further information).
- Increased use of alternative methods where pupils to demonstrate and record their learning, eg matching labels to pictures/diagrams/maps, mind-maps, iPads, PowerPoint presentations, making posters, oral presentations, role-play.
- There is increased use of appropriate technology to support learning.
- There is frequent use of touch-typing programmes.
- Staff implement the Inclusion Development Programme materials when appropriate for area of need.
- Interventions as advised in the pupil’s individual plan/One Plan.
- Staff attend consultation sessions with Educational Psychologists or Specialist Teachers.
Learning Difficulties and Disabilities
High Needs
(building on HQT and ASI)

Pupil Characteristics
- Significant and persistent learning difficulties despite access to appropriate learning opportunities and support.
- Provision required to meet the child/young persons’ needs cannot reasonably be provided from within the resources normally available to mainstream early years providers, schools and post-16 institutions.
- Pupils may have life-long learning difficulties or disabilities, across several areas of development, and will require more targeted and specialist intervention.

From previous Essex Banding Descriptors (for reference only)

‘Complex’

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‘Severe’

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Provision for High Needs

Staff Knowledge and Understanding
- Staff are aware that children/young people with learning difficulties will learn at a slower pace than other children and may have greater difficulty than their peers in acquiring basic literacy or numeracy skills or in understanding concepts, even with appropriate differentiation.
- Teaching staff have received relevant training on how to assess and meet the needs of pupils with significant learning difficulties and/or disabilities using a range of approaches.
- Staff have attended relevant training on particular learning difficulties.

Assessment, Planning and Review
As for Additional School Intervention and Support, plus: Schools use assessment approaches such as P Scales, and also more detailed assessment and monitoring systems such as PIVATS and/or
BSquared.

**Expected interventions to support learning**

- Closer differentiation of classroom work activities to the pupil's skill levels takes place.
- Smaller steps taken through a structured, developmental sequence of skills.
- More frequent Distributed Practice is used to allow more over-learning.
- More time is allowed to enable learning to automaticity before further skills are taught.
- Greater use of Cumulative Learning. (so previous skills are learnt to automaticity, a small amount of new material is introduced, and all the material is practised together)
- There are daily, individual (1:1), short sessions of high quality Direct Instruction teaching on key learning skills to a level of automaticity, based on detailed, ongoing assessment of the pupil's attainment and progress. (Children with significant learning difficulties require more frequent reinforcement of learning than those without such difficulties and are unlikely to make maximum progress if given, for example, the 3 lessons per week of literacy or maths often provided at the High Quality Teaching level. They will need more frequent Distributed Practice for neural change/acquisition and retention of learning to take place).
- Daily explicit teaching on how to generalise the skills learnt to other and everyday contexts is given.
- Both Direct Instruction and teaching on how to generalise skills are intentionally planned and taught, as 'incidental learning' by pupils with significant learning difficulties is less likely.
- Interventions as advised in the pupil's One Plan are delivered.
- Interventions as advised in the pupil’s EHC Plan, if they have one, are provided.
- Staff attend consultation sessions with Educational Psychologists or Specialist Teachers.
- Staff implement the Inclusion Development Programme materials when appropriate for area of need.
- Best practice interventions and resources to support particular learning needs, e.g. for pupils with Down Syndrome see the All Party Parliamentary Group Educational Guidance 2012.

**Expected interventions to support emotional well-being for learning**

- Functional Behaviour Analysis of any behaviours causing concern, to identify and support unmet needs communicated by the pupil through the behaviours.
- Analysis of stress levels due to any sensory needs, and consistent implementation of appropriate strategies to reduce these (see Physical and Neurological Impairment section of Provision Guidance).
SOCIAL, EMOTIONAL and MENTAL HEALTH DIFFICULTIES

The term social, emotional and mental health refers to difficulties which a pupil or young person is experiencing which act as a barrier to their personal, social, cognitive and emotional development.

These difficulties may be communicated through internalising and/or externalising behaviours.

Relationships with self, others and community may be affected and the difficulties may interfere with the pupil’s own personal and educational development or that of others. The contexts within which difficulties occur must always be considered, and may include the classroom, school, family, community and cultural settings. Social, emotional and mental health difficulties may be usefully thought of as behaviour occurring along a continuum from developmentally appropriate (for example normal testing of boundaries) and milder, more transient difficulties, to difficulties which are significant and/or persistent, and which may warrant clinical referral and intervention. The LA considers that diagnosed neurodevelopmental disorders are included in the term, but only a small minority of pupils on this continuum would have such a clinical diagnosis.

Theoretical Perspectives

There are many theoretical perspectives on how social and emotional development is facilitated and how behavioural difficulties develop. Different theories encompass different fundamental models for understanding the person and their development, and thereby assign different causal models to the development of behavioural responses. These models, including biological, psychodynamic, behavioural, cognitive, social learning, humanistic, eco-systemic, ecological in turn, determine the type of assessment and intervention process applied to understanding and addressing the problem. A thorough theoretical review is beyond the scope of this document. These theoretical perspectives range from those which focus on self-individual factors to those which focus on self-others and self–environment factors.

See information section: Theoretical Perspectives and Assessments

A bio-psycho-social approach to social, emotional well-being and behavioural difficulties

Practitioners acknowledge that none of the theoretical perspectives mentioned above provides all the answers. Educational psychologists and specialist teachers tend to use broad conceptual frameworks drawing on a range of theories for understanding behaviour and developing interventions.

The bio-psycho-social approach, which has become the dominant model and recognises that humans are complex beings whose functioning is determined by interrelated and interdependent biological, psychological and socio-cultural factors. This approach allows the application and integration of a range of theoretical frameworks in considering a pupils current functioning and needs. This approach recognises that the causes of difficulties may be multiple and complex and even a single causative factor may lead to different behaviours in different pupils and in different situations. It is also important to remember that behaviour may often be described according to the particular perspective adopted by the teacher, parent or others.
Success in the complex learning and social environment of the school is dependent on a range of variables many of which may be outside the direct control of the teacher; for example, socio-economic background, personality, and aptitudes. Nonetheless, there are several factors within teacher control (classroom management, relationships with pupil, differentiation, etc) which have been shown to have a significant effect on outcomes for pupils.

The emotional health of children and young people is increasingly recognised as being fundamental to the wellbeing and future prospects of individuals and communities. Emotional health is nurtured primarily in the home, but we know that schools and services can and do make a difference. The development of emotional health starts before a child is born, and the first two years of life are a critical period for laying the foundations for emotional health throughout childhood and into adult life, in particular through the parent/child relationship. We also know that for older children and young people there are interventions and approaches which are more likely than others to be effective in improving emotional health.

This guidance also sets out to assist senior managers with leadership in schools in developing a strategic approach to promoting strong emotional well-being. There are many opportunities for promoting emotional health, but achieving the biggest impact requires a co-ordinated, strategic approach. This in turn is dependent on the vision, leadership and drive shown by the most senior managers.

Being emotionally healthy is an important end in itself; it is also linked with a range of positive outcomes in later life. It does not mean being happy all the time, but it does mean having the resilience to face the challenges that occur in life. Poor mental health in children and young people is associated with teenage pregnancy, bullying, violent and criminal behaviour and substance misuse. The majority of adults with mental health problems experienced mental health difficulties in childhood. These problems not only persist through adulthood but can also have an impact on the next generation.
Social, Emotional and Mental Health Difficulties

High Quality Teaching (HQT)

Essex Local Authority strongly advocates a whole school approach as its fundamental vision and practice to promote good social, mental and emotional health. This is defined as working with schools on vision, systems, structures and practices. The aim of support is to stimulate the creation of school cultures that actively promote positive behaviour and emotional well-being to enrich the learning and teaching experiences of all members of the school community.

The role of school leaders in promoting inclusive values and a supportive school culture

School leaders need to be active in promoting a positive approach to behaviour.

- A warm, accepting climate and ethos is identified in the literature as being very important in fostering positive behaviour and emotional well-being in schools.
- Creating a culture and climate in the school which is accepting and supportive for staff, parents and pupils.

Pyramid of Good Practice

Research conducted in Essex, by asking Head teachers of good or outstanding schools about what supports good behaviour in schools, has helped develop a model in the form of a pyramid to show the essential components.

The lowest levels of the pyramid are made up of the most basic components, including making
sure that values and premises around principles are at the basis of any school behaviour and emotional well-being policy. Once these lower-level components have been established, a school can move on to the next levels, which are around the school community. As a school makes progress up the pyramid, components become increasingly psychological and social. A school must satisfy lower level basic components before progressing on to meet higher level component.

Every school is capable and has the capacity to move up the hierarchy. Unfortunately, progress is often disrupted by failure to address the lower level components.

Some children may experience emotional, social and personal issues which lead to difficulties with behaviour at some stage of their education. HQT means that these difficulties can be managed within a whole school / class setting because of the positive, caring ethos, and where expectations and routines are clear and where rules and routines are applied consistently. When things go wrong, issues are dealt with by the class teacher and class based support staff.

The pyramid recognises the importance of schools in supporting children through difficult times in their lives.

Pupil Characteristics

Social Behaviour - pupils largely …
- Behave respectfully towards staff members - for example, respect and answer politely and do not show verbal aggression
- Show respect to other children in the school - for example, interact with other pupils appropriately, do not swear or use psychological intimidation
- Seek attention appropriately - for example, do not disrupt unnecessarily or distract or interfere with others, do not seek unwarranted attention
- Are physically peaceable - for example, are not physically aggressive, avoid fights, not cruel or spiteful, and do not strike out in temper
- Respect possessions or property - for example, value and look after property, do not damage or destroy property, do not steal
- Learn and socialise well in a group situation - for example, co-operate with peers positively and can assume a variety of roles
- Are receptive and responsive to authority - for example, accept instructions and rational explanations for questioned decisions

Emotional Behaviour - pupils largely …
- Show empathy - for example, tolerate others, show understanding and sympathy, are considerate
- Show social awareness - for example, interact appropriately with others, are not isolated
- Are happy - for example, have fun when appropriate, smile, laugh, are cheerful and not depressed
- Are confident - for example, are not anxious, have good self-esteem, are relaxed, do not fear failure, are not afraid of new things, are robust, are not anxious about how they look and personal presentation
- Are emotionally stable and show self-control - for example, mood remains relatively stable, use appropriate language
Learning behaviour and attitude towards school - pupils are largely ...

- Attentive and have an interest in schoolwork - for example, have good motivation, show interest, enjoy their school work
- Show good learning organisation - for example, can make choices and are organised
- Keen to be at school - for example, have good attendance in school, keen to get back after the holiday
- Emotionally stable and shows self-control - for example, seek teacher help when needed, can persevere on challenging tasks or when they fail
- Able to settle well into a variety of learning environments and are ready for learning - for example, are adaptable, accept change (different staff, transition from one lesson to another)

Pupils will respond to the positive behaviour management strategies and systems outlined in the school policy, though with some children, things may take more time and modelling.

Children are making progress within the expected range for emotional and social development. They feel that they belong to the school and can develop positive relationships with others (children and adults).

For the individual pupil, when difficulties are seen with regard to behaviour key questions will need exploring at an early stage in order to address the difficulties with appropriate interventions:

- Are learning difficulties being addressed?
- Are speech and language skills being addressed?
- Are social communication issues being addressed?

The other provision guidance documents in the areas of Learning Difficulties and Disabilities, Speech, Language and Communication Needs, and Autism and Social Communication Difficulties, may well be helpful with these questions.

Provision for High Quality Teaching

Research highlights the importance of addressing the following areas:

- Positive relationships as modelled by adults
- The social environment of the classroom
- The learning environment
- Classroom organisation
- Teacher attitudes and behaviour
- A systematic approach to responding to behaviour
- Social and emotional teaching strategies (including facing risks in learning and building resilience)

Research also shows that promoting social and emotional skills leads to reduced violence and aggression among children, higher academic achievement, and an improved ability to function in schools and in the workplace. Students who demonstrate respect for others and practice positive interactions, and whose respectful attitudes and productive communication skills are acknowledged and rewarded, are more likely to continue to demonstrate such behaviour. Students who feel secure and respected can better apply themselves to learning.
Best Practice Schools have:

Whole school
- Whole school behaviour audit toolkit based on the Pyramid of Good Practice
- An ethos and conditions that support positive behaviours for learning and for successful relationships
- Support for teachers and practitioners in schools in utilising opportunities to develop knowledge and skills in relation to children’s social, emotional and psychological wellbeing
- Opportunities to review policy and practice with staff making sure that the things that are in place work effectively

Environment
- An emotionally secure and safe environment as good school/classroom organisation provides predictability for pupils and consistency of management
- Systems to support transitions.

Motivational and engagement
- Mechanisms for listening to and engaging with pupils, parents and staff, for example, in development of behaviour policy or in student councils
- Systems to monitor attendance
- Motivational and inspirational curriculum opportunities
- Mechanisms for Pupil Voice to be listened to and acted upon, for example, school councils
- Opportunities for recognition and reward

Well-being
- Effective social and emotional well-being practices
- Systems that support conflict resolution and restorative work
- Systems that support staff’s emotional wellbeing
- Peer mediation; peer mentoring and other forms of peer support
- After school activities and other personal development and play/leisure opportunities
- Anti-bullying strategy and interventions
- Social Emotional Aspects of Learning (SEAL) curriculum
- Personal Social Health Education (PSHE) curriculum

Parental engagement
- Clear systems to engage parents in understanding the ethos and practice of the school.

Best Practice Schools have staff who:

Individual
- Know and apply whole school and whole class approaches to emotional well-being and the development of emotional literacy
- Have a professional understanding of how a pupil may be communicating through their behaviour
- Know and apply the principles of how an inclusive learning environment can meet the needs of most learners
- Know that identifying and acting upon any problems in a planned and graduated way will help to prevent escalation
- Know how to apply behaviour systems to less structured times of day and learning
environments - for example lunchtimes, playtimes, school trips

- Use direct planning, teaching and modelling to enable pupils to make emotional, social and behavioural progress (explicit behaviour for learning skills/teaching routines/Personal, Social, and Health Education (PSHE))
- Feel confident to engage in effective partnership working with colleagues

**Environment**

- Understand that some pupils may need support beyond that provided for most learners
- Establish a calm, consistent learning environment with clear expectations, routines and rules, with secure and explicit boundaries in all curriculum areas and at times of less structure (for example, lunchtimes/transitions)
- Have consistency of expectation from all adults involved with the pupil’s education (teaching and non-teaching staff)
- Use a variety of social learning experiences/groupings which provide opportunities for peer modelling and positive social interaction.

**Motivational and engagement**

- Know and apply consistent whole school behaviour management procedures and strategies throughout the school day
- Follow up non-attendance with appropriate interventions
- Frequently during the day share successes and provide specific praise (verbal, visual and written) in order to develop a sense of self and self-worth
- Consistently use logical consequences as part of a stepped approach in order to encourage pupils to self-regulate and make appropriate choices in order to develop their skills
- Promote growth mindset to pupils
  a) by teaching children about the new science of brain plasticity and the new view of talent and giftedness as dynamic attributes that can be developed
  b) through the portrayal of challenges, effort and mistakes as highly valued.
  c) through process recognition and feedback (this is opposed to person feedback which refers to the intelligence or talents of the student or outcome feedback which puts the focus on the final product)

Process feedback and recognition includes feedback about:

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*See information section: Themes - Carol Dweck - the research around the importance of growth “mindset”*

Carol Dweck in her research over the course of 20 years has developed a very useful paradigm with which to examine academic self-concept, achievement, and motivation. She shows very clearly that future success is not so much the result of talent or current level of achievement, but as a result of the orientation and the tools one uses to approach learning tasks.

There is additional support material available on the Local Offer
Social, Emotional and Mental Health Difficulties
Additional School Intervention – ASI

This level of support builds on HQT and is written to help schools in the development and implementation of targeted interventions for students, in small groups, class groups or year groups whose progress in school is impeded by their social, emotional, academic or behavioural skills.

Pupil Characteristics

Social behaviour – pupils …
- May have difficulty in forming positive relationships. They will struggle to make and keep friends. This may then prevent them from being able to cooperate with other peers or adults
- May have a neurodevelopmental condition which has been diagnosed that helps in the understanding of the behaviour and thus in the planning of intervention

Emotional behaviour – pupils …
- May struggle to manage and accept change in systems and routines
- May not be able to see the changes that they can make with support in order to make progress
- May find it hard to express themselves verbally and instead may communicate their thoughts and feelings through their behaviour
- May sometimes be anxious, distressed or aggressive, or they may withdraw from the situation be that a social or learning situation
- May view themselves negatively at times and make deprecating comments. They are likely to give up easily when there is a challenge facing them

Learning behaviour and attitude towards school – pupils …
- May find it hard to develop the behaviour for learning skills needed to attend, to start and to complete tasks
- May have particular difficulty in keeping their attention on one thing (directed adult tasks)
- Progress of these pupils is being inhibited (though this may be in certain areas only and sporadic) and their actions may also be hindering the learning of others
- May find some subjects difficult (for example literacy) in that they are not motivated by the learning
- May show some observable and known occasions in which these pupils are more successful. May find it easier or harder to learn, which can be addressed through careful planning.

Provision for Additional School Intervention

The pupil is likely to be known to the school SENCo and thus he/she will support and advise
staff in planning for the child.

There are also some additional key questions which will need exploring:

- Are there attachment difficulties which need to be acknowledged and then be addressed with appropriate interventions?
- Are there emotional awareness and regulation difficulties which need to be acknowledged and then be addressed with appropriate interventions?

**Best Practice Schools have:**

**Individual**

- Awareness that teaching of the pupil should predominantly take place within the classroom, with specific learning intervention that supports social and emotional development being planned for at a whole class, group and for some children at an individual level for some part of the school day - for example, an identified time with a key person to review the day/problem solve.
- Deployment of adults other than the teacher with appropriate skills (for example, behaviour management/emotional well-being) may be needed for some key times/subjects in the school day.

**Environment**

- Seating and classroom layout plans adjusted to meet sensory/attention needs, with a quiet, withdrawal (safe space) identified
- Specific opportunities for adults and supportive peers to model appropriate behaviour responses and attitude/approach to learning, which are planned by the teacher to inform all adults working with the child
- School and subject departments responsible for implementation across the curriculum.
- Group size composition and staff levels and environment are adjusted to facilitate access to/engagement with the curriculum
- Staff audit – Effective Use of Support Staff

**Motivational and engagement**

- Adaptations to less structured times (for example, assembly, break times, practical activities, extra-curricular activities) including support, structure and environment.
- Individual systems of extrinsic reward that either connect to class based systems or which are separate to them to encourage motivation.

**Well-being**

- Planned targeted support to develop skills in the areas of social, emotional and behavioural development, for example, Circle of Friends intervention or another support group to support belonging and social skills development
- Opportunities for planned calming routines as needed during the school day
- Promote resilience

Resilience research - one way to think about resiliency and how it develops in children is to break it into four main sets of assets and abilities:

- Relationships and reaching out: as sense of belonging, having people who can be there for us and knowing how to reach them
- Emotional skills: the ability to deal with emotions so they don’t overwhelm
- Competence: skills and thinking abilities that enable us to solve problems and influence what happens
- Optimism: a positive and hopeful attitude
See information section: Themes - Resilience
See information section: Themes - Regulation and developing self
See information section: Strength-based approaches/competency approaches

- Ensure vulnerable pupils have at least one positive adult relationship
- Ensure each pupil is known well by at least one adult in the school setting, personal tutor system and/or mentoring approaches

See information section: Themes - Positive relationships between adults and children within school setting

Parental engagement
- Clear systems to engage parents in understanding the ethos and practice of the school.

