



# Special Educational Needs and Disabilities (SEND) Policy

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## Key document details

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## **Steel River Academy SEND and Additional Needs Policy**

### **1. COMPLIANCE**

This policy complies with the statutory requirements of the 2014 SEND Code of Practice (0-25yrs). It has been written with reference to the following guidance documents:

- Equality Act 2010: advice for schools DfE Feb 2013;
- SEND Code of Practice (2014);
- Schools SEN Information Report Regulations (2014);
- Statutory Guidance on Supporting pupils at school with medical conditions April 2014
- The National Curriculum;
- MAT Safeguarding Policy;
- Accessibility Plan;
- Teachers' Standards 2012.
- KCSIE Sept 2021

This policy was created by the SENCOs from the four schools in the Multi Academy Trust (MAT) in liaison with the Head teachers, SELs and trustees.

### **2. CONTACTS**

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### **3. VALUES AND BELIEFS**

All schools in Steel River Academy Trust, are open, supportive and work as a professional team who are committed to ensuring that every child succeeds. We all aim to create a positive atmosphere of trust, mutual respect and high expectations between pupils, staff, parents/carers and other professionals.

We have high academic/vocational and technical ambition for all pupils and our SEND children will not be offered a reduced curriculum.

We are determined to ensure that we provide a happy, safe and calm environment where children behave well and develop into confident, creative and independent learners.

Steel River schools aim to ensure that all children's individual needs are met so that they are able to achieve their educational potential and are committed to providing, for each pupil, the best possible environment for learning.

We believe that wherever possible, children have an equal right to an inclusive education which enables them to fully develop their personal, social and intellectual potential and to experience success every single day. We understand the importance of targeted, appropriate intervention to promote achievement.

We recognise that many pupils will have special needs at some time during their school life. In implementing this policy, we believe pupils will be helped to overcome their difficulties. In our schools, every teacher is a teacher of every child, including those with special educational needs.

#### **4. DEFINITION OF SPECIAL EDUCATIONAL NEEDS (SEND) – Section 20 of the children and Families Act 2014**

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

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

A child under compulsory school age has special educational needs if they fall within the definition of the above or would do so if special educational provision was not made for them.

Children must not be regarded as having a learning difficulty solely because the language or form of language of their home is different from the language in which they will be taught.

#### **5. POLICY AIMS AND OBJECTIVES**

1. To identify any child with SEND at the earliest opportunity;
2. To ensure that each child with a Special Educational Need and /or Disability can access and gain a positive experience from all aspects of school life by removing barriers to learning and, where necessary, making any other reasonable adjustments to allow them to do so.
3. To ensure the trust's philosophy, policies and procedures are underpinned in all of our actions and are actively promoted by all members of our community so that:
  - a. we have in place a consistently applied framework (see 'graduated response') for identifying those children whose individual needs will require intervention;

- b. those children who are identified as SEND are taught using the cycle of: Assess, Plan, Do, Review;
  - c. accessible systems are in place to record, monitor and track progress;
  - d. the quality of education is designed to be ambitious and to develop the knowledge and skills of SEND pupils through quality first teaching.
  - e. there are high expectations for all children;
4. To ensure all children, regardless of ability, gender, ethnic origin, social background or disability, have access to a broad, balanced and challenging curriculum.
  5. To ensure all learning support and interventions are tailored to an individual's specific needs with a clear focus on pupil outcomes. Targets and outcomes will be routinely shared with the child and parents/carers.
  6. To work in partnership with everyone who cares for the individual child to ensure the very best outcomes.
  7. To put the child at the centre of everything we do, raise aspirations and expectations and give them a voice.
  8. That we make appropriate use of SEND resources (at both SEN Support and EHC Plan stages) to procure the expertise of external agencies through a consistent and cyclical review of outcomes.
  9. To provide ongoing, relevant staff CPD and training.
  10. To produce targets and outcomes that are appropriate to the individual and which are consistently formulated, manageable and are implemented as an integral part of our short-term planning and delivery.
  11. To provide a clear structure for the management of specialist support, e.g. timetable for support staff and any interventions.

## **6. IDENTIFYING CHILDREN WITH SPECIAL EDUCATIONAL NEEDS**

The identification of SEN is embedded in the whole school process of monitoring the progress and development of all pupils. In the Steel River Academy Trust we recognise the benefits of early identification and making effective provision in improving the long-term outcomes for children with SEN. We identify children with SEN as early as possible, by assessment at the start of the Foundation Stage Year and through screening by speech and language.

The purpose of identification is to work out what action the school needs to take, not to fit the pupil into a category. It is also important to identify the full range of needs, not simply the primary need of an individual pupil. The Code of Practice refers to four broad areas of need:

**Communication and interaction** - these children have a difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. For example, children with Autistic Spectrum Disorders (ASD), including Asperger syndrome, are likely to have particular difficulties with social interaction. They may also

experience difficulties with language, communication and imagination, which can impact on how they relate to others.

**Cognition and learning** - children with learning difficulties learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs from moderate learning difficulties (MLD) to children with profound and multiple learning difficulties (PMLD). Specific learning difficulties (SpLD), affect one or more specific aspects of learning, such as dyslexia, dyscalculia and dyspraxia.