Best Practice schools have staff who:

Individual
- Learn from best practice in other schools exploring how teachers can help one another ie through sharing of best practice or developing support structures within schools
- Are supported by a system put in place to support their emotional well-being
- Implement advice from external agencies
- Have up to date CPD opportunities around social, mental and emotional health needs and supportive strategies which become part of embedded practice, for example in the following areas:
  
  Behaviour
  - as a form of communication
  - stress and managing and responding to a child who needs emotional regulation

See information section: Themes - Emotional well-being for learning
See information section: Themes - Children have Stress Too

Attitude to Learning/School
- Resilience
- Independence
- Organisation
- Transitions and the need to be able to move from one thing to another
- Attention
- Motivation
- Attribution

See information section: Themes - Resilience

Social Development
- Peer relationships
- Appropriate interactions and relationships with adults
- Interactions and Working with others
- Empathy
Emotional Development
- Attachment Styles - an attachment style describes our pattern of relating to "significant others" - the important people in our lives.
  See information section: Themes - Information on Attachment

Specific recognised difficulties such as:
- Attention Deficit Hyperactivity Disorder
- Conduct Disorders including oppositional behaviour
- Selective mutism
- Social anxiety There is support material for Selective Mutism on the Local Offer
- School refusal
  See information section: Themes - ADHD and Conduct Disorders
  See information section: Themes – Social anxiety
  See information section: Themes – school refusal

Motivational and engagement
- use the student’s strengths to create opportunities for making progress
- use pupil participation activities
- create opportunities for recognition and reward

Well-being
- Implement consistent social, mental and emotional health management plans to underpin the day to day inclusion of the pupil in the school designed by the teacher. This is likely to have been put together in consultation with the SENCo, Specialist Teacher and Educational Psychologist and/or specialist support staff. There are occasions when other external agencies such as, for example, the Child and Adolescent Mental Health Service (CAMHS) and the Youth Offending Team (YOT) will be involved.

This plan may include:
- An individual, planned programme using emphasising helpful behaviour
- A risk assessment that recognises risks specific to the pupil and environment
- Access to structured group interventions which target social and emotional competencies
- Individualised planning taking into account the child’s social and emotional needs in the classroom and wider context of school; for example, break time, lunch time, assembly start and end of the day, school visits
- Use therapeutic stories to support children through difficulties
- Have support systems in place to support one another; such as solution circles or circles of adults
- A strong emphasis on helping children to develop resilience

What helps children develop resilience?
Provision and opportunities to learn and to practise the following skills, attitudes and behaviours.

- Social skills- the skills needed to make and keep friends, successfully resolve conflict
and cooperate and work well in a team or group.

- Behaviour that reflects empathy and pro-social values; for example, being respectful, kind, fair, honest and cooperative.

- Self-respect. This develops from setting high standards for their own behaviour and believing that they matter and should be treated respectfully to others. When people self-respect they also self-protect and avoid behaviours and situations that present a risk to their safety and wellbeing such as engaging in unsafe practices when using the internet and mobile phones. It will also help them to be less vulnerable to be bullied.

- Skills for managing strong feelings such as anxiety, fear and anger. This also includes being able to turn a bad mood into a better one.

- Optimistic thinking skills such as
  - Positive tracking- which means focusing more on the positives and things that go well and trying to find the positives (however small) in negative situations
  - Expecting things to mostly work out well and having the confidence to persevere when faced with obstacles.
  - Using optimistic explanatory style which means believing that unwelcome situations are temporary (and will probably improve with effort/or time) and also specific (and don’t have to flow over into all aspects of your life)

- Helpful thinking skills which are based on the type of thinking which is both grounded in facts and reality and also helps you to stay calm so problems can be readily solved.

- A sense of humour- i.e. finding something funny even if only small, in an adverse situation to help keep things in perspective.

- Goal setting skills- such as making plans, being organised and self-disciplined, being prepared to work hard and being resourceful.

- A sense of personal competence which can be pestered by helping your child to identify their specific strengths and limitations by encouraging them to set goals that require them to use and develop those strengths and by supporting them to undertake responsibilities such as minding younger siblings, teaching others, organising activities that also benefit others.

See information section: Resilience

Parental engagement

- Recognise that other learning partners (for example, parents and carers) can add value to the learning experience of pupils

Assessments

See information section: Assessments
Interventions
A comprehensive social and emotional skills programme will be available across the school.

- Peer mediation; peer mentoring and other forms of peer support
- Anti-bullying interventions
- After school activities and other personal development and play/leisure opportunities
- Access to and opportunity for free, inclusive, local play provision and play space.
- Social Emotional Aspects of Learning (SEAL)
- PSHE
- National Healthy Schools Status
- Anti-bullying strategy (delivering provision in and out of school)
- School councils
- Circle Time - Jenny Mosely
- Use of safe spaces
- Alternative provision - such as Nurture Groups and other small group provision

Books and other Resources

See information section: Books

See information section: Resources

The Essex Selective Mutism Interest Group is a professional network focused on developing knowledge, understanding and skills of the workforce in relation to selective mutism in children and young people. Information can be found on the
Social, Emotional and Mental Health Difficulties

High Needs (building on HQT and ASI)

This level of support builds on HQT and ASI. High need provision is very significant and suggests that the child experiences a long term, significant difficulty and there is evidence of what has happened so far is clearly insufficient.

The high need level of support is distinctive in that it is tailored to the specific needs of the individual student. Characteristically, this level of support is offered to the small number of students who, notwithstanding whole school behaviour support and targeted interventions, continue to experience difficulty. These students have multiple needs that call for an intensive, individualised intervention.

Pupil Characteristics

These difficulties may be displayed through the pupil becoming withdrawn or isolated, as well as through their challenging, disruptive or disturbing behaviour.

These pupils
- may experience difficulty in successfully participating within the whole class group for a significant part of the school day
- will have significant and enduring difficulties in managing learning, their emotions, their behaviour and social situations

There is evidence from over time that they need the support of a cohesive and planned approach where skilled adults are needed to help the child to overcome the significant difficulties that they have in participating in school life.

Some of the specific difficulties will be within the following areas:
- Self-Control – managing and responding to a child who needs emotional regulation
- Attitude to Learning/School and subsequently attendance
- Resilience
- Independence
- Organisation
- Attention
- Motivation
- Social Development - interactions and working with others
- Empathy
- Emotional Development and Wellbeing
- Attachment Style
- Self-worth

A wide range and degree of mental health problems might manifest as difficulties such as
- problems of mood (anxiety or depression)
- problems of conduct (oppositional problems and more severe conduct problems including aggression)
- self-harming, substance abuse, eating disorders or physical symptoms that are medically unexplained
- recognised disorders such as attention deficit disorder (ADD), attention deficit hyperactive disorder (ADHD) and conduct disorder
• attachment disorder
• an anxiety disorder
• sexualised behaviour
• Prevention of Youth Suicide

See information section for more information on these areas

Provision for High Needs
In addition to the provision in Quality First Teaching and Additional School Intervention sections, the SENCo will oversee the integrated high quality support focussed on the needs of the child with high need. There will need to be thorough liaison with other agencies and a review process within more of a ‘Person Centred Planning’ approach.

The following components are considered as good practice:

Best Practice Schools have:
• Multi agency working and pulling together so that there is effective supportive working towards similar outcomes
• Suitably qualified and experienced teachers and learning support assistants being used to deliver aspects of the programme, acting on advice from external specialists such as educational psychologists, specialist teachers, clinicians from the Child and Adolescent Mental Health Service (CAMHS) or professionals from other organisations such as charities
• Planned provision implemented by a suitably competent, experienced and confident member of staff. This person may require regular support and monitoring from a senior member of the staff team
• Training in any of the areas may need to be provided by an appropriate agency in order that the intervention is implemented appropriately and effectively
• Staff support and staff supervision will be very important. There will be a need to build on staff strengths and expertise
• A stepwise approach to responding to social, mental and emotional health. There will be a planned approach to a consistent behaviour management plan
• Opportunities for therapeutic support for some pupils
• Group size composition and staff levels and environment are adjusted to facilitate access to/engagement with the curriculum
• A nominated person such as a Learning Mentor or another key adult (buddy) who can provide this emotional support and regulation
• Planned opportunities for calming routines as needed during the school day
• Emotional literacy - self-awareness and regulation
• Regulation is the capacity:
  a) for affects (states) and emotions to be actively and appropriately available – in other words, to know what you’re feeling
  b) for a person to feel safe and grounded whilst feeling an emotion
  c) for the emotion to be experienced at a level that is appropriate to the circumstances
  d) for the emotion to be under the control of cognitive evaluation of the situation through reflection
Best Practice Schools have staff who:

- Value and promote positive relationships between adults and children within school setting.
- Ideally, everyone who walks through the front door of the school each morning (staff and pupils) should feel that this is a place where they belong and that this is an environment where they feel safe, secure and happy. We now know that good relationships influence the positive development of both the structure and the function of areas of the brain associated with socio-emotional learning. A good relationship will provide the continuous safe base that our pupils so desperately need for such healthy development. Proximity and sensitive attuned care are necessary within a genuine relationship in order to build up both his sense of self and sufficient internal control. Quality relationships provide the necessary vehicles for adaption and recovery.

See information section: Themes - Positive relationships between adults and children within school setting:

- Build a culture which is based on positive relations: adult – adult, pupil – adult and pupil – pupil. It is important to give each of our pupils, and particularly those who may display more challenging behaviour, the message that we want them to feel that they belong in the school and they have a positive contribution to make to the school.
- Use case and systemic work with the Specialist Teacher Team, Educational Psychology Service and other professionals.
- Seek referral to other external agencies as necessary, for example, the Child and Adolescent Mental Health Service (CAMHS).
Autism and Social Communication Difficulties

High Quality Teaching (HQT)

Pupil Characteristics

*Communication and Language*
- Has language and communication development that is generally in line with their peers.

*Emotional and Social Development*
- Is able to interact with peers and adults within the average range.
- Demonstrates feelings and actions within the average range.
- Is able to seek help when needed.
- Possesses a sense of self and confidence in own social skills within the average range.

*Thinking Flexibly*
- Adapts to changes in routines and staff, once prepared by adult.
- Displays competence in practical and organisational skills within the average range.
- Is able to maintain joint attention.

*Sensory Needs*
- Responds within the average range to a variety of stimuli.
- Is able to follow self-care routines independently or with minimal help.

*Learning*
- Can be motivated by appropriately differentiated materials.

In addition, from Key Stage 3 onwards:

*Communication and Language*
- Has language and communication development that is at most mildly idiosyncratic.

In addition, from Key Stage 5 onwards:

*Communication and Language*
- Has language and communication development that is at worst mildly idiosyncratic.
- Interacts appropriately with peers in reciprocal conversation.
Thinking Flexibly
- Follows instructions.
- Is able to engage in learning discussions with peers, responding appropriately to another’s comments.
- Engages with activities for an appropriate length of time.

Sensory Needs
- Is able to listen to adult instructions while continuing with focus tasks.
- Is able to combine verbal and visual information.

Provision for High Quality Teaching

Staff Knowledge and Understanding
- A named, experienced member of staff who remains informed about ASD in general and has specific information about individual pupils with ASD/social communication difficulties.
- Provision of training about ASD at the relevant level for all teaching and support staff.
- A recognition by those working with pupils with ASD that, due to sensory issues, Theory of Mind difficulties and/or inflexibilities of thinking, they are predisposed to over-stimulation and stress.
- Class staff maintain a calm, firm and consistent approach to managing behaviour.

Expected Interventions to Support Learning

Communication and Language
- Adults should keep language clear and avoid sarcasm, ambiguities and idioms.
- Pupils may benefit from use of a scribe.
- Pupils should be cued into instructions and key pieces of information.
- Teacher/TAs could use a pointing stick or similar to help cue and maintain pupil’s attention to a focus item
- Planning should be shared with all staff members.
- There should be visual support such as: class visual timetable to prepare for change; task planners; prompts to show good listening and sitting.
- Regular opportunities to listen to adults reading to them in a quiet environment.

Emotional and Social Development
- Pupils should be grouped appropriately – working alongside good role models and pupils they are likely to socialise with on the playground.

Thinking Flexibly
- There should be clear class rules and routines which have been written by the class, understood and displayed visually.
- There should be clear rules and routines for moving around the school.
- Tasks should be broken down into manageable steps with a clear start and finish.
- Tasks should show a finished example wherever possible.
- Clear separation between visual timetable and ‘First, Then’ (or similar) as they serve different purposes and should not be confused by the pupil.
Sensory Needs
- Pupils should work in a well-organised classroom – equipment easily accessible, drawers for equipment labelled clearly, furniture arranged to best effect.
- Pupils should have a quiet area within the classroom.
- Pupils should work in an environment that is as calm and quiet as possible.

Learning
- Encouragement and motivation of pupils with autism by meaningfully using their strengths, favourite activities and special interests.
- Involvement of pupils with ASD, at a level relevant to them, in formulating their learning goals.

In addition, from Key Stage 3 onwards:

Communication and Language
- There should be adults taking time to listen to what pupils are saying and modelling positive listening behaviours.
- There should be clear introduction of key topic specific vocabulary.
- Language should be clear and positive.
- Adults should provide time for the processing/understanding of the language.
- There should be clear classroom routines to establish good listening skills.

Emotional and Social Development
- Staff should affirm appropriate social interaction working alongside good role models.
- Staff should support self-esteem with working on and emphasising abilities/interests/social skills.
- Opportunities to take part in learning discussions with peers and adults.
- Opportunities to be able to socially interact with peers and adults.
- Buddy support to facilitate peer interaction.

Thinking Flexibly
- There should be clear identification of the purpose of activities and links to previous learning.

Learning
- Equality of access, including the extended curriculum and exam concessions, as appropriate.

In addition, from Key Stage 5 onwards:

Communication and Language
- Provision of an identified listening area and associated activities within the classroom.
- Teaching colloquial language.
- Teaching language for sexual awareness and relationships.

Emotional and Social Development
- A classroom arranged to facilitate collaborative working.
Thinking Flexibly
- Clear routines for homework.
- Rehearsals for further education life skills.

Sensory Needs
- Strategies for obtaining time out, as necessary, in an age-appropriate way.

There are support materials available on the Local Offer
Pupil Characteristics

**Communication and Language**
- Verbally communicates in a meaningful way with some echolalia or unusual delivery.
- Has a mild difficulty with understanding non-verbal communication – for example body language/facial expressions.
- Recognises the need for help but may be unable to seek it effectively.

**Emotional and Social Development**
- Demonstrates some understanding of simple feelings but does not recognise more subtle emotions such as disappointment.
- Is able to take turns with some low level adult support.
- Tolerates play/social interaction alongside peers but may not initiate an interaction appropriately.
- Has limited self-confidence in a range of settings.
- May be unusually quiet.

**Thinking Flexibly**
- Could be distracted from interaction by repetitive behaviours.
- Continues to experience some difficulty with change, even when prepared by adult.
- Displays some repetitive and/or ritualistic behaviour, but can be managed within existing arrangements.
- Can organise materials for a task and follow familiar routines with verbal and/or visual prompts.

**Sensory Needs**
- Experiences some discomfort with sensory stimuli and/or may seek out certain sensory stimuli.
- Displays inappropriate behaviours and unusual responses in some settings.

**Learning**
- Has some difficulties with motivation even with appropriately differentiated materials.
- Requires verbal and/or visual prompts to follow self-care routines such as dressing/toileting.

**In addition, from Key Stage 3 onwards:**

**Emotional and Social Development**
- Unclear about the ways to become involved in group activities.

**Thinking Flexibly**
- With support can cope with different requirements and routines across a range of subjects.
In addition, from Key Stage 5 onwards:

**Communication and Language**
- May have difficulty following instructions without support.
- May have difficulty sustaining attention for extended periods.
- May attend better to non-language based tasks than language based ones.
- May find it hard to listen when engaged in a focus task.

**Emotional and Social Development**
- May have difficulty maintaining a topic of conversation appropriately.

**Thinking Flexibly**
- May struggle to make choices about their future.

**Sensory Needs**
- May well struggle with the demands of group work.

### Provision for Additional School Intervention and Support

#### Staff Knowledge and Understanding

- Functional analysis of any challenging behaviour is used to ascertain its communicative intent. Pupils with autism who have limited language skills and/or difficulties with Theory of Mind (the ability to see a situation from another’s perspective) may well struggle to explain what they find problematic about various situations. Our best source of information here may well be the challenging behaviour; best practice will be to discover the problem that provokes such responses and address it, rather than to seek merely to contain or to suppress this challenging/communicating.

#### Expected Interventions to Support Learning

**Communication and Language**
- Adults cue pupil into instructions and key pieces of information by always calling them by name first.
- Tasks should be rehearsed or modelled, showing a finished example wherever possible.
- Pupils should be given time to process information/expectations.
- There should be a visual means to request help.
- Staff should explain idioms and non-literal language.
- Pupils should have key language supported visually.
- Pupils should be alerted to the need to listen through using their name.

**Emotional and Social Development**
- Staff need to provide inclusion in a social skills group.
- Phrases about safety and help are taught and modelled.
- Pupils will have access to a buddy/peer support system.
- Partner work with supportive peers is arranged.
- Pupils are seated in a position with a good view of the teacher to enable use of non-verbal communication such as gesture and facial expression.
- Pupils should be taught to understand the passage of time.
Thinking Flexibly

- There are clear expectations of rules and routines shown which are shown visually.
- There should be personalised visual supports – visual timetable to prepare for change, task planners, prompts to show good listening and sitting.
- Pupils should have tasks broken down into manageable steps with a clear start and finish by using task planners that have been personalised for the pupil.
- There should be visual prompts to support organisational skills.
- There should be a calm, firm and consistent approach to managing learning behaviour related to rewards that are motivating for the pupil.

Sensory Needs

- There should be a distraction-free area within the classroom such as a class office/workstation.
- Distractions to be minimised within the classroom – the pupil being sat away from strong visual stimuli.
- There should be a place of calm within the class or school – book corner or library.
- There should be a designated space for sitting on the carpet.
- Movement breaks are provided.
- A sit and move cushion/writing slope/pencil grip is provided as necessary.

In addition, from Key Stage 3 onwards:

Communication and Language

- Pre-teaching of topic-specific vocabulary takes place.

Thinking Flexibly

- A suitably motivating and personalised reward system where the pupil is rewarded for small achievements and good citizenship.
- Staff teach what the rules are and who polices then
- Pupils are taught skills to make their own visuals.

Learning

- Staff ensure that the order of action reflects the order of mention.

In addition, from Key Stage 5 onwards:

Communication and Language

- Colloquial and idiomatic language is explained.
- Staff to focus on language being reduced, chunked and simplified to support accurate retention – verbal bullet points.

Emotional and Social Development

- Staff support the skills into adult life around dating, sexual health.

Thinking Flexibly

- Young people learning how to cope with free lessons in a timetable.
- Young people develop an awareness of the law and what they can and cannot do.
**Sensory Needs**
- Staff use clear praise for displaying good listening and attention behaviours.

**Learning**
- Task planners to promote independent working skill.
Pupil Characteristics

Communication and Language
- Has limited verbal communication and lacks spontaneity. Sometimes need visual prompts to support communication.
- Understanding tends to be literal.
- Has significant difficulty with understanding non-verbal communication – for example body language/facial expressions.
- Difficulties demonstrating joint attention.
- Communication and understanding are mostly non-verbal with significant difficulty understanding spoken language and gestures.
- Uses augmentative communication for example PECS (Picture Exchange Communication System) or Makaton.
- May display extreme, challenging inappropriate behaviour that is very difficult to manage, including extremely withdrawn behaviour.

Emotional and Social Development
- Unable to take turns unless given significant adult support.
- Has limited understanding of own feelings and cannot recognise feelings in others. There is a marked lack of awareness of others.
- Tends to avoid interactions with peers; has little interest in peer interactions.
- Approaches others in odd or unusual manner (for example from behind /with poor eye contact).
- Appears aloof or indifferent to others.
- If interaction is unavoidable, it is usually on his/her terms.
- Is unaware of the concept of feelings
- Displays adverse/extreme or behaviourally inappropriate responses. Can be withdrawn/isolated.
- Demonstrates a high level of anxiety (possibly around self-image), with some verbalisation.
- Extremely negative thoughts about self.

Thinking Flexibly
- Has significant on-going difficulties with managing change even if prepared.
- Repetitive and/or ritualistic behaviour or special interests interfere with learning or are all consuming.
- Is extremely difficult to motivate - can be totally absorbed in own interests.
- Has significant and persistent difficulties in organising self, (for example, to collect items for a task or follow daily routines), without visual cues/objects and adult modelling.

Sensory Needs
- Has unusual responses to certain sensory stimuli with some behavioural reactions or signs of stress - may seek sensory feedback such as rocking, mouthing objects.
- Is unable to tolerate certain sensory stimuli. Shows extreme reactions.
- Is difficult to distract from preferred sensory stimuli.
At risk of self-harm due to sensory needs.

Learning
- Has considerable difficulty with motivation, with erratic response to classroom rewards.
- Has difficulty organising materials for a task even with visual and verbal prompts and adult modelling.
- Requires adult intervention/ close supervision and visual/verbal prompts to support self-care routines.
- Is unaware of the need for help for a task.

In addition, from Key Stage 3 onwards:

Communication and Language
- Displays adverse/extreme or behaviourally inappropriate responses that are very difficult to manage.

Emotional and Social Development
- Has limited understanding of own feelings and cannot recognise feelings in others.
  There is a marked lack of awareness of others.
- Tends to avoid interactions with peers
- Still developing Theory of Mind.

In addition, from Key Stage 5 onwards:

Thinking Flexibly
- May not generalise from one setting to another.

Learning
- Needs a high level of support to sustain attention in most contexts.
  - tends to flit between activities and is easily distracted.

Provision for High Needs

Staff Knowledge and Understanding
- A close working relationship with parents/carers and all agencies involved.
- Staff have knowledge of other forms of communication/augmentative communication.
- Involved adults to share and understand the pupil’s individual profile – what motivates them, their sensory sensitivities, anxiety levels, and so on.
- There is recognition that pupils with autism may have an uneven profile.
- Adults with an awareness of the sensory processing difficulties typically shown by those on the autism spectrum and how to address these.

Expected Interventions to Support Learning

Communication and Language
- Adults who speak clearly, slowly, calmly and give pupil time to respond
- Pupils are taught joint attention skills.
- Adults model clear language – the language of turn-taking, appropriate help and
safety and phrases, social language.
• Other forms of communication/augmentative communication are used frequently and consistently

Emotional and Social Development
• Adults teaching the names of other pupils in the client pupil’s class.
• There is adult monitoring of pupil’s physical and emotional well-being understanding that pupils with autism may not be able to do this for themselves.
• Adults support the student to develop peer awareness.

Thinking Flexibly
• There is visual warning of change throughout the day including staff and room changes
• Generalisation of learning is taught.
• There should be alternative arrangements for tests and exams.
• Preliminary work on the physical changes around puberty should take place.

Learning
• Development of the pupil’s independence skills should be promoted.
• Arrangements for personal care (toileting) should be in place.

Several/most of the following may be pertinent, depending on pupil’s specific needs:

Communication and Language
• A programme of ‘Intensive Interaction’ to develop communication.
• Language supported visually.
• Teaching social language and the language of self-help.
• Use of PECS (Picture Exchange Communication System).
• Alternative means of recording work including ICT and the use of a scribe should be promoted.

Emotional and Social Development
• TTurn taking skills are taught.
• Staff have access to programmes to an understanding of emotions using programmes such as ‘The Incredible Five Point Scale’ by Kari Dunn Buron and Mitzi Curtis Graded feelings work.
• Peers develop peer understanding through direct modelling and teaching.
• Peer support is arranged– peers using the visuals to support their understanding.
• Good teaching of the understanding of how to make friends and the meaning of true friendship takes place.
• Staff teach social play skills in class and on the playground.
• Pupils participate in a social skills programme such as ‘Time to Talk’ (Alison Schroeder)
• Staff to teach the passage of time by visual means – photo diaries, scrapbooks, diaries.

Thinking Flexibly
• Staff teach imaginative play skills using strategies such as ‘Identipay’.
• Staff help the pupil to cope with surprise (such as a surprise picture to indicate change on the timetable).
• Pupils are prepare for change by visuals and/or simple Social Stories.
• Staff recognise the onset of anxiety and what to do about it.
Pupils are given hope for the future; promoting a positive attitude in the them towards the future.

**Sensory Needs**

- Time out of class possibly in a sensory room or similar area.
- There is provision of a sensory diet/ regular movement breaks/heavy work.
- There should be a detailed visual timetable with pocket for finished tasks showing who pupil is working with and so on.
- There should be a place of safety/sanctuary within school.
- There is access to a quiet space at lunchtime and playtime.
- There is a private place in which to get changed for PE.
- There is an alternative available to classroom toilets.
- Adapted scissors are provided.

**Learning**

- A TEACCH (Treatment and Education of Autism and related Communication Children) style work station.
- Staff to ensure work is differentiated, chunked and suitably motivating – the use of a task, reward system.
- There should be small step approaches such as ‘backward chaining’.

**In addition, from Key Stage 3 onwards:**

- Appropriately differentiated homework is arranged.
- Pupils take part in a social skills programme such as ‘The Friendship Formula’ by Alison Schroeder and by using approaches such as a ‘Circle of Friends’.
- There is access to programmes to an understanding of emotions using programmes such as Graded feelings work.
- There is access to programmes to develop an understanding of emotions such as ‘The Incredible Five Point Scale’ by Kari Dunn Buron.

**Communication and Language**

- Kinaesthetic approaches to teaching language are used.

**Emotional and Social Development**

- Pupils are taught play skills in class and on the playground.

**Sensory Needs**

- Access to lunch.

**Several/most of the following may be pertinent, depending on pupil’s specific needs:**

**Sensory Needs**

- Access to a distraction-free ‘listening’ environment.
In addition, from Key Stage 5 onwards:

**Communication and Language**
- Young people work with adults who, when addressing the pupil, speak clearly, slowly, calmly yet in an age-appropriate way and give pupil time to respond.

**Thinking Flexibly**
- Visual schedules are in use.
- There is recognition that pupils with autism are highly anxious and will need to learn relaxation techniques/have access to a relaxation box.
- A modified curriculum with a focus on life skills and preparation for the world of work.

**Sensory Needs**
- There should be peer understanding of the pupil’s sensory needs.
- There is a an alternative to the school toilets – for instance, the disabled toilets.

**Several/most of the following may be pertinent, depending on pupil’s specific needs:**

**Communication and Language**
- Engaging in listening games and activities to develop skills.
- Support to understand the benefits of developing good attention and listening skills.
- Priming to support listening and accurate responses.
- Adult support to engage in social and learning conversations.

**Thinking Flexibly**
- Only being required to focus on one adult voice at a time.

The Autism Education Trust (AET) has developed a set of National Standards to describe the key factors common to good practice for pupils with autism. These can be downloaded from  
www.essexlocaloffer.org.uk/content/autism-education-trust-aet-standards-education-settings
SPEECH, LANGUAGE and COMMUNICATION NEEDS

Introduction

‘A significant proportion of children and young people in both primary and secondary school with special educational needs have SLCN as their primary need.’ ‘Children and young people with SLCN commonly have difficulties with reading and writing and accessing the curriculum. They also often have poor behaviour and may find it hard to socialise with peers.’

‘The majority of SLCN are identifiable in the second year of life and can persist through school and into adulthood. Some may become apparent only as the school curriculum becomes more demanding, for example at secondary school’ - Bercow Report 2008

Children and young people can experience a variety of difficulties associated with their speech, language and communication development. These can include difficulties with:

- attention and listening – their ability to engage successfully with language;
- receptive language – their ability to understand spoken language;
- expressive language – their ability to use language to communicate with others;
- speech sound development – their ability to produce the sounds necessary for clear, intelligible speech;
- social communication – their ability to use language appropriately and successfully in social situations.

Speech, language and communication difficulties can present as a primary need or may be part of a more complex pattern of difficulties. In any case, a persisting difficulty with development of speech, language and communication skills can negatively impact on:

- progress with learning, particularly with regard to literacy;
- development of successful friendships and social relationships;
- behaviour;
- self-esteem and emotional well-being.

It is important to note that a child who is learning English as an Additional Language (EAL) should not be considered to have special educational needs purely on the basis of the additional language needs:

‘A child or young person does not have a learning difficulty or disability solely because the language (or form of language) in which he or she is or will be taught is different from a language (or form of language) which is or has been spoken at home.’

Children & Families Act 2014

Click here for guidance on first language assessment to support identification of whether a pupil with EAL also has Special Educational Needs.
Levels of Support High

High Quality Teaching (HQT)

All staff should be aware that they have a responsibility for the development of speech, language and communication skills of all pupils in their care (SEND Code of Practice 2014). Staff should be aware of the principles and importance of curriculum differentiation as indicated in the Primary and Secondary national strategies (National Curriculum in England: Framework for Key Stages 1 – 4).

All staff should be aware of the stages of typical language development; the impact of Speech, Language and Communication difficulties in the classroom; and the importance of the language environment on a pupil’s ability to access academic, social, personal and extra-curricular opportunities.

The majority of pupils operate broadly within the normal range of abilities but some may have difficulty in pronouncing some sounds, expressing themselves and/or in understanding the language they hear. This may slightly affect their interaction with others and their confidence in engaging in discussions/answering questions in class. Needs are likely to fall within SALF (Speech and Language Framework) Level 4 with some possible mild delays in language or speech sound development. Pupils will be able to access the curriculum with appropriate in class differentiation.

Additional School Intervention and Support (building on HQT)

Pupils are likely to need encouragement to join in class discussions. They may have attention and listening difficulties; speech may be unclear to the listener, particularly where there is no shared context; they may have difficulties in understanding instructions, vocabulary, question words; and/or may have difficulty in structuring sentences and expressing their thoughts, opinions and knowledge. They may not always be able to get their message across clearly. Speech and language weaknesses may affect social aspects of school life. Pupils may have identified speech and language delays or disorders (moderate) which are likely to fall within SALF Level 2 or 3.

In addition to differentiated learning tasks and opportunities within the classroom, the teacher will be supported by the SENCo to identify appropriate additional resources, support and advice, possibly from outside agencies, following the guidance set out in the SEND Code of Practice 2014. There should be clear records of provision and impact, initially through usual school record keeping systems but later through the development of the ‘One Plan’ process.

High Needs (building on HQT and ASI)

Pupils with high needs experience long term significant difficulty in making progress with learning and in engaging with their class group, despite the provision of High Quality Teaching and support strategies as described above. A ‘One Plan’ process will have been implemented incorporating advice from specialist speech and language professionals and others (such as the Educational Psychologist or Paediatrician). It is likely that these pupils will present with significant (severe or profound) speech and language difficulties (most likely identified disorders) which are slow to respond to remediation and occur alongside additional difficulties related to learning, self-esteem, social engagement, and possible behavioural difficulties.
This section is organised into 5 areas. Please use the menu below to access the area you need, by clicking on the headings. If you need to return to the Speech, Language and Communication Needs (SLCN) to select a different area, please click the 'MENU' button which appears on the left at the beginning and end of each section.

- ATTENTION and LISTENING
- RECEPTIVE LANGUAGE (Understanding)
- EXPRESSIVE LANGUAGE (Speaking)
- SPEECH and PHONOLOGICAL AWARENESS
- SOCIAL INTERACTION
ATTENTION and LISTENING

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Speech, Language and Communication Needs

High Quality Teaching (HQT)

Pupil Characteristics

- Is able to engage with an activity for an appropriate length of time.
- Is able to listen attentively to stories, discussions and conversations.
- Is able to follow instructions.
- Is able to interact appropriately with peers in reciprocal conversation.
- Is able to maintain joint attention.

In addition, from Key Stage 2 onwards

- Is able to listen to adult instructions while continuing to focus on tasks.
- Is able to engage in learning conversations with peers, responding appropriately to the comments of others.
- Is able to combine verbal and visual information successfully.
- Is able to identify and indicate when they do not understand.

Expected interventions to support learning

- Clear classroom routines are taught and reinforced to promote good listening skills
- Classroom seating arrangements allow all pupils a good view of the teachers face when speaking.
- The purpose of activities is clearly identified and clear links are made to previous learning.
- Key topic vocabulary is introduced explicitly with the use of concrete, visual supports.
- Visual supports are used to reinforce language learning and development.
- Pupils’ names are used before individual instructions are given.
- Adults take time to listen to what children are saying and model positive listening behaviours.
- Classrooms have an identified ‘listening area’ with provision of associated activities.
- Pupils have regular opportunities to listen to adults reading to them in a quiet environment.

In addition, from Key Stage 2 onwards

- Pupils should have regular opportunities to take part in learning discussions with peers and adults.
- Classroom bases should be arranged to facilitate collaborative working.
- Staff are likely to need to ensure that the pupils have stopped working and are listening before new instructions are given.
In addition, from Key Stage 3 onwards

- Pupils may need to be reminded to stop working on a task in order to focus on listening to new instructions.

There are support materials available on the Local Offer
ATTENTION and LISTENING Speech, Language and Communication Needs

Additional School Intervention and Support – ASI (building on HQT)

Pupil Characteristics

- May flit between activities.
- May find it hard to attend to stories, discussions and conversations.
- May have difficulty following instructions without support from peers or adults.
- May have difficulty maintaining a topic of conversation appropriately.
- Attends better to non-language based tasks rather than language based ones.

In addition, from Key Stage 2 onwards

- May find it hard to listen when engaged in focused tasks.

Expected interventions to support learning

- Pupils benefit from being prompted to listen through the use of a verbal or non-verbal prompt.
- Pupils should be given specific praise related to good listening and attention skills.
- Instructions and tasks should be broken down into manageable ‘chunks’.
- Language should be reduced, chunked and simplified to support accurate retention.
- Instructions should be given in the order of necessary action.
- Task planners should be used to promote independent working skills.
- Pupils should be seated with a good view of the teacher thus enabling use of non-verbal communication such as gesture and facial expression to support engagement.

In addition, from Key Stage 2 onwards

- Pupils should be supported through the use of verbal bullet points.
- Key topic vocabulary should be specifically pre-taught.

There are support materials available on the Local Offer
Pupil Characteristics

- Pupils’ attention is not yet fully under their own control.
- Pupils require frequent support to sustain attention in most contexts.

In addition, from Key Stage 2 onwards

- Pupils may continue to flit between activities and be easily distracted.

Expected interventions to support learning

- Staff and pupils agree an appropriate non-verbal cue that can be used to attract and maintain attention.
- Pupils engage in listening games and activities to develop appropriate skills.
- Pupils are supported to understand the benefits of developing good listening and attention skills.
- A quiet, distraction-free ‘listening’ environment is available for pupils to work in at certain times.
- Staff ensure that pupils are only required to focus on one adult voice at a time.
- Pupils are supported with visual resources.

In addition, from Key Stage 2 onwards

- Pupils will benefit from the use of priming to support listening and provision of accurate responses.
- Adults should support pupils to engage in social and learning conversations.
Speech, Language and Communication Needs
High Quality Teaching (HQT)

Pupil Characteristics

- Is able to understand most questions, instructions and comments in the majority of contexts.
- May need time to process and respond to verbal information.
- Understands a good range of everyday vocabulary but may be less confident with curriculum specific words.

In addition, from Key Stage 2 onwards

- May still be developing their ability to work with abstract concepts.
- Is increasingly able to identify when they do not understand.
- Is able to infer some information without explanation, but this remains inconsistent.

In addition, from Key Stage 3 onwards

- Can recognise when they do not understand.
- Is able to infer information without explanation.

Expected interventions to support learning

- Pupils are supported to link new learning to previous learning and experiences.
- Learning objectives should use child-friendly language.
- Pupils are provided with a range of opportunities to develop their understanding of curriculum specific and general vocabulary.
- Real objects, pictures and other visual information should be available to support developing understanding.
- Information and instructions are delivered in manageable chunks to prevent overloading memory capacity.
- Adults should monitor the language demands of expected tasks to ensure successful engagement.
- Adults should adapt language used in response to pupils’ levels of understanding.
- The classroom ethos should encourage pupils to ask questions to confirm, develop and secure their developing understanding.
- Staff should ensure that the pace of lessons is modified to enable pupils to process learning successfully.

In addition, from Key Stage 2 onwards

- Adults should adapt language usage to respond to pupils’ levels of understanding of
both concrete and abstract concepts.

- Pupils should be encouraged to identify and explain ‘why things happen’ and ‘how they know’ with reference to both explicit and implicit information.
Pupil Characteristics

- Is likely to have difficulty understanding some questions, instructions and comments.
- Is likely to struggle to retain information while processing.
- Is likely to have under-developed understanding of both everyday and curriculum vocabulary.
- May display some behaviours that are difficult to manage.

In addition, from Key Stage 2 onwards

- Is likely to have under-developed understanding of both everyday and/or curriculum vocabulary and concepts.
- Is likely to find it difficult to respond appropriately to non-literal language, irony and jokes.

In addition, from Key Stage 3 onwards

- Is likely to still be developing their ability to work with abstract concepts.
- Is likely to struggle to keep up with the pace and structure of peer interactions.

Expected interventions to support learning

- Pupils may benefit from adults simplifying and repeating questions and instructions.
- Pupils are likely to benefit from targeted pre-teaching of vocabulary.
- Pupils should be provided with visual supports for vocabulary learning.
- Pupils require access to a range of opportunities to develop their skills in sequencing, classification and categorisation.

In addition, from Key Stage 2 onwards

- Pupils should be supported through the use of verbal bullet points. Key topic vocabulary should be specifically pre-taught.
- Pupils should be provided with a personalised bank of key vocabulary.
- Pupils should be supported to make connections between old and new learning.
- Adults should allow additional time for pupils to process information and organise responses.
- Pupils should be taught strategies to alleviate the load on their auditory memory.
- Pupils should be taught strategies for organising information and ideas.
In addition, from Key Stage 3 onwards

Pupils may benefit from some specific adult support to interpret ‘peer speak’ and to assist them in understanding and engaging with peer interactions.
Pupil Characteristics

- Will struggle to understand verbally presented information, questions, instructions and comments in many contexts.
- Will struggle to retain information while processing.
- Understanding of vocabulary may be limited to very familiar contexts.

In addition, from Key Stage 2 onwards

- May appear very literal in their understanding.

In addition, from Key Stage 3 onwards

- May struggle to engage socially due to the pace and structure of peer interactions.
- Is likely to struggle to access and understand the substantial increase in vocabulary, information and instructions within the secondary curriculum.
- Is likely to struggle with the pace of learning.

Expected interventions to support learning

- Pupils are likely to require specific support to develop their understanding of question words.
- Pupils will benefit from targeted support to develop and extend key vocabulary and concepts.
- Pupils will require specific activities to develop their skills in sequencing, classification and categorisation.
- Pupils may require the use of alternative communication systems such as signing, gesture and pictures.

In addition, from Key Stage 2 onwards

- Pupils will benefit from targeted support to link new learning to existing knowledge
- Pupils are likely to benefit from the use of ‘closed’ questions, with the possible provision of ‘forced alternatives’.
- Pupils will require direct teaching to develop their understanding of common idioms.
In addition, from Key Stage 3 onwards

- Pupils are likely to require adult support to develop their understanding of ‘peer speak’ and social language.
- Adults should avoid the use of idiomatic language
- Pupils will require additional adult and/or visual assistance in order to support their understanding of learning tasks.
EXPRESSIVE LANGUAGE (SPEAKING)

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Speech, Language and Communication Needs
High Quality Teaching (HQT)

Pupil Characteristics

- Is able to play and talk with peers appropriately, demonstrating awareness of the listener's needs.
- Is able to talk about what they are doing, things they have learnt, and previous experiences, but may need support to sequence ideas.
- Is able to use language for a range of purposes such as questioning, negotiating, seeking information and making needs known.
- Is able to vary their speaking style dependent on audience.
- Needs occasional support to use known vocabulary consistently.
- Demonstrates topic maintenance in conversation.
- May need support to use vocabulary correctly.

In addition, from Key Stage 2 onwards

- Is able to engage appropriately in reciprocal conversations.
- Is able to talk about recent and past events and learning.
- Is able to predict and compare.
- Uses a growing range of everyday and subject specific vocabulary.

In addition, from Key Stage 3 onwards

- Is able to engage in conversations with a range of partners, varying language style and vocabulary appropriately.

Expected interventions to support learning

- Structured opportunities are provided to define and categorise attributes and functions in order to clarify vocabulary accurately.
- A range of play and learning opportunities are planned that encourage children to talk, including a range of role play experiences.
- Pupils are given opportunities to explain their learning to others.
- Visual and verbal supports are provided to secure and expand vocabulary knowledge and usage.
- Pupils are provided with opportunities to speak aloud in a range of contexts and settings such as classroom, class assembly, school play.
- Pupils are provided with opportunities to speak for a range of purposes.
- Adults use a variety of questioning techniques to develop a range of responses.
- Adults model back correct grammatical structures.
• Adult support is provided for rehearsal of talk for different purposes.
• Adults should create an environment that develops oral narrative skills.
EXPRESSIVE LANGUAGE (SPEAKING)

SLCN: Expressive Language (Speaking)

Additional School Intervention and Support – ASI (Building on HQT)

Pupil Characteristics

- May lack confidence to offer information in group or whole class situations.
- May lack awareness of the listener’s needs.
- May need support to talk about familiar events.
- May use inappropriate methods to interact with others or to meet their own needs.
- May need support to sustain topic maintenance.
- May display some difficult to manage behaviours.

In addition, from Key Stage 2 onwards

- May use shorter than average utterances associated with a narrow vocabulary.
- May find it difficult to use subject specific vocabulary accurately.
- May have difficulty structuring written work appropriately.
- May lack confidence to offer information in group or whole class situations.

In addition, from Key Stage 3 onwards

- May have difficulty engaging appropriately with range of partners, particularly with peers where pace and language usage may differ.

Expected interventions to support learning

- Pupils may need support to recall vocabulary.
- Pupils are likely to need support to prepare contributions to group or class discussions.
- Opportunities are provided for pupils to rehearse appropriate interactions in different scenarios and with different people through the use of role play.
- Talking frames are used to encourage appropriate development of narrative structures.
- Adults use differentiated questioning techniques to support independent response formulation.
- Adults monitor and support pupil to maintain topic focus in conversations.
- Alternative communication approaches such as signs and symbols are available to support development of verbal communication skills.

In addition, from Key Stage 2 onwards

- Adults provide models of extended speech.
- Targeted support is planned to support development of appropriate vocabulary. Pupils are provided with repeated opportunities to rehearse and develop oral narratives with adult support.
- Pupils are provided with writing frames to support narrative structure.
- Adults use supportive strategies to facilitate recognition of the listener’s needs, including feedback of the listener’s understanding.
- Pupils should be enabled to access and use alternative methods to record their learning.

In addition, from Key Stage 3 onwards:

- Pupils may benefit from discrete, targeted support to develop and rehearse their conversational skills and vocabulary.
**EXPRESSIVE LANGUAGE (SPEAKING)**

Speech, Language and Communication Needs

**High Needs**
(building on HQT and ASI)

**Pupil Characteristics**

- Peer interaction is limited by lack of verbal confidence/ability.
- Struggles to express their needs.
- Is unable to talk about recent personal events.
- Struggles to maintain topic focus in conversation.
- May use physical rather than verbal methods of interacting with others.

In addition, from Key Stage 2 onward:

- Attempts to engage socially are negatively affected by language weaknesses.
- Finds it hard to relate personal events effectively.

In addition, from Key Stage 3 onward:

- Peer interaction is negatively impacted on by lack of verbal confidence and poor processing.

**Expected interventions to support learning**

- Pupils will benefit from individualised frameworks to support development of confidence and structure in speaking.
- Adults will need to use tailored support strategies to scaffold oral responses.
- Peer interaction will require adult support.
- In order to communicate their needs, opinions and knowledge, pupils are likely to require non-verbal supports such as pictures, signs or AAC (augmentative and alternative communication) devices.
- Pupils should be enabled to access and use alternative methods to record their learning.

END of High Needs section

SLCN: Expressive Language (Speaking)
SPEECH and PHONOLOGICAL AWARENESS

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Speech, Language and Communication Needs
High Quality Teaching (HQT)

Pupil Characteristics

- Speech may display minor sound errors. These may show no pattern, but different sounds may be changed in different words.
- Speech is intelligible to others but displays some immaturities which may impact on the acquisition of literacy skills or impact on social interaction.
- May display immature production of multi-syllabic words.
- Speech intelligibility may break down in connected speech.
- Is beginning to be able to develop awareness of individual sounds
- Is beginning to be able to identify sounds at the beginning, end and middle of words.

Expected interventions to support learning

- Adults should ensure that only ‘pure’ sounds are modelled to support accurate differentiation.
- Adults should model correct pronunciation of words using ‘recasting’.
- Pupils should be allowed time to speak such that they can focus on accurate pronunciation while not being rushed.
- Activities should be provided to secure accurate sound differentiation, initially focussing on matching and comparing initial sounds, but developing to focus on end and middle phonemes.
- Pupils should be encouraged to generate word groups with the same beginning/middle/end sound.
- Opportunities to identify, create and interact with rhyming words should be incorporated into planning for both speaking and listening and literacy.
- Literacy tasks may need to be modified incorporating differentiated resources.
Pupil Characteristics

- May have persisting difficulties with production of multi-syllabic words.
- Speech sound system may be delayed, but following normal development or a clear pattern for example saying t instead of k, b instead of sp.
- Speech may be difficult to understand even when the subject of conversation is known by listener.
- Experiences difficulty hearing the difference between sounds such as s/d and sounds in words such as saw/door.
- May have difficulty recognising syllable structure of words.
- May have difficulty recognising that groups of words rhyme.
- May present with ongoing dysfluency (stammering) that is not resolving but that has minimal impact on communication.
- May display lack of voice, hoarseness or harshness which affects their ability to communicate.
- Speech difficulties may interfere with the acquisition of literacy skills.

In addition, from Key Stage 2 onwards

- Speech sound development may be delayed (saying t, d instead of k, ch, j; b, d, g instead of sp, st, sk; and w, l instead of r, y after age 8).
- Spelling may be affected by persistent difficulties with production of multi-syllabic words.
- Speech sound system is disordered, but following an identifiable pattern.
- Presents with a moderate to severe persistent stammer with significant impact on communication.

Expected interventions to support learning

- Pupils are provided with additional opportunities to engage in activities described above, working at a slower pace and possibly focussed on specific areas of weakness.
- Pupils should continue to be provided with visual aids to support their developing auditory discrimination skills.
- It may be helpful for adults to introduce pupils to visual/kinaesthetic memory cues to support differentiation between similar signs for example through use of cued articulation and similar systems.
SPEECH and PHONOLOGICAL AWARENESS

Speech, Language and Communication Needs
High Needs
(building on HQT and ASI)

Pupil Characteristics

- Uses a limited range of sounds.
- Is unable to copy (more than) single speech sounds.
- Has a moderately or severely delayed/disordered sound system for example a group of sounds will be changed to a different group of sounds such as saying b, d, g instead of f, s, sh; t, d instead of k, g and b, d, g instead of sp, st, sk.
- May use some unusual sounds;
- May have difficulty in copying simple oromotor movements (lip and tongue) required for speech.
- May have difficulty hearing the difference between sounds such as s/d and sounds in words such as saw/door.
- Speech may be unintelligible to most listeners.
- May be an AAC user.

In addition, from Key Stage 2 onwards

- Presents with severe delay in development of sound system for example saying b, d, g instead of f, s, sh; t, d instead of k, g, and b, d, g instead of sp, st, sk.
- May have difficulty telling the difference between similar sounds such as s/f and sounds in words such as saw/four.
- Speech is very difficult to understand even when the subject of conversation is known by the listener.

Expected interventions to support learning

A pupil presenting with this level of need will be under the care of a specialist professional and interventions should be in line with specific recommendations from that relevant specialist.

END of High Needs section
SLCN: Speech and Phonological Awareness
Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

**Speech, Language and Communication Needs**

**High Quality Teaching (HQT)**

**Pupil Characteristics**

- Is able to use language to successfully interact with both peers and adults.
- Is able to self-monitor and take account of listener knowledge and needs.
- Is able to engage in interactions with others on a range of topics, even when these are initiated by others.
- Is aware of appropriate conventions regarding interaction with others.
- Displays awareness of different conversational styles in different situations.
- Shows age-appropriate understanding of non-verbal communication.

**Expected interventions to support learning**

- Role play.
- Collaborative working.
- Adult modelling.
- Opportunities to experience interactions in a range of contexts and with a range of people.
Pupil Characteristics

- May display mild difficulties in understanding and using non-verbal communication such as gesture, eye contact, facial expression, reciprocal smiling.
- Conversational skills may be impaired by difficulties in starting and maintaining conversation.
- May display mild impairment in sustaining appropriate social interaction.
- May occasionally use language that is inappropriate to the situation, misjudging how to talk to different people in different situations.
- May lack understanding of the listener’s needs, expecting the listener to understand what they are talking about.
- May lack awareness of conversational breakdown.

Expected interventions to support learning

- Focussed sessions such as Bubble Time/Social Time focussed on developing pupil understanding and experience of appropriate conversational skills.
- Clear and overt teaching and modelling of appropriate interaction skills.
- Opportunities to observe and join in with adult led discussions.
- Opportunities to develop appropriate listening, questioning and turn taking skills.
- For additional strategies for developing communication skills click here,
Pupil Characteristics

- May fail to appreciate and/or use non-verbal communication.
- Pupil may display significant difficulties in initiating and/or sustaining appropriate interactions.
- Echolalia may be evident.
- Is likely to learn best from direct teaching in small groups alongside adult prompts to use learnt strategies in context.

Expected interventions to support learning

- Pupils should have opportunities to engage with small group support programmes focussed on rehearsing and developing skills in conversation and interaction.
- Such programmes should include development of skills related to recognition, interpretation and response to non-verbal communication.
- Opportunities should be provided for pupils to be supported in developing appropriate turn taking skills.
- Pupils may be assisted in turn taking and listening by the use of a talking toy/object.
- Pupils may benefit from visual reminders to support the generalisation of skills from small group settings to wider contexts.
- For additional strategies for developing communication skills click here.
Introduction

Within the group of pupils considered to have physical and neurological impairment there may be different forms of need:

1. A pupil may have a physical condition that directly affects their learning outcomes. For example, significant involuntary control of the muscles of the arm will affect a pupil’s ability to write; significant involuntary control of oral musculature may lead to the need for alternative and augmentative communication (AAC); or perceptual difficulties may cause difficulty with the process of learning to read.

2. A pupil may have a physical condition with less immediately obvious associated learning difficulties, sensory needs or neurological problems. A neurological impairment can impact on aspects of thinking and learning such as verbal/non-verbal reasoning, executive functioning, memory and processing.

3. A pupil may primarily have problems with physical access which does not directly require modifications to learning content but rather the provision of appropriate mobility aids and modifications to the school environment.

4. A pupil may have a specific medical disability that requires regular specific nursing or medical /paramedical intervention in order to benefit from school.

Consequently, there are pupils whose physical disabilities require either separately or in overlapping combination:

- appropriate modification to curriculum access (for example presentation and recording);
- appropriate modification to curriculum content;
- support for the development of independent learning skills;
- appropriate modifications to physical access and the physical environment;
- specialist equipment and appropriately trained staff to focus primarily on health care needs.

School staff will need to understand the importance of all of the individual needs and aspirations of the pupil rather than attending only to the most immediate factors linked to their particular disability or condition.

If the pupil reviewed has needs requiring modification to curriculum content in addition to their main physical needs, then their progress and provision level will also need to be assessed within the appropriate section/s of the provision guidance.

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.
Physical and Neurological Impairment

High Quality Teaching (HQT)

Pupil Characteristics

- Pupils enjoy reasonably good health.
- They are physically able to manage well in the school environment.
- They are able to walk and position self independently, although they may find walking longer distances tiring.
- They have age-appropriate self-care skills.
- They may need self-medication/medication at home, for conditions such as mild asthma.

Provision for High Quality Teaching

Staff Knowledge and Understanding

- All staff are aware of the key disability factors highlighted through the Disability Discrimination Act, Disability Equality Scheme and the School Access Plan.
- All staff are aware that pupils may require more time to complete tasks and that equality of access may require some activities to be undertaken differently.
- All staff are aware of the principles of effective differentiation and can apply them to the needs of pupils with some motor and organisational difficulties.
- All staff are aware of and can use the additional advice available in the PNI Protocol (click here - the 2014 version will be available shortly)
- All staff understand that good home/school communication related to physical/medical needs is needed so that they can remain alert to condition changes and when it may be necessary to request further advice.

Assessment, Planning and Review

- Assessment for learning informs planning for suitably differentiated teaching taking into account access issues for physical/mobility at this level of need.
- Personalised planning is informed by regular audits of the school building, relevant procedures (especially in terms of administering medication) and minor additional access resources where necessary.
- Staff communicate regularly with parents to confirm and maintain access arrangements as well as how they can support their child’s learning needs (taking into account factors such as possible fatigue).

Expected access arrangements to support learning

- Access is maintained to all learning activities in class taking into account factors such as effective recording, appropriate seating and mobility.
- Appropriate seating placement is available to maximise the pupils’ view of the teacher and to reduce distractions.
- Consider seating pupils with writing arm on the outside edge of a shared table.
- Consider colour coding key information if pupils also have visual perceptual needs.
- Potential fatigue factors may need to be taken into consideration for some physical...
activities, for example, linked with PE. Some more assistance may be required when setting up practical subjects.

- School trips will need careful planning and risk assessment to ensure that reasonable adjustments are made for some limitations in mobility or likelihood of fatigue.
- Some assistance may be required for putting on additional clothing.
- Playground arrangements should allow for quieter as well as busier play areas.
- Additional time may need to be provided for written recording and other activities requiring both fine and gross motor skills.
- Consider pairing with a more coordinated peer/friend when engaged in work with higher use of physical skills is considered.
- Consider access to pre-prepared formats for graphical or other information to reduce written/drawn recording demand.
- Further advice on support is available in the PNI Protocol - Click here (the updated 2014 document will be available shortly)

**Expected arrangements to support emotional well-being for learning**

- Staff are available to monitor physical status and support the taking of medicines (if needed).
- Group approaches and peer partnerships maximise pupils’ full participation and direct academic and social engagement.
- Differentiation and access arrangements maximise success in learning activities to ensure an appropriate level of challenge.
- ‘Process feedback’ and recognition are given (through specific feedback about: strategies, effort, perseverance, challenge-seeking and improvement) leading to greater confidence and intrinsic motivation (as opposed to ‘person feedback’ referring to the intelligence or talents of the student; ‘disability feedback’ placing an emphasis on the impact of physical limitations; or ‘outcome feedback’ which puts the focus on the final product).

There are support materials available on the Local Offer
Pupil Characteristics

- Pupils have persistent minor health problems relating to physical disability or a medical condition requiring an increased level of monitoring.
- They can move and position independently but have stability and/or gross/fine motor coordination difficulties; hand function may be restricted.
- Mobility is affected, particularly over medium to long distances.
- They can make independent use of available safety features of the school environment, such as handrails.
- Disability limits the amount of self-care possible and verbal reminders may be required.

Provision for Additional School Intervention and Support

- Provision is monitored through a 4-part cycle: Assess, Plan, Do, Review (as highlighted in the new SEN Code of Practice).

Staff Knowledge and Understanding

- All staff involved are aware of the nature of the physical disability and linked learning and/or access requirements.
- All staff are aware of the principles of effective differentiation and can put them into practice for pupils with moderate physical and neurological impairments.
- Effective systems of internal communication between school staff are in place so that appropriate information is shared with regard to the implications for the pupils’ individual needs in relation to their physical disability or neurological impairment.

Assessment, Planning and Review

- Personalised learning plan are in place (detailing learning objectives and strategies and/or a completed provision map detailing resources and adaptations required for effective curriculum access).
- If standardised tests are used for assessment, these are relevant and provide valid results when used with pupils with physical and neurological impairment, both in terms of student access and checks on validity in relation to standardisation.

Expected access arrangements to support learning

- Resources are chosen that limit the need for manipulation.
- Access is maximised for teaching approaches which involve visual and practical resources.
- Written recording demands are reduced.
- Regular rest breaks reduce mental and physical fatigue.
- Appropriate seating and seating placement is considered.
- Additional support for self-care is provided when required/requested.
- Access is provided to a variety of strategies and personalised low-tech resources, such as a writing slope or modified scissors.
- The school environment already has adapted safety/support resources.
Pupils are provided with planned, regular opportunities to develop independent learning skills.

Any support provided by an additional adult must support the active engagement of the language/communication/thought processes of the student and be jointly planned and monitored in a process led by the class teacher.

Verbal and/or visual cues are provided to assist self-organisation and attention to task.

Additional time is allowed for processing instructions/questions and visual support.

Metacognitive strategies (learning how to learn) are explicitly taught.

Strategies are taught to improve organisation, including use of diaries, work plans, and checklists of daily equipment.

Access to group or individual work is supported regularly by the teacher or other adult.

There is increased use of alternative methods for pupils to demonstrate and record their learning (such as matching labels to pictures/diagrams/maps, mind-maps, appropriate visual pictorial or software/ICT/apps-linked resources, PowerPoint presentations, making posters, oral presentations).

Further advice on support is contained in the PNI Protocol - click here (the updated 2014 version will be available shortly)

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Expected arrangements to support emotional well-being for learning
(In addition to those described for High Quality Teaching level arrangements)

- Active use of approaches that encourage pupils with physical disabilities to take an active and assertive role in the development of their communication and learning.
Physical and Neurological Impairment

High Needs
(building on HQT and ASI)

Pupil Characteristics

- Pupils are likely to have life-long learning difficulties or disabilities, across several areas of development, and will require very targeted and specialist intervention.
- Learning can be frequently affected by health problems and hospital visits.
- Medication may impact adversely on attention and energy levels.
- Balance is required between educational, medical and therapeutic needs and interventions.
- Pupils have significant difficulty performing physical skills.
- Physical skills may fluctuate or deteriorate.
- Neurological factors may have a significant impact on learning and functioning.
- Pupils may be unable to weight bear and/or transfer from chair to wheelchair independently.
- Disability prevents self-care in one or more tasks, such as toileting, feeding, dressing.

Provision for High Needs

Staff Knowledge and Understanding

- Awareness of the additional teacher/therapist liaison is required to ensure appropriate balance between educational and direct therapy objectives (linked to developing holistic goals/outcomes).
- Access is available to specific training for support staff in implementing therapy programmes (within the holistic approach).
- Staff training related to administration or assistance with specific medical/personal care needs may be required.
- All teaching staff will need to have received relevant and specific training on how to assess and meet the needs of pupils with significant physical disabilities and (for some pupils) learning related difficulties.
- Staff need to undertake risk assessments regularly for individual pupils in different contexts.
- Disability-aware staff remain actively focused on all the needs of the individual pupil and take account of their views.

Assessment, Planning and Review

- Holistic planning incorporating educational and therapy advice is required, including detailed medical care planning when needed.
- Detailed assessment takes place of the pupil's levels of engagement and motivation with targeted learning activities using structured approaches such as the Complex Learning Difficulties and Disabilities (CLDD) Engagement Profile: http://complexld.ssatrust.org.uk/project-resources/engagement-profile-scale.html
- For pupils with significant learning as well as physical needs staff use assessment approaches such as P Scales, linked with more detailed assessment and monitoring systems such as PIVATS and/or B-Squared
Expected access arrangements to support learning

- Access to supportive seating is required.
- Access to an additional mobility resource is needed, such as a walking frame or wheelchair.
- Aspects of the school environment are adapted for specific needs, such as ramped access or an accessible toilet.
- Modified personalised Information Communication Technology resources are made available, linked where appropriate with Assisted Communication or Alternative and Augmentative Communication (AAC) resources and equipment.
- A scribe is used when required.
- Specialist transport arrangements and advance planning are provided to ensure maximum access and involvement on school trips.
- Adult support is needed for transferring resources between lessons.
- Adult support ensures effective mobility access when required/ requested.
- Additional support is available for physically active lessons such as PE or modified PE.
- Appropriate staffing is needed to monitor and support for specific activities, such as swimming.
- Adult assistance is given to set up resources or equipment when required or requested.
- Adult support is provided for identified self-care tasks.
- Advice is sought from a specialist speech and language therapist where speech articulation is a difficulty, or where modifications are needed to Alternative and Augmentative Communication (AAC) systems or approaches.
- Differentiation of the curriculum takes into account missed schooling and the possible need for home tuition.
- Hoists may be required for transfers.
- Access to tail-lift transport is needed to and from school and for educational trips.
- The use of mobility resources are effectively reviewed and managed.
- Access is available to an area for direct specific therapy intervention.
- Access to hydrotherapy is required for some pupils.

Expected interventions to support emotional well-being for learning

- Stress levels due to any sensory needs are monitored and appropriate strategies to reduce these are implemented consistently.
- A high level of adult support is provided to:
  - maintain pupil safety;
  - provide emotional support and help clarify signs of stress or concern;
  - meet personal care needs;
  - provide rapid response to any emerging medical need.
- Regular opportunities are provided for the pupil concerned to express their concerns and identify preferences.
- Up-to-date access to specialised and personalised resources and equipment (recommended by physiotherapist / occupational therapist / speech and language therapist / paediatrician or specialist nurse) is regularly maintained.

END of High Needs section
Physical and Neurological Impairment
Read the introductions to the areas of need, and navigate to the section you need by clicking on the appropriate heading.

**Hearing Impairment**

Pupils with a hearing impairment range from those with a mild hearing loss to those who are profoundly deaf. They cover the whole ability range.

For educational purposes, pupils are regarded as having a hearing impairment if they require hearing aids, adaptations to their environment and/or particular teaching strategies in order to access the concepts and language of the curriculum.

Pupils should only be recorded as HI if additional educational provision is being made to help them access the curriculum.

A number of pupils with a hearing impairment also have an additional disability or learning difficulty.

Hearing loss may be because of conductive or sensori-neural problems and can be measured on a decibel scale. Four categories are generally used by NatSIP (National Sensory Impairment Partnership): mild; moderate; severe and profound. Some pupils with a significant loss communicate through sign instead of, or as well as, speech.

**Visual Impairment**

Visual impairment refers to a range of difficulties from minor impairment through to blindness. Pupils with visual impairments cover the whole ability range. For educational purposes, a pupil is considered to be visually impaired if they require adaptations to their environment or specific differentiation of learning materials in order to access the curriculum.

Pupils should only be included if additional educational provision is being made to help them access the curriculum. Pupils whose vision is covered by spectacles should not be recorded as VI.

Pupils who are blind or have very limited useful sight require tactile methods of learning, such as Braille and 3D representations together with making optimal use of their hearing. Partially sighted pupils also need differentiated materials and may use enlarged print or a mix of learning methods.

It is essential to be aware that the criteria for placing a child within a particular category are based on visual acuity. However it may not accurately reflect what the child is able to do with their residual vision. Some children are more able to make full use of residual vision than others. Therefore any assessment or decision on which level of need the child falls under should only be made through discussion with the child and all adults and professionals working with the child. This should also take into consideration how well the child functions in their environment and the knowledge that changing the environment may completely change the child’s needs and ability to cope.
Multi-sensory Impairment

Pupils with Multi-Sensory Impairment (MSI) have a combination of visual and hearing difficulties. They are sometimes referred to as ‘deafblind’ but may have some residual sight and/or hearing. Many also have additional disabilities but their complex needs means that it may be difficult ascertain their intellectual abilities.

Pupils should be recorded as MSI if their sensory impairment is their greatest need.

Pupils with Multi-Sensory Impairment have much greater difficulties in accessing the curriculum and the environment than those with a single impairment. They have difficulties in perception, acquisition of information and communication. Incidental learning is limited. The combination can result in high anxiety and multi-sensory deprivation. Pupils need teaching approaches to make good use of their residual hearing and vision, together with their other senses. They may need alternative means of communication.

With MSI the difficulty in establishing a category of need lies in the combination of impairments. When the pupil has both a VI and HI there may be different categories of need for each area but the overall impact is likely to be magnified due to the loss in two sensory areas.

An example of a multi-sensory impairment would be monocular visual impairment (for example to have a visual acuity of between 6/12 – 6/18 SnellenKay (LogMAR 0.3 – 0.48), combined with a hearing impairment.
Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

### Sensory: Hearing Impairment

#### High Quality Teaching (HQT)

### Pupil Characteristics
- NatSIP criteria - mild to moderate hearing loss
- Mild to moderate, bilateral hearing loss (sensori-neural, conductive or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. This will include some pupils with an element of hearing loss with no hearing aids fitted.
- Conductive hearing loss which requires the use of a hearing aid or bone anchored hearing aid and can be classified as temporary and fluctuating hearing loss.
- Pupils may think they have fully understood verbal communications but may not recognise when they have missed information. They may mishear or misunderstand what is said or written, but say they have understood to avoid feeling embarrassed.
- Very likely to be using hearing aids but still communicate orally
- Hearing loss may affect the child/young person’s understanding of the world and their access to the curriculum

### Provision for High Quality Teaching

#### Staff Knowledge and Understanding
- Key staff should attend training which is delivered by a Qualified Teacher of the Deaf (TOD).
- A short package of support and monitoring may be provided by a TOD to support staff in schools.
- CPD should involve understanding the impact of hearing loss on the individual and can include strategies for management and care of hearing aids and other technology.
- Consideration needs to be given to some exam arrangements. Pupils may need access to a live voice with visual access to lip reading cues when information is required to be listened to.

**Training should include:**
- Deaf awareness
- Communication strategies
- Environmental factors for example lighting, blinds, carpets and so on
- Implications of hearing loss
- Classroom management strategies
- A ‘One Page Profile’ for pupils known to the HI service

#### Assessment, Planning and Review
- Whole school SEN policy reflecting the needs of hearing impaired pupils.
- Additional visits can be requested, if identified through monitoring, may prompt a further request by the school for involvement from the TOD, beyond that provided in the initial
package of support.

Expected interventions to support learning

Teaching Environment and Grouping

- Any difficulties with access due to existing hearing loss should be able to be met through class curriculum differentiation. The teacher should manage the classroom environment to produce the best possible listening conditions. This should include:
  - Class positioning to have a line of sight to the speaker.
  - Consideration of seating and grouping so that the child can be near the focus of the lesson and can see whoever is speaking.
  - An environment as free from noise as possible, close windows and doors and if necessary create a ‘quiet’ area.
  - Think about social interactions and be sensitive to potential difficulties arising from missing verbal interactions.
  - Pupils should be enabled to communicate their knowledge and understanding accurately, using a variety of approaches. This should inform grouping and remove barriers to their learning.
  - Use of written/visual cues and context to assist understanding
  - Think about social interactions and be sensitive to potential difficulties arising from missing verbal interactions.
  - Pupils should be enabled to communicate their knowledge and understanding accurately, using a variety of approaches. This should inform grouping and remove barriers to their learning.
  - Use of written/visual cues and context to assist understanding
  - Build in time for the pupils to assimilate new ideas and avoid overload by delivering too many oral instructions.

- Most auditory information can be accessed with personal hearing aids, FM radio aid system and LSA support in ideal situations (from school SEN budget).

- Advice should be sought on developing literacy and language skills for pupils with a hearing impairment from specialist professionals.

Support (Resources, Parent, Pupil, Training)

- The pupil may have one or two hearing aids, bone anchored hearing aids (BAHAs) or cochlear implants. These are issued by the hospital but will need monitoring by school staff for:
  - Cleanliness and damage to moulds
  - Battery function
  - Cleanliness and damage to tubing
  - Distortion of sound quality

- Use real life examples, objects, artefacts and visual stimuli to support learning wherever possible.

- The pupil may have a radio aid or other hearing aid which should be maintained by adults working with the pupil

- Where appropriate speech therapy may be offered.

- Differentiation of tasks and activities through staff use of accessible language.

Curriculum and Teaching Methods

- Staff need to gain attention of the pupil before speaking and speak clearly, naturally and at a normal rate. They should not cover their hands or walk around the room whilst talking and should use short sentences rather than long complex ones.

- Staff should sensitively reflect what other pupils are saying and encourage other pupils to speak one at a time and face the hearing impaired pupils.

- Staff should be aware of their position in class and avoid having a light source for example a window or interactive whiteboard behind them as this creates a shadow and makes it difficult for the pupil to lip read or see facial expressions.

- Pupils should be given time to think and process what is being said before they make a
response and a range of responses not just written, should be used.

- Pupils should be allowed time to read or look at pictures or visual aids before they are required to give a verbal response.
- New vocabulary should be explained and pictures and concrete objects which give the words meaning should be provided to support verbal information.
- The Pupil’s name should be used before asking a question or giving an instruction and a they should be provided with a visual indication as to the location or to the person speaking
- Allow extra time to complete the task and be aware of the fatigue the pupil may experience because of the amount of effort they have put into listening and lip reading.
- TV/DVDs should always be used with subtitles.
- Assessments and examinations which have elements which require pupils to listen should be given on a 1:1 basis, with a live voice to allow pupils to access lip reading cues.
- Core vocabulary will need to be reinforced. Instructions may need to be repeated or modified to match learning needs.
- Programmes to develop spoken and written language and communication skills may need to be followed through and incorporated naturally into all aspects of the school day.
- Staff should take time to check understanding. Context will give a hearing impaired pupil more opportunity to understand concepts.
- Some in class support may be necessary from time to time to check for understanding and clarify concepts in certain topics. This should be provided by the school.
- Hearing Impairment is not a cognitive difficulty and care must be taken to ensure that curriculum expectations are appropriate and that the pupil has the every opportunity to learn at an appropriate level for their ability. However hearing impairment is a major impairment to the development of language and thus can cause significant difficulties in language, emotional or learning skills. The degree of impact will be pupil dependent.
- Comprehensive advice plus hyperlink to effective strategies (click: ‘Supporting the achievement of deaf children in primary schools’)
- Setting should consider the advice from the NDCS on creating a good listening environment through providing acoustic treatment and controlling background noise where possible.
- ‘Quiet zones’ should be provided, where lower levels of noise are encouraged and established. Deaf children and other children can take part in quieter activities, such as sharing books, completing puzzles or talking.
- Visual support should be provided for tasks to help understand concepts and tasks.

Expected interventions to support emotional well-being for learning

- Needs awareness training (including the impact of hearing impairment), should be provided for the pupil’s peer group, delivered by TOD. This should be embedded in school ethos and part of PHSE.
- Staff should be aware of the possible need for additional emotional support due to vulnerability resulting from the impact of deafness on social interactions with peers and the wider environment.
- Awareness should be raised as to the availability of ‘Deaf CAMHS’.
- Staff should be aware that for pupils with a hearing impairment it is difficult to talk in groups, because of their deafness and other pupils’ attitudes. There should be many opportunities to socialise but there must be recognition that:
  - social situations often take place in the noisiest parts of the school;
  - some pupils are bullied because of their deafness;
  - social acceptance requires an understanding of social norms but hearing pupils acquire these by incidental learning experiences, which deaf pupils are less likely
to have;
will misunderstand them;
- they may become over-dependent on support from adults and lose confidence when support is not there
- they are often unaware of current social language, slang and ‘street talk’.

- Staff should promote deaf awareness in the classroom using resources such as NDCS’s ‘Look, Smile, Chat’. They should provide opportunities for the pupil to practise social strategies related to their deafness, for example, identifying why a conversation is becoming difficult and how to improve the situation.
- Opportunities should be provided to meet other deaf young people – service providers, parents, local deaf groups or charities may be able to help. It can be helpful for deaf pupils to meet deaf adults who have successfully managed issues arising from their deafness and may act as role models to younger deaf people.
- Pupils should be encouraged to take responsibility for their own deafness and to develop the confidence to ask for support.
- Staff should facilitate effective communication between the deaf child and their peers. They should help the other children to understand what difficulties the deaf child faces and what they can do to make them feel included.
- Adult support should be regularly reviewed to ensure that the deaf child does not become unnecessarily dependent on that person for social support.
- Staff can support boosting the deaf child’s confidence by praising them when they contribute to group activities and particularly when they have made their own friendships.
- The pupil may benefit from learning strategies that will help them cope with situations they may find difficult because of the impact of their deafness, for example even the youngest child can be helped to learn to ask a peer to face them when they speak. Encourage them to practise strategies that they can use to improve circumstances for themselves.

Additional Information relevant for Early Years
- Health and safety consideration, for example additional staff to ensure safety of child during initial stages of cochlear implant and the greater use of free flow activities in Early Years, leading to the pupil being more mobile in the environment.
- Health and Safety considerations should also apply to pupils with unilateral hearing impairment due to lack of directional sound recognition.
- TOD to make visits to home and pre-school setting to support understanding of hearing loss, deaf awareness and use of personal amplification.
- Pupils should be invited to attend pre-school communication group for hearing impaired children.
- The deaf child should be taught aspects of social interaction, such as modelling appropriate behaviours, praising interaction and playing games that require turn taking and cooperation.
- Further advise can be found on the NDCS website (click: ‘Supporting the achievement of deaf children in the Early Years’)

Additional Information relevant for KS3/4 pupils:
- There is valuable information available in the following link (click: Supporting the achievement of deaf children in secondary school).
- Staff awareness needs to be developed across the curriculum of the impact of the different levels of noise in classrooms and corridors. This may impact the pupil’s ability to hear what is being said and respond effectively.
- At KS 3/4, subject staff should be aware of and minimise any inclusion issues related to
their subject specialism

- At KS3 onwards, a note taker or appropriate technology may be appropriate. This is likely to be more useful at KS4/5 but practise in this skill should be provided at KS3/4
- Considerations regarding examination concessions for pupils with HI should be appropriately managed
- Transition should aim to ease the move from primary to secondary school. In particular challenges of phase transition may be heightened due to:
  - frequent changes of classroom with varying quality in acoustics
  - frequent changes of teaching staff, with varying teaching styles, expectations and ease of communication/lip-reading
  - varying deaf awareness levels among staff and pupils
  - more demanding subject content
  - new vocabulary, particularly specialist subject vocabulary
  - making new friendships
  - differing expectations of behaviour and independence.

- There is additional useful information available for supporting transition in the following document. (useful checklist for transition click here NDCS secondary resource)
- Individual considerations should be given to secondary subjects to determine if there are subject specific needs such as acoustic needs in practical lesson. This should be used to support inclusion. There is useful information available in the following link (from NDCS secondary resource)
- School staff should check exam access arrangement using advice from the appropriate web sites to ensure pupils are not disadvantaged by their hearing impairment during exams. For more information on access arrangements for assessment and examinations see:
  - BATOD: [www.batod.org.uk](http://www.batod.org.uk)
  - Joint Council for Qualifications: [www.jcq.org.uk](http://www.jcq.org.uk)
- The Equality Act 2010 requires awarding bodies and schools to make arrangements to ensure disabled pupils are not unfairly disadvantaged because of their disability when accessing public examinations.
- Pupil views on the impact of Hearing Impairment should always be sought. It may be they have strong views about how their deafness is referred to.

There is advice on support for schools for Children and Young people with hearing impairment on the local offer.
[http://www.essexlocaloffer.org.uk/content/advice-education-settings-hi](http://www.essexlocaloffer.org.uk/content/advice-education-settings-hi)

There are additional support materials on the Local Offer
Sensory: Hearing Impairment

Additional School Intervention – ASI
(building on HQ T)

Pupil Characteristics

- NatSIP criteria - Moderate to severe hearing loss
- Moderate, bilateral hearing loss (sensori-neural, conductive or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder
- They may have a moderate sensori-neural hearing loss with a late diagnosis. A late diagnosis may exacerbate or prolong difficulties.
- They are will have 1 or 2 hearing aids or cochlear implants fitted, but still communicate mainly orally with some signed support.
- The pupil can access some auditory information with personal hearing aids, FM radio aid system, and LSA support in ideal conditions.
- May have difficulties listening in adverse acoustic environments even when personal amplification is used

Provision for Additional School Intervention

Staff Knowledge and Understanding

- Staff should be trained or experienced in working with children with a hearing impairment.
- School will facilitate regular monitoring and support visits from a TOD. The TOD may provide additional resources for the pupil in relation to communication, language and literacy development, as appropriate.
- TOD may provide resources to support the pupil and provide advice to class teacher and LSA in relation to communication, language and literacy development
- The pupil will be very likely to benefit from the provision of a radio aid
- Speech and Language Therapy (SaLT) may be provided by a health provider
- The NatSIP guidance ‘Effective working with Teaching Assistants in School’ offers advice for support staff working with pupils with a hearing impairment on: raising the achievement of deaf pupils, narrowing any attainment gap with other children; enabling the inclusion of deaf pupils in school activities; encouraging independent learning.

Assessment Planning and Review

- Assessment of language and listening development should be carried out. If standardised testing is used it should be carried out using assessments valid for use with hearing impaired pupils.
- It would be beneficial to develop support through a One Plan including advice from relevant professionals such as TOD, Speech and Language Therapists, Educational Psychologist, Health etc

Expected interventions to support learning

Teaching Environment and Grouping

- The pupil should remain part of the mainstream class

Support (Resources, Parent, Pupil, Training)

- Advice and training will be given by the TOD but there needs to be a named member of staff who can undertake this responsibility, with additional staff trained in the case of the named person being absent.
Staff to be trained in the use and assessment of equipment and children to be involved in developing skills in independent management of audiological equipment and associated technology

Advice on access arrangements may be required for internal and external exams.

Curriculum and Teaching Methods

- Programmes to develop spoken and written language communication skills may need to be followed through and incorporated throughout all aspects of the school day.
- Pre-teaching of core vocabulary and post tutoring may be appropriate to promote understanding of the lesson and support understanding of vocabulary and concepts.

Expected interventions to support emotional wellbeing for learning

- There should be support to engage with the wider Deaf community including Deaf role models and involvement with clubs supporting pupils with Hearing Impairment.
- In addition school should ensure that there is access to non-educational provision and that hearing impairment is not a barrier to inclusion in provision such as after school clubs, sports clubs etc.
- There should be promotion of a whole school approach to signing. If a pupil uses British Sign Language, tuition will be important for peers and staff.
- Provision for the development of social skills is essential.

Additional Support for Early Years

- TOD to make visits to ‘model’ appropriate interaction and assess development in key areas (including the use of ‘developmental profiles’)
- TOD to make referral to Hearing Impairment Family Support Key Worker (HIFSKW) where additional support is required for identified intervention.

There is advice on support for schools for Children and Young people with hearing impairment on the local offer.

http://www.essexlocaloffer.org.uk/content/advice-education-settings-hi
Sensory: Hearing Impairment
High Needs
(building on HQT and ASI)

Pupil Characteristics

- NatSIP Criteria – Severe hearing loss to Profound hearing loss
- Severe/profound, bilateral hearing loss (sensori-neural or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder
- The pupil will be using hearing aids and/or cochlear implant/s
- They will likely have difficulties listening in adverse acoustic environments even when personal amplification is used which could be significant.
- Hearing loss will affect the pupil’s development of receptive and expressive English language and literacy, their understanding of the world and their access to the curriculum
- The pupil may have limited vocabulary because they do not hear words being used in conversations around them. They may not always hear all of the words spoken in a sentence or all the individual sounds in any one word. They may have difficulty when one word has several different meanings. This will be reflected in their spoken and written English and they may require some speech therapy
- They may communicate orally but their spoken language may differ in tonal quality and some articulations may be difficult to understand.
- There will be some pupils who use British Sign language (BSL) as their first language and others who will be using sign language as a support towards developing English.

Provision for High Needs

Staff Knowledge and Understanding

- CPD will include a more detailed understanding of the impact of a hearing impairment on the individual pupil and may include management and care of hearing aids and other associated technology

Expected interventions to support learning

Teaching Environment and Grouping

- Room assessments of acoustic conditions and audiological solutions need to be carried out and monitored.
- Withdrawal sessions for individual or small group work should be provided and may be necessary to:
  - Develop speech
  - Develop communication skills
  - Develop appropriate communication codes
  - Develop listening skills
  - Foster emotional and social awareness
  - Provide pastoral support and encouragement

Support (Resources, Parent, Pupil, Training)

- Advice and training will be given by the TOD. Where the pupil wears a radio aid all staff working with the pupil will need to know how to use the radio hearing aid and other
associated technology the pupil is using.

- The pupil may need modification of written texts to ensure that the vocabulary and language is accessible.
- School will need to provide support for the LSA or TOD for differentiation of the curriculum.
- Intervention should include tutoring from sign language instructor as appropriate.
- The pupil may benefit from support through provision of an Education Health Care Plan (EHCP). There is advice on creating an EHCP in the following document, specific to pupils with hearing impairment (click link NatSIP – Better Plans)

Curriculum and Teaching Methods

- There should be access to a LSA/sign communicator with a proficient level of signing to access the curriculum as appropriate.

There is advice on support for schools for Children and Young people with hearing impairment on the local offer.

http://www.essexlocaloffer.org.uk/content/advice-education-settings-hi

END of High Needs section
Sensory: Hearing Impairment
VISUAL IMPAIRMENT

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Sensory: Visual Impairment
High Quality Teaching (HQT)

Pupil Characteristics
- NatSIP Criteria - Mild Vision loss - 6/6 – 6/18 SnellenKay (LogMAR 0.0 – 0.48)
- All visual impairments must be treated on an individual basis as children use their residual vision differently.
- There may be difficulty with near or distance field vision but the difficulty will not be severe at this level of support and/or may be correctable with prescribed spectacles and consideration to school and classroom environment.
- Colour blindness can have a significant impact on ability to access learning unless it is recognised and planned for.
- Pupils included may have patching for squints, monocular vision or may have fluctuating visual impairment.
- Some pupils may have a restricted field of vision or visual impairment in one eye.

Provision for Quality First Teaching
Provision for pupils with visual impairment increases as severity increases working down from 6/6 to 6/18.

Staff Knowledge and Understanding
All staff are aware of:
- The Specialist (Qualified) Teacher for Visual Impairment (QTVI) may occasionally be involved to monitor and ensure not disadvantaged.
- **Environmental, safety, habilitation and mobility issues.**
- Generally the pupil will be expected to manage with provision as described, without additional adult support.
- Implications of visual loss for the individual pupil
- **There is advice for staff and schools on the local offer**

Assessment, Planning and Review
- The class teacher will monitor the pupil’s progress and their visual access to the curriculum on an on-going basis.

Expected interventions to support learning

Teaching Environment and grouping:
- The pupil may need to be near the focus of the lesson.
- Environment should be free of clutter.
- If grouping by ability care should be that cognitive ability is the criterion used rather than the impaired ability to access materials.
Support (Resources, Parent, Pupil, Training):

- Good contrast between foreground and background may be helpful for text and diagrams, laptop screens etc.
- **Specific teaching of ICT skills should be included as part of their learning**
- Consideration of optimum colour pairings to create contrast for a child who is colour blind will be important.
- They may have to wear prescription glasses to visually access some areas of the curriculum but will be able to manage well in the school environment with low levels of support.
- They may require access to enlarged print. An appropriate font size - Print size at least 14.

Curriculum and Teaching Methods:

- Avoid the pupil having to look directly into a light source as this may cause discomfort.
- Whenever possible print information on the white board and read it out as you write.
- Be aware of the impact of glare and classroom lighting on the quality of the image presented on a White/Smart board
- Students may need additional time to scan materials and assimilate visual information.
- Specific teaching of concepts will be required throughout including generalisation

Expected interventions to support emotional well-being for learning

- Social skills training is usually needed to develop understanding and communication through facial expression, posture and gesture
- In certain circumstances pupils with deteriorating conditions will need support for the self-awareness of their condition and potential deterioration.
- There should be support for developing and maintaining the pupil’s self-esteem as they move through school.
- **Pupils will need additional support for transitions between schools and key stages.**

Additional Considerations for Early Years Pupils:


Additional Consideration for KS3/4:

- Secondary mainstream considerations should include provision for accessibility. This should take into consideration the multiple changes to classroom environment and moving between classes often and regularly.
- There should be awareness and a move towards including assistive technology especially as the pupil approaches the post 16 age group within education.
- There must be recognition for the lifelong impact of the visual impairment on the child and provision for supporting their self esteem
- **Access to examinations for pupils in Essex can be found on the Local Offer**

In addition to the highlighted links, The Local Offer has advice for settings on working with children with mild visual impairment.

There are additional support materials on the Local Offer
Pupil Characteristics

- **NatSIP Criteria - Moderate to Severe vision loss - 6/18 – 6/36 SnellenKay (LogMAR 0.5 – 0.78)**
- The pupil has impaired function in the educational setting and this is generally accepted to be the key criterion. While it is difficult to categorise these pupils they may include those with:
  - A restricted field of vision
  - Fluctuating visual impairment
  - Deteriorating conditions
  - Cerebral visual impairment
  - Retinal atrophy
  - Retinal dystrophy
  - Recently acquired permanent VI or late diagnosis.
  - Pupils will have a bilateral impairment.

Provision for Additional School Support

Staff Knowledge and Understanding

- CPD and support may be requested from the QTVI
- It may include a more detailed understanding of the visual loss and its impact on the pupil as an individual

Assessment, Planning and Review

- Follows expected cycle of review outlined in the introductory information, with additional input from the QTVI if needed
- It would be beneficial to develop support through a One Plan including advice from relevant professionals such as QTVI, Speech and Language Therapists, Educational Psychologist, Health

Expected interventions to support learning

Teaching Environment and Grouping

- The pupil should remain part of the mainstream class for all activities except for exceptional circumstances
- Support during unstructured times should be provided where needed or where activities are specifically related to vision.

Support (Resources, Parent, Pupil, Training):

- Pupils may be unable to learn unless work is adapted and enlarged
- Print material may need to be enlarged.
- The pupil may benefit from using specialist equipment for example
- Dark pens/pencils
- Large print manufactured material (for example reference books). [http://www.essexlocaloffer.org.uk/content/large-print](http://www.essexlocaloffer.org.uk/content/large-print)
- Dark lined paper
• Bright PE equipment
• Table top copies modifications to access class activities and resources
• They will require support from an LSA, table top copy or IT equipment to read from the board.

Curriculum and Teaching Methods:
• All areas of the curriculum should be accessible with appropriate adaptation or modification where necessary
• Some in class support may be necessary from time to time in certain subjects or with certain topics. This should be provided by school.
• LSAs can be used for pre-tutoring through preparing pupils for lessons for example explaining concepts that rely on vision/colour vision for understanding.
• When alerting pupils to an action, artefact, illustration or example, do not just point, describe what you want the pupils to take notice of and, if necessary, describe what it is.
• The pupil will need to learn to type.
• Extra provision for specific skills: maths; handwriting; laying out work.
• Specific teaching of ICT skills should be included as part of their learning.  http://www.essexlocaloffer.org.uk/content/specialist-ict-and-resources-vi

The Local Offer has advice for settings on working with children with moderate visual impairment.  http://www.essexlocaloffer.org.uk/content/visual-impairment
Sensory: Visual Impairment
High Needs
(building on HQT and ASI)

Pupil Characteristics
- NatSIP Criteria – Severe and Profound loss – 6.36 SnellenKay or less (LogMAR 0.8 – 1.00 and less)
- Pupils will have a bilateral impairment.
- Pupils will have significantly impaired functional vision in the educational setting affecting the presentation of the curriculum, the school or classroom environment, and the classroom management of the pupils for example positioning in class, use of equipment etc.
- This may be compounded by other problems such as visual field loss, ocular motor impairment, visual perception difficulties or the presence of degenerative visual conditions.
- The pupils may have little functional sight or is educationally blind and needs will be permanent and lifelong due to the nature of their disability.
- It can include MDVI (multi disability and visual impairment), deteriorating conditions and cerebral visual impairment. Some of the provision for a complex needs child may cross the different categories of need. For instance it may be necessary to explore the PNI category of need in some circumstances.
- They will require some printed materials to be modified to ensure access to learning.
- They are likely to require provision of some specialist equipment and can be giant print/Braille users or require other tactile teaching methods.

Provision for High Needs

Staff Knowledge and Understanding
- CPD should be provided by the QTVI and may include an introduction to specialist equipment and software programmes

For the Whole School:
- Non-sighted awareness
- Environmental, safety and mobility issues
- How to communicate and respond to the visually impaired student

For the Teacher:
- Implications of the visual loss of the individual pupil
- Classroom management strategies
- Tip sheets
- There should be access to learning Braille. There is information and advice on support on the Local off for teaching and learning Braille.
  - [http://www.essexlocaloffer.org.uk/content/braille](http://www.essexlocaloffer.org.uk/content/braille)

Assessment, Planning and Review
- An individualised plan will be written which will involve the QTVI as appropriate.
- Monitoring and support visits from the QTVI will include liaison time with the class teacher and SENCO. They may provide training for the pupil as appropriate and give guidance to school staff so that they are able to follow this through with the pupil.
• The class teacher will monitor the pupil’s progress and their visual access to the curriculum on an on-going basis.

Expected interventions to support learning

Teaching Environment and Grouping:
• Withdrawal for individual group work may be necessary to:
• Complete tasks made slower by visual impairment
• Reinforce mainstream work and prepare the pupil for class activity/learning experiences
• Provide additional hands-on experience of materials and presentations
• Provide additional experiences of the environment to support gaps in learning
• Learn particular skills to improve curriculum access: for example touch typing or use of magnifiers
• Develop peer interaction/social skills
• Provide direct support and training in mobility around the school and for independent living. [http://www.essexlocaloffer.org.uk/content/habilitation-and-mobility]

Support (Resources, Parent, Pupil, Training)
• The pupil may benefit from using specialist equipment for example:
  o Large print materials. [http://www.essexlocaloffer.org.uk/content/large-print]
  o Accessibility software for ICT
  o Larger computer monitor or laptop
  o CCTV
  o Separate TV monitor
  o Dark pens/pencils
  o Dark-lined books/paper
  o Bright PE equipment
  o Specialist considerations for examinations and end of Key Stage tests
  o The pupil will need access to ICT or read and record in either print or Braille format. [http://www.essexlocaloffer.org.uk/content/specialist-ict-and-resources-vi]
• LSA support will be necessary to ensure access and safety in most lessons
• Some adaptations of the school environment may be necessary for example vertical blinds, highlighting of hazards etc.
• Some curriculum and printed materials or other learning equipment and materials may need to be modified.
• Pupils will need support for developing tactile skills. [http://www.essexlocaloffer.org.uk/content/developing-tactile-skills]

Curriculum and Teaching Methods:
• Additional in class support may be necessary in certain subjects or with certain topics
• Auditory or tactile approaches to learning and teaching may supplement the visual stimuli used
• Access to equipment and materials in line with recommendations of QTVI

Expected interventions to support emotional well-being for learning
• Social skills training is essential for:
  o Taking part in conversations
  o Interpreting the actions of others from auditory and tactile cues
  o Learning to use appropriate non-verbal language
The Local Offer has advice for settings on working with children with severe and profound visual impairment
http://www.essexlocaloffer.org.uk/content/visual-impairment

END of High Needs section
Sensory: Visual Impairment
MULTI-SENSORY IMPAIRMENT

Please read this section in sequence as each level of need builds on the one before. It assumes that provision in the previous level is in place and does not repeat this in the later sections.

Sensory: Multi-Sensory Impairment
High Quality Teaching (HQT)

Pupil Characteristics

- NATSIP Criteria for MSI - Mild to moderate multi-sensory loss.
- A combination of mild to moderate visual impairment (such as visual acuity of between 6/12 – 6/18 SnellenKay (LogMAR 0.3 – 0.48)) with mild to moderate or unilateral hearing loss.
- Both areas of need (HI and VI) can be mild which will lead to mild to moderate MSI. The combination of difficulties is more significant in impact than single modalities.
- Pupils included may have patching for squints and monocular vision and will include pupils with fluctuating visual impairment.
- Some pupils may have a restricted field of vision or visual impairment in one eye. They may have mild Nystagmus.
- All visual impairments are different and there may be difficulties with near or distance or field of vision but the difficulty will not be severe at this level of support and/or will be correctable with prescribed glasses and consideration to school and classroom environment.
- Colour blindness can have a significant impact on ability to access learning unless it is recognised and planned for.
- They may experience fluctuating hearing loss (Glue Ear) and may have a unilateral or mild permanent loss.
- Loss of hearing and visual difficulties will affect how the pupils understand the world and how they access the curriculum.
- They are likely at this stage to communicate orally.
- They may have a mild to moderate hearing loss where class differentiation is sufficient to meet their needs.
- This will include some pupils with an element of hearing loss with no hearing aids fitted. It can include unilateral, mild and moderate, sensori-neural hearing loss, conductive hearing loss which requires the use of a hearing aid or bone anchored hearing aids and temporary or fluctuating hearing loss.
- Pupils may think they have fully understood but may not recognise when they have missed information and may mishear or misunderstand what is said or written, but can say they have understood to avoid feeling embarrassed. They may not have heard enough to always make sense of everything that is said.
- It is important to recognise that having difficulties in both modalities is not just additive.
- It is also important to recognise the added difficulty when there are visual difficulties on one side and hearing difficulties on the other, which can lead to a greater difficulty than might be thought initially when only one eye/ear is affected.
Provision

Staff Knowledge and Understanding

All staff are aware that:

- provision does not disadvantage the pupil;
- a short package of support and monitoring may be offered. The Specialist Teacher for Multi sensory Impairment (QTMSI) can be involved to monitor the support and equity of access;
- “Access For All” training may be attended but provision for training should be made through online training in VI and HI (via the Berkshire Consortium);
- CPD may involve understanding the impact of visual and hearing impairment on the individual and can include strategies for management and care of hearing aids and other technology;
- consideration needs to be given to some exam arrangements. Pupils may need access to a live voice with visual access to lip reading cues when information is required to be listened to.

Training and consideration should be given to:

- deafblind awareness;
- communication strategies;
- environmental factors for example lighting, seating;
- safety and mobility issues;
- the expectation that the pupil will be able to manage with provision as described, without additional adult support;
- implications of the combination of visual loss with a hearing loss for the individual pupil;
- classroom management strategies;
- tip sheets.

Assessment, Planning and Review

- The class teacher will monitor the pupil’s progress and their visual and hearing access to the curriculum on an on-going basis.
- The whole school SEN policy reflects the needs of hearing impaired and visually impaired students and has information on pupils with impairment in both categories.
- Any concerns may prompt an additional request for support from the Specialist Teacher for Multisensory Impairment (QTMSI).
- The school will facilitate occasional monitoring and extra support visits (beyond visits provided from the package of support) from the QTMSI if required.
- Standardised assessments must reflect the needs of the pupil. It is important to use assessments standardised and applicable for working with pupils with both hearing and visual impairment.

Expected interventions to support learning

Teaching Environment and grouping

- The pupil should remain part of the mainstream class for all activities.
- The pupil may need to be near the focus of the lesson.
- The environment should be free of clutter.
- If grouping by ability, care should be that cognitive ability is the criterion used rather than the impaired ability to access materials.
- Positioning is important to ensure equality of access.
• The class teacher should manage the classroom environment to produce the best possible listening conditions based on advice from the QTD. This should include:
  o class positioning to have a line of sight to the speaker;
  o consideration of seating and grouping so that the child can be near the focus of the lesson and can see whoever is speaking;
  o an environment as free from noise as possible, closed windows and doors and if necessary the creation of a ‘quiet’ area;
  o consideration for social interactions and sensitivity to potential difficulties arising from missing verbal interactions;
  o grouping to reflect the pupil’s learning ability;
  o use of written/visual cues and context to assist understanding;
  o time built in for the pupil to assimilate new ideas and avoid overload by delivering too many oral instructions.

Support (Resources, Parent, Pupil, Training)
• Good contrast between foreground and background may be helpful for text and diagrams, laptop screens and should include consideration for use of interactive whiteboards etc.
• Specific teaching of ICT skills should be included as part of their learning.
• Consideration should be given to optimum colour pairings in visual presentations and text to create contrast for a child who is colour blind.
• Pupils may have to wear prescription glasses to visually access some areas of the curriculum but will be able to manage well in the school environment with low levels of support.
• They may require access to enlarged print at KS2 onwards. An appropriate font size – approximately print size 14. See RNIB Clear Print Guidelines.
• Real life examples should be provided (objects, artefacts and visual stimuli) to support learning wherever possible.
• The pupil may have a radio or other hearing aid.
• Where appropriate speech therapy may be offered.
• Differentiation of tasks and activities to ensure accessible language should take place.

Curriculum and Teaching Methods
• Staff need to gain attention of the pupil before speaking and speak clearly, naturally and at a normal rate. They should not cover their hands or walk around the room whilst talking and should use short sentences rather than long complex ones.
• Staff should sensitively reflect what other pupils are saying and encourage other pupils to speak one at a time and face the hearing impaired pupils.
• Staff should be aware of their position in class and avoid having a light source for example a window or interactive whiteboard behind them as this creates a shadow and makes it difficult for the pupil to lip read or see facial expressions.
• Pupils should be given time to think and process what is being said before they make a response and a range of responses not just written, should be used.
• Pupils should be allowed time to read or look at pictures or visual aids before they are required to give a verbal response.
• New vocabulary should be explained and pictures and concrete objects which give the words meaning should be provided to support verbal information.
• The pupil’s name should be used before asking a question or giving an instruction and they should be provided with a visual indication as to the location or to the person speaking.
• Extra time should be allowed to complete the task and staff should be aware of the fatigue the pupil may experience because of the amount of effort they have put into listening and lip reading.
• TV/DVDs should always be used with subtitles.
• Assessments and examinations which have elements which require pupils to listen should be given on a 1:1 basis, with a live voice to allow pupils to access lip reading cues.
• Core vocabulary will need to be reinforced. Instructions may need to be repeated or modified to match learning needs.
• Programmes to develop spoken and written language and communication skills may need to be followed through and incorporated naturally into all aspects of the school day.
• Staff should take time to check understanding. Context will give a hearing impaired pupil more opportunity to understand concepts.
• Some in-class support may be necessary from time to time to check for understanding and clarify concepts in certain topics. This should be provided by the school.
• Hearing Impairment and Visual Impairment are not a cognitive difficulty and care must be taken to ensure that curriculum expectations are appropriate and that the pupil has the every opportunity to learn at an appropriate level for their ability. However, hearing impairment is a major impairment to the development of language and thus can cause significant difficulties in language, emotional or learning skills. The degree of impact will be pupil dependent.
• There is comprehensive advice to effective strategies available on the Essex Local Offer.
• Look at the QFT for Visual Impairment for further sources of information.

Expected interventions to support emotional well-being for learning
• Social skills training is usually needed to develop understanding and communication through facial expression, posture and gesture.
• Needs awareness training for peer group including hearing impairment delivered by QTMSI should be embedded in school ethos and part of PHSE.
• Pupils should have access to positive deafblind role models.
• Staff should be aware that there is a possibility of a need for additional emotional support due to potential to be vulnerable due to the impact of impairments on social interactions with peers and the wider environment;
• Awareness should be raised as to the availability of support for emotional difficulties.
• Provision for involvement at after school clubs to allow and provide inclusion in all aspects of school life, particularly important where pupils travel to school by taxi.

Additional Considerations for KS3/4
• There should be awareness and a move towards including assistive technology especially as the pupil approaches the post 16 age group within education.
• Consideration must be taken into account that pupils at KS3/4 will be moving round more often in the environment and experience different classrooms with different noise levels, seating arrangements and staff.
• There will be more acoustically noisy classes for example science/drama.
• Staff awareness needs to be developed across the curriculum.
• There is valuable information available in the following link - Supporting the achievement of deaf children in secondary school
• Staff awareness needs to be developed across the curriculum of the impact of the different levels of noise in classrooms and corridors. This may impact the pupil's ability to hear what is being said and respond effectively.
• At KS 3/4, subject staff should be aware of and minimise any inclusion issues related to their subject specialism.
• At KS 4/5, a note taker or appropriate technology may be appropriate.
• Transition should aim to ease the move from primary to secondary school. Challenges on moving to secondary school will present themselves in the form of:
- frequent changes of classroom with varying quality in acoustics;
- frequent changes of teaching staff, with varying teaching styles, expectations and ease of communication/lip-reading;
- varying deaf awareness levels among staff and pupils;
- more demanding subject content;
- new vocabulary, particularly specialist subject vocabulary;
- making new friendships;
- differing expectations of behaviour and independence.

- There is additional useful information available for supporting transition in the following document. NDCS secondary resource
- Individual considerations should be given to secondary subjects to determine if there are subject specific needs. There is useful information available in the following link NDCS secondary resource
- School staff should check exam access arrangements using advice from the appropriate web sites to ensure pupils are not disadvantaged by their hearing impairment during exams. For more information on access arrangements for assessment and examinations see:
  - BATOD: [www.batod.org.uk](http://www.batod.org.uk)
  - Joint Council for Qualifications: [www.jcq.org.uk](http://www.jcq.org.uk)
  - The Scottish Qualifications Authority (SQA): [www.sqa.org.uk](http://www.sqa.org.uk)

- The Equality Act 2010 requires awarding bodies and schools to make arrangements to ensure disabled pupils are not unfairly disadvantaged because of their disability when accessing public examinations.

There is advice and information about support for Children and Young People with MSI on the Essex Local Offer. [http://www.essexlocaloffer.org.uk/content/multi-sensory-impairment](http://www.essexlocaloffer.org.uk/content/multi-sensory-impairment)
Pupil Characteristics
- NATSIP criteria - Mild to moderate multi-sensory loss.
- They will have a mild or moderate loss in one or both modalities to mild in one modality and severe in the other.
- Moderate Vision loss - 6/18 – 6/36 SnellenKay (LogMAR 0.5 – 0.78) with a hearing loss that may be mild to moderate.
- They may have a moderate sensori- neural hearing loss with a late diagnosis. A late diagnosis may exacerbate or prolong difficulties.
- The pupil can access most auditory information with personal hearing aids, FM radio aid system, and LSA support for key curriculum areas.
- They are likely to have 1 or 2 hearing aids or cochlear implants fitted but still communicate mainly orally with some signed support.
- The visual impairment aspect may include those with:
  - a restricted field of vision;
  - poor distance vision;
  - fluctuating visual impairment;
  - deteriorating conditions;
  - cerebral visual impairment;
  - recently acquired permanent VI or late diagnosis.

Provision
Staff Knowledge and Understanding
- Staff should be trained or experienced in working with children with a hearing or visual impairment or be provided with training to develop skills.
- Attendance at ‘Include Me In’ training is essential for members of staff working with a child with MSI. This could be through attendance at the HI and VI sections of ‘Include Me In’. Staff will require teaching and awareness raising about dual impairment and the significant impact this has on access to learning and communication.
- NATSIP guidance should be made available for school for working with LSAs. There is good advice on supporting pupils with VI in the following document (click here for link to Guidance)
- The school will facilitate regular monitoring and support visits from a QTMSI. The QTMSI may provide individual support for the pupil in relation to communication, language and literacy development, as appropriate. Guidance will be given to school staff so that they are able to continue this naturally throughout the school day.
- Any additional concerns not covered in the support package may be supported through additional requested visits from the QTMSI. This may include CPD which should include a more detailed understanding of the impact of dual modality impairment.

Assessment, Planning and Review
- Assessments and examination which have elements which require pupils to listen should be given on a 1:1 basis with a live voice and allow pupils access to lip reading clues or enlarged print where necessary.
- It would be beneficial to develop support through a One Plan including advice from relevant professionals such as QTMSI, Speech and Language Therapists, Educational Psychologist, Health etc.
Expected interventions to support learning

Teaching Environment and Grouping
- The pupil should remain part of the mainstream class for all subjects.
- The teacher should manage the classroom environment to produce the best possible listening conditions as noted for quality first teaching.
- Most auditory information can be accessed with personal hearing aids, FM radio aid system and a small amount of LSA support (from school SEN budget).
- Support during unstructured times should be provided where needed or where activities are specifically related to vision.

Support (Resources, Parent, Pupil, Training)
- The pupil may have one or two hearing aids, bone anchored hearing aids (BAHAs) or cochlear implants. These are issued by the hospital but will need regular checks for:
  - cleanliness and damage to moulds;
  - battery function;
  - cleanliness and damage to tubing;
  - distortion of sound quality.
- Advice and training will be given by the QTMSI or QTD but there needs to be a named member of staff who can undertake this responsibility with secondary staff trained in the case of the named person being absent.
- Staff should be trained in the use and assessment of equipment and children should be involved in developing skills in independent management of audiological equipment and associated technology.
- Where appropriate speech therapy will be offered.
- There is clear differentiation of tasks to ensure accessible language is used.
- Deaf awareness training will be provided by the QTMSI or QTD.
- Differentiation of tasks takes place to ensure accessible language.
- Visual presentations take place if appropriate and there is use of concrete examples and artefacts.
- Advice on access arrangements may be required for internal and external exams.
- Pupils may be unable to learn unless work is adapted and enlarged.
- Print material may need to be enlarged.
- The pupil may benefit from using specialist equipment for example:
  - dark pens/pencils
  - large print manufactured material (for example reference books)
  - magnification technology may be used
  - dark lined paper
  - bright PE equipment
- Tabletop copies modifications to access class activities and resources

Curriculum and Teaching Methods
- Programmes to develop spoken and written language communication skills may need to be followed through and incorporated naturally into all aspects of the school day.
- Core vocabulary will need to be taught and the curriculum differentiated to meet the pupil’s needs.
- Pre-teaching of vocabulary and post tutoring with staff experienced in working with children with a hearing impairment is important to ensure understanding of concepts.
- All areas of the curriculum should be accessible with appropriate adaptation or modification where necessary.
- Some in-class support may be necessary from time to time in certain subjects or with
certain topics. This should be provided by school.

- When alerting pupils to an action, artefact, illustration or example adults should describe what to take notice of and if necessary describe what it is.
- The pupil will need to learn to type.
- Extra provision will be needed for specific skills, maths, handwriting, laying out work.
- Specific teaching of ICT skills should be included as part of their learning.

**Expected interventions to support emotional well-being for learning**

- Social skills training is essential for;
  - taking part in conversations;
  - interpreting the actions of others from auditory and tactile cues;
  - learning to use appropriate social and non-verbal language.
- Pupils should have access to positive role models with a hearing and visual impairment and there should be support to engage with the wider Deaf and Blind community.
- In addition school should ensure that there is access to non-educational provision and that impairment is not a barrier to inclusion in provision such as after school clubs, sports clubs etc.
- There should be promotion of a whole school approach to signing. If a pupil uses British Sign Language, tuition will be important for peers and staff.

**Additional Information for KS3/4 pupils**

There should be awareness of and a move towards including assistive technology especially as the pupil approaches the post 16 age group within education.

There is advice and information about support for Children and Young People with MSI on the Essex Local Offer. [http://www.essexlocaloffer.org.uk/content/multi-sensory-impairment](http://www.essexlocaloffer.org.uk/content/multi-sensory-impairment)
Pupil Characteristics

- NATSIP Criteria – Severe to Profound multi-sensory impairment.
- They will have a dual impairment with severe or profound loss in both or the most affected modality (e.g. profound HI and moderate VI).
- Pupils will have significantly impaired functional vision in the educational setting affecting the presentation of the curriculum, the school or classroom environment, and the classroom management of the pupils for example positioning in class, use of equipment etc.
- They may require some printed materials to be modified and are likely to need specialist equipment.
- Some pupils may be tactile learners.
- This may be compounded by other problems such as visual field loss, ocular motor impairment, visual perception difficulties or the presence of degenerative visual conditions.
- The pupils may have little functional sight or educationally blind and needs will be permanent and lifelong due to the nature of their disability. They can include those with a MDVI (multi disability and visual impairment), deteriorating conditions and cerebral visual impairment.
- It is important to recognise there will be children in this category with cerebral visual impairment in one modality.
- They will require some printed materials to be modified to ensure access to learning.
- They are likely to require provision of some specialist equipment and can be giant print/Braille users or require other tactile teaching methods.
- They may have:
  - a severe to profound hearing loss, with hearing aids prescribed, or a cochlear implant;
  - a profound loss in one ear, moderate to severe sensori-neural loss in the other;
  - moderate sensori-neuro hearing loss linked to late diagnosis with educational implications;
  - severe/profound, bilateral hearing loss (sensori-neural or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder.
- They are likely to communicate orally but their spoken language may differ in tonal quality and some articulations may be difficult to understand.
- There will be some pupils who use British Sign language (BSL) as their first language and may rely on sign support/ British Sign Language. Others may require tactile communication methods.
- The pupil may have limited vocabulary because they do not hear words being used in conversations around them. They may not always hear all of the words spoken in a sentence or all the individual sounds in any one word.
- They may have difficulty when one word has several different meanings. This will be reflected in their spoken and written English and they may require some speech therapy.
- They may have limited access to auditory information.
- They will be likely to have difficulties listening in adverse acoustic environments even when personal amplification is used, which could be significant.
- Hearing loss will affect the pupil’s development of receptive and expressive English language and literacy, their understanding of the world and their access to the curriculum.
Many of the most severe children may access a unit for children with a Hearing Impairment which should have a sound field system and the use of radio aids accessible. There should be access to the MSI curriculum. Children may require access to a qualified intervener depending on the severity of their needs.

Provision

Staff Knowledge and Understanding
- CPD should be provided by the QTMSI and may include:
  - an introduction to specialist equipment and software programmes;
  - deafblind awareness;
  - environmental, safety and mobility issues;
  - how to communicate and respond to the visually impaired student;
  - classroom management strategies;
  - tip sheets.
- CPD will include a more detailed understanding of the impact of a dual loss on the individual pupil’s learning and communication and may include management and care of hearing aids and other associated technology.
- Most training and input will be from the QTMSI but there may be visits from the ToD and QTVI for additional support.
- There should be training given in support packages such as ‘Talking Listening Hands’, tactile signing, tactile symbols
- Ongoing training should be provided to staff to ensure they understand the limits to peer interactions and what will be needed to mediate these interactions well.

Assessment, Planning and Review
- Monitoring and support visits from the QMSI will include liaison time with the class teacher and SENCo. They may provide training for the pupil as appropriate and give guidance to school staff so that they are able to follow this through with the pupil. This will include input into One Planning.

Expected interventions to support learning

Teaching Environment and Grouping
- Withdrawal for individual group work may be necessary to:
  - complete tasks made slower by visual impairment;
  - reinforce mainstream work and prepare the pupil for class activity/learning experiences;
  - provide additional hands on experience of materials and presentations;
  - provide additional experiences of the environment to support gaps in learning;
  - learn particular skills to improve curriculum access for example touch typing or use of magnifiers to increase social interaction with peers.
- Pupils will require direct support and training in mobility around the school and independent living.
- Room assessments of acoustic conditions and audiological solutions need to be carried out and monitored by a QTMSI.
- Withdrawal sessions for individual or small group work should be provided and may be necessary to:
  o develop speech;
  o develop communication skills;
- develop appropriate communication codes;
- develop listening skills;
- foster emotional and social awareness;
- provide pastoral support and encouragement.

- Rooms should have acoustically favourable listening conditions.

Support (Resources, Parent, Pupil, Training)
- Additional adapted specialist resources including technology will be required with appropriate access to interactive whiteboard.
- Special considerations put in place for examinations and end of Key Stage tests.
- The pupil will need access to ICT or read and record in either print or Braille format.
- LSA support will be necessary to ensure access and safety in most lessons.
- Some adaptations of the school environment may be necessary for example vertical blinds, highlighting of hazards etc.
- Some curriculum and printed materials or other learning equipment and materials may need to be modified.
- The pupil may need modification of written texts to ensure that the vocabulary and language is accessible.
- School will need to provide support for the LSA or QTMSI for differentiation of the curriculum.
- Intervention should include tutoring from talking hands instructor/ tactile signing and symbols instructor as appropriate.
- There will need to be involvement from the Mobility Officer for orientation and habilitation needs.
- In addition it is important to recognise the need for additional social skills training to fill in gaps there may be due to the child/young person not picking up social cues.

Curriculum and Teaching Methods
- Additional in-class support may be necessary in certain subjects or with certain topics.
- Auditory or tactile approaches to learning and teaching may supplement the visual stimuli used.
- Access is available to equipment and materials in line with recommendations of QTMSI, including the MSI curriculum.
- Staff should use short sentences rather than long complex ones to support listening.
- Some in-Class support may be necessary from time to time to check for understanding and clarify concepts in certain topics. This should be provided by the school.
- There should be access to a LSA/ sign/ tactile communicator at a proficient level to help the pupil access the curriculum as appropriate.
- Assessment needs to take into account deafblind guidance.
- They will need access to sign instruction.

There is advice and information about support for Children and Young People with MSI on the Essex Local Offer. http://www.essexlocaloffer.org.uk/content/multi-sensory-impairment

There are support materials available on the Local Offer.
## General Glossary and Acronyms

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td><strong>Abstract concepts</strong></td>
<td>An idea that cannot be directly experienced through any of the five senses (sight, touch, smell, taste, hearing).</td>
</tr>
<tr>
<td><strong>Additional School Intervention</strong></td>
<td>An assessment and intervention process which is usually co-ordinated by the SENCO working alongside other school staff. Interventions at this stage will be additional to those provided through usual classroom support. May include the involvement of agencies from outside school. Previously called “School Action” and/or “School Action Plus”.</td>
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<tr>
<td><strong>Articulation</strong></td>
<td>Formation of clear and distinctive sounds in speech.</td>
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<tr>
<td><strong>Assistive and Augmentative Communication</strong></td>
<td>Aided or unaided communication modes used as a supplement or alternative to oral language, including gestures, sign language, picture symbols, the alphabet, and devices with synthetic speech. <strong>Aided communication</strong> requires equipment in addition to the communicator’s body. <strong>Unaided communication</strong> refers to modes that only require the communicator’s body. Vocalisations, gestures, facial expression, manual sign language, and head nods are examples.</td>
</tr>
<tr>
<td><strong>Auditory memory</strong></td>
<td>The ability to take in information that is heard or presented orally (out loud), process it, retain it in one's mind, and then recall it.</td>
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<tr>
<td><strong>B Squared</strong></td>
<td>A detailed system used in school for assessment of learning, performance monitoring and effective target setting.</td>
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<tr>
<td><strong>Braille</strong></td>
<td>Braille is a system of raised dots that can be read with the fingers by people who are blind or who have low vision.</td>
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<tr>
<td><strong>Categorisation</strong></td>
<td>Categorization is the process by which ideas and objects are recognized, differentiated, and understood. Categorization implies that objects are grouped into categories, usually for some specific purpose. Ideally, a category illuminates a relationship between the items. Categorization is fundamental in language, prediction, inference, decision making and in all kinds of environmental interaction.</td>
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<tr>
<td><strong>Classification</strong></td>
<td>An alternative word for categorisation.</td>
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<tr>
<td><strong>Closed question</strong></td>
<td>A question where there is a clear, predefined response – often yes/no – such that the pupil does not need to expand their response from their own knowledge.</td>
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<tr>
<td><strong>Concrete support</strong></td>
<td>Having access to real items (visual and tactile) to support memory retention and developing understanding of learning.</td>
</tr>
<tr>
<td><strong>Cued articulation</strong></td>
<td>A system of hand signs for all of the 49 sounds, or phonemes, which make up the English phonological system. Each hand sign is related to where and how in the mouth the sounds are made.</td>
</tr>
<tr>
<td><strong>Cumulative Learning</strong></td>
<td>A teaching and learning principle drawn from psychological research. Previously-taught skills are learnt to automaticity, then a small amount of new material is introduced, and all the material is practised together to automaticity. This continues, and the amount of material learnt ‘accumulates’ or increases more effectively.</td>
</tr>
<tr>
<td><strong>Curriculum specific words</strong></td>
<td>These words would be those that are not typically encountered in everyday life but are necessary for understanding of either general or specific areas of the school curriculum. <strong>General academic vocabulary</strong> consists of words that appear reasonably frequently within and across academic domains, such as analyze and process.</td>
</tr>
<tr>
<td><strong>Domain-specific academic vocabulary</strong></td>
<td>consists of relatively low-frequency, content-specific words that appear in textbooks and other instructional materials; for example, <em>apex</em> in math, <em>escarpment</em> in geography, and <em>isobar</em> in science.</td>
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<tr>
<td><strong>Delayed Speech &amp; Language Development</strong></td>
<td>This suggests that speech and language development is progressing along the usual trajectory but at a slower pace than is typical for a child of that age.</td>
</tr>
<tr>
<td><strong>Differentiation</strong></td>
<td>Teaching that personalises learning activities appropriately to the pupils’ skill levels, experiences, knowledge, understanding and attitudes.</td>
</tr>
<tr>
<td><strong>Direct Instruction</strong></td>
<td>Specific, focused teaching of small-step skills to enable accurate learning, and then the generalisation and application of these skills to other situations/contexts. Sometimes the ‘model-lead-test’ approach is used, which can be described to pupils as ‘my turn-together-your turn’.</td>
</tr>
<tr>
<td><strong>Disordered Speech &amp; Language Development</strong></td>
<td>This suggests that a child’s speech and/or language is not developing along the expected trajectory.</td>
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<tr>
<td><strong>Distributed Practice</strong></td>
<td>A teaching and learning principle drawn from psychological research. ‘Little and often’ practice rather than longer practice sessions (Massed Practice), which leads to more effective long term retention in memory. E.g. 5 minutes practice each day is more effective than 30 minutes practice once per week.</td>
</tr>
<tr>
<td><strong>Echolalia</strong></td>
<td>Repetition of someone’s speech. This can be seen as a stage in language development or can exist as part of a learning difficulty.</td>
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<tr>
<td><strong>EHCP</strong></td>
<td>Education, Health and Care Plan.</td>
</tr>
<tr>
<td><strong>Errorless learning</strong></td>
<td>Teaching and learning which leads to correct responses only, so that memory for the material is enhanced, and incorrect responses are not reinforced.</td>
</tr>
<tr>
<td><strong>Explicit information</strong></td>
<td>Explicit information ensures that everything that is needed is presented clearly and fully such that there is no ambiguity or doubt regarding meaning.</td>
</tr>
<tr>
<td><strong>Expressive Language</strong></td>
<td>The ability to use language to communicate with others</td>
</tr>
<tr>
<td><strong>Forced alternatives</strong></td>
<td>Pupil is asked a question and presented with two possible responses from which to choose.</td>
</tr>
<tr>
<td><strong>Functional Behaviour Analysis</strong></td>
<td>A system of behaviour observation and analysis to help identify the function of the behaviour.</td>
</tr>
<tr>
<td><strong>Graduated Response</strong></td>
<td>Once a potential special educational need is identified, schools should take action to remove barriers to learning and put effective special educational provision in place. This SEN Support should take the form of a four-part cycle – assess, plan, do, review. This is known as the graduated approach. The amount and type of provision made is in relation to their level of need. The three levels in this Provision Guidance are called Quality First Teaching, Additional School Intervention, High Need.</td>
</tr>
<tr>
<td><strong>Habilitation</strong></td>
<td>Health care services that help you keep, learn, or improve skills and functioning for daily living. Examples include therapy for a child who isn’t walking or talking at the expected age. There are Habilitation Officers within Essex who support children and young people with a visual impairment to help them access their environment.</td>
</tr>
</tbody>
</table>
| **Idiomatic language** | Idiomatic language refers to many words or phrases that are a familiar
and everyday feature of our language. Idioms are a part of the comfortable, conversational style of language we use daily but they can be difficult for some people to understand because their meaning is very different from the literal translation.

<table>
<thead>
<tr>
<th>Implicit information</th>
<th>Where information is not all explicit but is implied/suggested by the information that is readily available.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interleaved learning</td>
<td>A teaching and learning principle drawn from psychological research. A way of introducing material to pupils to help them learn new skills alongside previously learned ones to help long-term retention in memory. ‘Old’ knowledge is revisited and mixed with ‘new’ knowledge.</td>
</tr>
<tr>
<td>Joint attention</td>
<td>Joint attention is the shared focus of two individuals on an object</td>
</tr>
<tr>
<td>Kinaesthetic memory</td>
<td>Memory for physical actions, where you are combining sensing input, i.e. what you see with your eyes, with physical output, i.e. what you do with your body. Some people talk about ‘muscle memory’, however your muscles aren't really memorizing anything (since all memories are stored in your brain). Instead, what you see with your eyes is interpreted by your brain in the form of nerve signals to your muscles to make your body move. By making the same movements in response to the same visual cues over and over again, the associated nerve-muscle connections gradually become more effective, and quicker. i.e. the transmission of the signals becomes more effective, and this is how the &quot;thinking&quot; in the &quot;seeing-thinking-doing&quot; is gradually replaced by &quot;seeing-doing&quot;, i.e. by muscle memory. Psychologists call this process &quot;consolidation&quot;.</td>
</tr>
<tr>
<td>Lamb Report 2009/Lamb Enquiry</td>
<td>The Lamb Enquiry (2009) was established as part of the UK government’s response to the House of Commons Education and Skills Committee Report Special Educational Needs: Assessment and Funding. The enquiry was led by Brian Lamb, the chair of the Special Educational Consortium (SEC), who was tasked by the Department of Children’s, Schools, and Families (DCSF) to explore a range of ways in which parental confidence in the Special Educational Needs (SEN) assessment process might be enhanced.</td>
</tr>
<tr>
<td>Local Offer</td>
<td>Information about provision that is available across education, health and social care for children and young people who have SEN or are disabled, including those who do not have EHC plans.</td>
</tr>
<tr>
<td>Manageable chunks</td>
<td>In respect of verbal instructions, long instructions, or lists of instructions, should be presented to the pupil in small sections that the pupil is able to retain, process and understand. Time should be allowed for the first instruction to be internalised before further information is provided verbally.</td>
</tr>
<tr>
<td>Memory capacity</td>
<td>The amount of information that a person can remember. In many circumstances, this term is used to refer to an individual’s working memory/short term memory capacity i.e. what they can remember without recording the information. The amount that can be held in short term memory varies between individuals.</td>
</tr>
<tr>
<td>Metacognitive strategies</td>
<td>Methods used to help students understand the way they learn; in other words, it means processes designed for students to 'think' about their 'thinking'.</td>
</tr>
<tr>
<td>Neuropathy</td>
<td>Generally describes optic nerve abnormalities or damage, including from causes such as blocked blood flow or toxic exposure</td>
</tr>
<tr>
<td><strong>One Plan</strong></td>
<td>Essex School’s approach to Person Centred Planning</td>
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</tr>
<tr>
<td><strong>Open question</strong></td>
<td>A question where there is no obvious pre-defined answer.</td>
</tr>
<tr>
<td><strong>Oral narrative</strong></td>
<td>Being able to speak clearly, using appropriate grammar and language, and delivering information in an appropriate sequence.</td>
</tr>
<tr>
<td><strong>Oromotor</strong></td>
<td>Awareness and coordination of mouth movements.</td>
</tr>
<tr>
<td><strong>P Scales</strong></td>
<td>‘Performance Scales’ which are used for reporting attainment for pupils with special educational needs who are working below level 1 of the national curriculum.</td>
</tr>
<tr>
<td><strong>PECS (Picture Exchange Communication System)</strong></td>
<td>PECS is designed to be a unique augmentative/alternative communication intervention package for individuals with autism spectrum disorder and related developmental disabilities.</td>
</tr>
<tr>
<td><strong>Phonological Awareness</strong></td>
<td>Awareness of the phonological structure, or sound structure, of words. Includes skills in syllable identification, ability to identify and generate rhyming words, use of onset and rime, ability to identify initial, final and medial sounds etc.</td>
</tr>
<tr>
<td><strong>PIVATS (Performance Indicators for Value Added Target Setting)</strong></td>
<td>See also P Scales. PIVATS is an extended version of the revised P Scales. Each of the level descriptions expressed as P1(i) to P8 and 1C to 4 has been differentiated into five stepping stones to lead to the P Scale milestone and national curriculum level 4. PIVATS is a system used in schools for assessment of learning, performance monitoring and effective target setting.</td>
</tr>
<tr>
<td><strong>PNI Protocol</strong></td>
<td>A resource jointly developed by Essex educational psychologists and specialist teachers to provide practical and specific advice on useful approaches for pupils with physical and neurological impairment (date?)</td>
</tr>
<tr>
<td><strong>Pre-Teaching vocabulary</strong></td>
<td>Key vocabulary that will be required for an upcoming lesson or topic should be identified and focussed work should be carried out either with the whole class or specific individuals to ensure that pupils have a good understanding of the words. This will aid engagement and retention in lessons.</td>
</tr>
<tr>
<td><strong>Priming</strong></td>
<td>The teacher informs a supporting adult of a specific question that will be asked during a teaching session. The adult makes the pupil aware of the question and the correct answer before the session. During the session, the pupil is instructed to listen for their question, raise their hand and give the answer. Initially the target question should be posed near to the beginning of the teaching session, but the time delay can be increased as the child’s focus increases.</td>
</tr>
<tr>
<td><strong>Pure sounds</strong></td>
<td>The pronunciation of individual phonemes without the addition of other elements e.g. ‘b’ not ‘ber’</td>
</tr>
<tr>
<td><strong>Quality First Teaching</strong></td>
<td>High quality teaching which is differentiated and personalised for all pupils, and is the essential foundation of all teaching, assessment and intervention for all pupils.</td>
</tr>
<tr>
<td><strong>Recasting</strong></td>
<td>Repeating back a word such that a child hears a correct model. The child should NOT be asked to repeat the word again.</td>
</tr>
<tr>
<td><strong>Receptive Language</strong></td>
<td>The ability to understand spoken language</td>
</tr>
</tbody>
</table>
| **Reciprocal Conversation** | Where individuals talk together about a shared topic with one person speaking and the other listening and then responding appropriately on the same topic by commenting or questioning, The interaction should last for 3 or more exchanges.
**Scaffolding/Scaffolded learning**  
The concept of *scaffolding* likens the process of building a concept or skill within a child to the kind of temporary structure that supports the construction of a house. There is a gradual release of responsibility to the learner, as the learner becomes more responsible for his/her own learning and able to maintain a new skill. The teacher gives hints and prompts to support the learner and then gradually withdraws these supports, as the learner performs with increasing independence. In order for scaffolding to work and have an effect, one must start at the child's level of knowledge and build from there.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SENCO</strong></td>
<td>Special Educational Needs Co-ordinator.</td>
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<tr>
<td><strong>SEND</strong></td>
<td>Special Educational Needs and Disability</td>
</tr>
<tr>
<td><strong>Significant speech and language difficulties</strong></td>
<td>Delays or disorders in speech and/or language development that have a noticeable daily impact on an individual's ability to engage socially and academically.</td>
</tr>
<tr>
<td><strong>SMART targets</strong></td>
<td>Targets which are Specific, Measurable, Achievable, Realistic, and Time-related.</td>
</tr>
<tr>
<td><strong>Snellenkay (Logmar)</strong></td>
<td>Measure of visual ability.</td>
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<tr>
<td><strong>Special Educational Provision</strong></td>
<td>Special educational provision is educational or training provision that is additional to or different from that made generally for others of the same age. This means provision that goes beyond the differentiated approaches and learning arrangements normally provided as part of high quality, personalised teaching.</td>
</tr>
<tr>
<td><strong>Specific praise</strong></td>
<td>Praise which specifically describes what skill or attribute is being praised. E.g. saying “you were very patient then”, rather than just “good boy/girl”, or “You put a lot of effort into that question”, rather than just “Brilliant work”.</td>
</tr>
<tr>
<td><strong>Talking frames</strong></td>
<td>A visual reference sheet to provide a supportive structure when speaking</td>
</tr>
<tr>
<td><strong>Verbal bullet points</strong></td>
<td>Where a list of instructions are given, these should be repeated/reinforced using only the key words in the order of required action e.g. go and put your book bag in the box, then hang up your coat and come and sit on the carpet would be reiterated as book bag, coat, carpet.</td>
</tr>
<tr>
<td><strong>Visual memory</strong></td>
<td>Memory for information that is visually presented, e.g. pictures, words, people.</td>
</tr>
<tr>
<td><strong>Vocabulary</strong></td>
<td>The number of words a child may know, as well as the ability to use them appropriately in context.</td>
</tr>
<tr>
<td><strong>Working memory</strong></td>
<td>The ability to hold and manipulate information in the mind over short periods of time.</td>
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</table>
Additional Glossary of Terms for Social, Emotional and Mental Health Difficulties

Introduction

This introduction to the glossary summarises the National Institute for Health and Clinical Excellence’s (NICE) recommendations for local authorities and partner organisations on social and emotional wellbeing for children and young people, specifically, vulnerable children aged under 5 years and all children in primary and secondary education.

Social and emotional wellbeing creates the foundations for healthy behaviours and educational attainment. It also helps prevent behavioural problems (including substance misuse) and mental health problems. That's why it is important to focus on the social and emotional wellbeing of children and young people.

The following definitions are used:

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Social wellbeing</td>
<td>Having good relationships with others and does not have behavioural problems, that is, they are not disruptive, violent or a bully.</td>
</tr>
<tr>
<td>Emotional wellbeing</td>
<td>Showing awareness of own feelings and that of others, managing feelings, confidence. — this includes being happy and confident and not anxious or depressed</td>
</tr>
<tr>
<td>Psychological wellbeing</td>
<td>This includes the ability to be autonomous, problem-solve, manage emotions, experience empathy, be resilient and attentive</td>
</tr>
</tbody>
</table>

Identifiable Types of Difficulties, Conditions and Disability

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment Disorder</td>
<td>A range of difficulties typically affecting mood, adherence to social norms and social relationships arising from a failure to form normal attachments to primary caregivers during early childhood (0-3 years). Also has causative link to incidences of abuse, neglect, sudden separation from / changes in caregivers during early childhood.</td>
</tr>
<tr>
<td>For more information on this use the information section in Provision Guidance - “Attachment”</td>
<td></td>
</tr>
<tr>
<td>Attention Deficit Hyperactivity Disorder ADHD</td>
<td>A specific learning difficulty typically presenting as exceptionally low concentration span, poor working memory, limited organisational skills with extreme impulsivity.</td>
</tr>
<tr>
<td>For more information on this use the information section in Provision Guidance - “ADHD and ODD”</td>
<td></td>
</tr>
<tr>
<td><strong>Attention Deficit Disorder</strong> (ADD)</td>
<td>A specific learning difficulty typically presenting as exceptionally low concentration span, poor working memory, daydreaming / procrastination and slower thinking through of concepts, questions etc.</td>
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</tbody>
</table>
| **Attribution**                   | In social psychology, attribution is the process of inferring the causes of events or behaviours. In real life, attribution is something we all do every day, usually without any awareness of the underlying processes and biases that lead to our inferences.  

For example, over the course of a typical day you probably make numerous attributions about your own behaviour as well as that of the people around you.  

When you get a poor grade on a quiz, you might blame the teacher for not adequately explaining the material, completely dismissing the fact that you didn't study. When a classmate gets a great grade on the same quiz, you might attribute his good performance to luck, neglecting the fact that he has excellent study habits.  

Why do we make internal attributions for some things while making external attributions for others? Part of this has to do with the type of attribution we are likely to use in a particular situation. Cognitive biases often play major roles as well.  

What impact do attributions for behaviours really have on your life? The attributions you make each and every day have an important influence on your feelings as well as how you think and relate to other people. |
| **Autistic Spectrum Condition**    | A psychological condition presenting itself in a variety of forms (Autism, Asperger Syndrome, Pervasive Development Disorder – Not Otherwise Specified), typically including specific learning difficulties centred around limited empathy, fixated / literal thinking, limited ability to interpret language, limited ability to engage in a variety of social situations / experiences.  

For more information on this use the “ASD” section in the Provision Guidance. |
| **Behavioural, Emotional and Social BESD** | A range of difficulties typically presenting as exceptional limitations in an ability to recognise and manage emotions linked in with a persistent inability to engage constructively in a variety of social situations / experiences etc. |
| **Bio-psycho-social approach**     | Bio-psycho-social approach, which has become the dominant model and recognises that humans are complex beings whose functioning is determined by interrelated and interdependent biological, psychological and socio-cultural factors.  

For more information on this use the information section in Provision Guidance - “Theoretical Perspectives” |
<table>
<thead>
<tr>
<th><strong>Concentration</strong></th>
<th>Staying on task, ignoring distractions, focusing on the teacher, remembering instructions etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Conduct disorder</strong></td>
<td>All children and teens will disobey adults at times. It takes time for children to learn to behave and the occasional outburst is a normal part of growing up. Sudden outbursts of behaviour such as tantrums, refusing to do as they are told, hitting, kicking and breaking things are all normal signs of development if they occur infrequently and don’t violate the rights of others. However, some children and teens have serious behavioural problems that can last over a long period of time and can affect their ability to lead a normal life. When their behaviour becomes this much of a problem, it is called conduct disorder. For more information on this use the information section in Provision Guidance - “Conduct Disorder”</td>
</tr>
<tr>
<td><strong>Crisis</strong></td>
<td>In mental health terms, a crisis refers not necessarily to a traumatic situation or event, but to a person’s reaction to an event. One person might be deeply affected by an event, while another individual suffers little or no ill effects. “…crisis is a perception or experience of an event or situation as an intolerable difficulty that exceeds the person’s current resources and coping mechanisms.” James and Gilliland, ‘Crisis Intervention Strategies’ 2001.</td>
</tr>
</tbody>
</table>
| **Depression** | Depression is a serious illness that negatively affects how you feel, the way you think and how you act. Fortunately, it is also treatable. Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed. It can lead to a variety of emotional and physical problems and can decrease a young person’s ability to function at school and at home. Depression symptoms can vary from mild to severe and can include:  
  • Feeling sad or having a depressed mood  
  • Loss of interest or pleasure in activities once enjoyed  
  • Changes in appetite—weight loss or gain unrelated to dieting  
  • Trouble sleeping or sleeping too much  
  • Loss of energy or increased fatigue  
  • Feeling worthless or guilty  
  • Difficulty thinking, concentrating, or making decisions  
  • Thoughts of death or suicide  
  
For more information on this use the information section in Provision Guidance - “Depression in children and young people” |
| **Emotional health** | Recognised as being fundamental to the wellbeing and future prospects of individuals and communities. Emotional health is nurtured primarily in the home, but we know that schools and services can and do make a difference. |
| **Emotional Intelligence** | Emotional intelligence is the ability to identify and manage your own emotions and the emotions of others. It is generally said to include 3 skills:  
1. Emotional awareness, including the ability to identify your own emotions and those of others;  
2. The ability to harness emotions and apply them to tasks like thinking and problems solving;  
3. The ability to manage emotions, including the ability to regulate your own emotions, and the ability to cheer up or calm down another person. |
| **Empathy** | Empathy is the ability to understand and share the feelings of another. |
| **Mental health** | The World Health Organisation (WHO) define mental health as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.  
The positive dimension of mental health is stressed in WHO's definition of health as contained in its constitution: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."  
For more information on this use the information section in Provision Guidance - “Emotional Wellbing” |
| **Mindset** | Mindset is an idea researched by Carol Dweck over the past decades on achievement and success.  
In a fixed mindset, people believe their basic qualities, like their intelligence or talent, are simply fixed traits.  
In a growth mindset, people believe that their most basic abilities can be developed through dedication and hard work—brains and talent are just the starting point.  
For more information on this use the information section in Provision Guidance - “Mindset” |
| **Motivation** | Definition: Intrinsic motivation refers to motivation that comes from inside an individual rather than from any external or outside rewards, such as money or grades.  
The motivation comes from the pleasure one gets from the task itself or from the sense of satisfaction in completing or even working on a task.  
An intrinsically motivated person will work on a math equation, for example, because it is enjoyable. |
Or an intrinsically motivated person will work on a solution to a problem because the challenge of finding a solution is provides a sense of pleasure. In neither case does the person work on the task because there is some reward involved, such as a prize, a payment, or in the case of students, a grade.

Intrinsic motivation does not mean, however, that a person will not seek rewards. It just means that such external rewards are not enough to keep a person motivated. An intrinsically motivated student, for example, may want to get a good grade on an assignment, but if the assignment does not interest that student, the possibility of a good grade is not enough to maintain that student's motivation to put any effort into the project.

**Oppositional Defiant Disorder (ODD)**

A psychological condition presenting itself as an ongoing pattern of disobedient, hostile, defiant and deliberately subversive behaviour toward authority figures/systems of authority which goes beyond the bounds of normal childhood behaviour. Often linked with ADHD and can develop into other more severe conditions such as Conduct Disorder.

For more information on this use the information section in Provision Guidance - “ADHD and ODD”

**Organisational Skills**

Physical organisation of self and equipment, planning ahead with work, thinking about consequences before actions etc.

**Resilience**

While definitions of resilience are clearly helpful, we also need to know what qualities we might expect to find in a child who has been described as "resilient". The following is suggested as a more accessible definition:

A resilient child can resist adversity, cope with uncertainty and recover more successfully from traumatic events or episodes. Three kinds of resilience tend to be described (Masten et al. 1990). The first type is represented by children who do not succumb to adversities, in spite of their high risk status, for example low birth weight babies. The second type concerns children who develop coping strategies in situations of chronic stress, such as children of drug using or alcoholic parents. Thirdly, children who have suffered extreme trauma, for example through disasters, sudden loss of a close relative or abuse, and who have recovered and prospered may be described as resilient (Gibson 1998).

For more information on this use the information section in Provision Guidance - “Resilience”

**Restorative Approach**

A Restorative approach involves a process that resolves conflict. It is part of a larger ethos also known as Restorative Practices/Approaches. It promotes telling the truth, taking responsibility, acknowledging harm as appropriate response to conflict and in doing so creates accountability.

**School refusal**

School refusal is the refusal to attend school due to emotional distress. School refusal differs from truancy in that children with school refusal feel anxiety or fear towards school, whereas truant
children generally have no feelings of fear towards school, often feeling angry or bored with it instead.

| Selective mutism | Selective mutism (SM) is an anxiety disorder that prevents children speaking in certain social situations, such as school lessons or in public.  
However, they're able to speak freely to close family and friends when nobody else is listening – for example, when they're at home.  
It's important to understand that when the mutism happens, the child is not voluntarily refusing to speak but is literally unable to speak, feeling frozen. In time, they learn to anticipate the situations that provoke mutism and do all they can to avoid them. |

| Self-Awareness | Self-awareness is a skill that helps your child tune in to his feelings, thoughts and actions. It's more than just being able to recognize these things. It means understanding that how he acts on his thoughts and feelings affects himself and others. |

| Self-control | Self-control is the ability to control one's emotions, behavior, and desires in the face of external demands in order to function in society. In psychology it is sometimes called self-regulation. Self-control is essential in behavior to achieve goals and to avoid impulses and/or emotions that could prove to be negative or destructive. In behavior analysis self-control represents the locus of two conflicting contingencies of reinforcement, which then make a controlling response reinforcing when it causes changes in the controlled response. |

| Self-efficacy | Self-efficacy is the belief that you are capable of performing a task or managing a situation. As a quote often attributed to Henry Ford says, “Whether you think that you can or that you can’t, you are usually right.” A child with high self-efficacy believes they have the skills to help them steer through life and reach their goals. Perhaps most importantly, self-efficacy is about learning how to persevere when one does not succeed.  
Higher self-efficacy is linked to:  
better ability to think productively by applying positive thinking skills when facing a challenge  
higher motivation  
stronger effort put into an activity or task  
greater resilience  
lower vulnerability to stress and depression  
Lower self-efficacy is linked to:  
tendency to shy away from difficult tasks  
lower aspirations and poor commitment to goals  
pessimistic attitude towards obstacles  
greater vulnerability to stress and depression  
For more information on this use the information section in Provision Guidance - “Self Efficacy” |
<p>| <strong>Self-Regulation</strong> | There is a growing awareness among developmental scientists that the better a child can self-regulate, the better he can rise to the challenge of mastering ever more complex skills and concepts. In the simplest terms, self-regulation can be defined as the ability to stay calmly focused and alert, which often involves – but cannot be reduced to – self-control. The better a child can stay calmly focused and alert, the better he integrates the diverse information coming in from his different senses, assimilates it, and sequences his thoughts and actions. For someone who thinks that self-regulation is really just a matter of a child’s getting in control of his negative emotions, there is very little difference between self-regulation and compliance. But, unlike compliance based on punishment, self-regulation nurtures the ability to cope with greater and greater challenges because it involves arousal states, emotions, behaviour, and – as the child grows older – thinking skills |
| <strong>Self-worth</strong> | The sense of one's own value or worth as a person; self-esteem; self-respect. |
| <strong>Sexualised behaviour</strong> | Learning about sex and sexual behaviour is a normal part of a child's development. It will help them as they grow up, and as they start to make decisions about relationships. By knowing what's 'normal' at each particular stage you can be ready for what to expect, even though it might seem a little uncomfortable at times! How to react to sexualised behaviour? The way you respond is important. If you're too disapproving or send the message that sex shouldn't be spoken about then your children may be less likely to come to you with any questions or worries they might have. Of course, this won't be easy for everyone, especially if a child's behaviour seems shocking or morally wrong to you. But try to keep calm. The way you react can affect how comfortable the child will feel about talking to you about these things in the future. Learning about sex and sexual behaviour is a normal part of a child's development. It will help them as they grow up, and as they start to make decisions about relationships. By knowing what's 'normal' at each particular stage you can be ready for what to expect, even though it might seem a little uncomfortable at times! For more information on this use the information section in Provision Guidance - “Sexual Behaviour Problems” |
| <strong>Social anxiety</strong> | Social anxiety disorder, also called social phobia, is an anxiety disorder in which a person has an excessive and unreasonable fear of social situations. Anxiety (intense nervousness) and self-consciousness arise from a fear of being closely watched, judged, and criticised by others. For more information on this use the information section in Provision Guidance - “Social Anxiety” |</p>
<table>
<thead>
<tr>
<th><strong>Speech and Language</strong></th>
<th>Understanding their first spoken language, acquiring new vocabulary, ability to express themselves clearly in sentences etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stress</strong></td>
<td>This is defined as a state of mental tension and worry caused by problems in your life, work, etc.</td>
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<tr>
<td></td>
<td>It can also be something that causes strong feelings of worry or anxiety.</td>
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<td></td>
<td>For more information on this use the information section in Provision Guidance - “Kids have stress too”</td>
</tr>
<tr>
<td><strong>Therapeutic stories</strong></td>
<td>Stories have long been used in psychological counselling with children Logically; the first stories written in collaborative and therapeutic assessment were for children. The stories were an extension of the psychological report and intended to explain psychological assessment results to the child without overwhelming him or her. These fables often use animal characters – including a wisdom character – to set up a fictional world that parallels the child’s actual situation and provides both information and support for life change.</td>
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<td></td>
<td>Stories use metaphor and imagery to change the way we see our lives and the world, offering healing and growth to everyone - teller and listener alike. They connect us to each other and help us find meaning and hope. Therapeutic storytelling can change the way we see our lives and the world. Using metaphor, stories offer healing to everyone.</td>
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</tbody>
</table>