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

**Sensory and/or physical needs** - some children require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. Many children with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and /or equipment to access their learning.

Throughout all of the schools we monitor and track the progress of all children by an ongoing process of assessing, planning, teaching and reviewing. Children with SEN may be identified at any stage of this process during their school life.

## **7. TRIGGERS FOR FURTHER INTERVENTION**

We recognise that there is a wide range of SEN amongst our children and match the level of intervention to each child's needs. We have adopted the "graduated" approach, where the level of intervention increases whenever adequate progress is not being made.

The "triggers" for further intervention are one or more of the following:

- ongoing teacher and TA observation and assessment within the classroom, and/or attainment in annual standardised tests showing one or more of the following:
- the child is working at a level below the national expectation for that Year group
- the attainment gap between the child and his peers is getting wider.
- a previous rate of progress is not being maintained.
- little progress is being made even when teaching approaches and resources have targeted a child's identified area of weakness.
- the class teacher's annual assessment profiles showing underachievement in one or more curriculum areas.
- low scores in diagnostic testing – by multi agencies
- emotional or behavioural difficulties persisting in spite of the use of the school's behaviour management programmes & mental health and wellbeing support including counselling.

- self-help skills, social and personal skills inappropriate to the child's chronological age.
- diagnosis of a previously unidentified medical condition, communication problem or sensory impairment
- Looked After children, in liaison with Children's Services
- for a child who is new to the school, records from the previous school indicating that additional intervention has been in place.
- parental concerns regarding academic progress, behaviour, social adjustment and/or communication skills.
- other adults concerns e.g. from medical services, Educational Psychologist, Children Services, Learning Mentor, School and Children's Centre Family Liaison Officer.

**Please see Appendix A that sets out SAT procedures for identifying and supporting early identification**

## **8. A GRADUATED APPROCH**

Teachers are responsible and accountable for the development and progress of all pupils in their class. In the first instance, children who are not making expected progress compared to their peers will be identified as an SEND concern by the class teacher. Initial concerns will be shared with parents and the SENCO.

High quality teaching, differentiated for individual pupils in the classroom is the first step in responding to pupils who may or may not have SEND. We believe that additional intervention and support cannot compensate for a lack of good quality teaching.

All schools in Steel River Academy Trust regularly and carefully review the teaching for all pupils, including those at risk of underachieving.

The second step is to implement well-planned interventions. The progress of individual children will be monitored over an appropriate period of time and compared to national data and expectations of progress. At this point, the SEND status of the child will be reviewed and advice from specialist services will be sought if necessary. Applications for statutory assessment will be initiated if appropriate. Parents will be consulted throughout the process, and the child's views will be sought.

## **SEN SUPPORT**

Where it is deemed that a pupil does have SEND, parents will be formally advised of this decision, and the pupil will be added to the SEND register. The aim of formally identifying a pupil with SEND is to help school to ensure that effective provision is put in place and so remove barriers to learning. The support provided consists of a four-part process:

**Assess**

**Plan**

**Do**

**Review**

This is an ongoing cycle to enable the provision to be refined and revised as the understanding of the needs of the pupil grows.

### **Assess**

This involves clearly analysing the pupil's needs using the class teachers assessment and experience of working with the pupil, details of previous progress and attainment, comparisons with peers and national data, as well as the views and experience of the parents. The pupil's views and where relevant advice from external support services will be considered. Any parental concerns will be noted and compared with the school's information and assessment data on how the pupil is progressing.

### **Plan**

Planning will involve consultation between the teacher, the SENCO and parents to agree the adjustments, interventions and support that are required. The impact on progress, development and or behaviour, that is expected and a clear date for review. Parental involvement may be sought, where appropriate, to reinforce or contribute to progress at home. All those working with the pupil, including support staff will be informed of their individual needs, the support that is being provided, any particular teaching strategies/ approaches that are being employed and the outcomes that are being sought.

### **Do**

The class teacher remains responsible for working with the child on a day to day basis. They will retain responsibility even where the interventions may involve group or one to one teaching away from the main class teacher. They will work closely with teaching assistants and to plan and assess the impact of support and interventions and links with classroom teaching. Support with further assessment of the pupil's strengths and weaknesses, problem solving and advising of the implementation of effective support will be provided by the SENCO.

### **Review**

Reviews of a child's progress will be sought regularly. The review process will evaluate the impact and quality of the support and interventions. It will also take account of the views of the pupil and where necessary their parents. The class teacher in conjunction with the SENCO will revise the support and outcomes based on the pupil's progress and development making necessary amendments going forward, in consultation with parents and the pupil.

## **EDUCATION HEALTH CARE PLAN (EHC Plan) – formally known as 'Statements'**

If a child is not making progress despite following the graduated response of Assess, Plan, Do, Review (including targeted support and the advice of outside professionals) it may be necessary to move onto the next stage and to make an application for statutory assessment for an Education Health Care Plan (EHCP). Parents/carers will be consulted throughout the process, and the child's views will be sought if appropriate.

The EHC assessment takes up to 20 weeks and could result in the child being issued with an Education Health Care Plan (EHCP). This is a legal document and it usually means that a child requires a higher level of support which would not ordinarily be provided from the



basic funding made available to the school. In some cases, children may be issued with a SEND Support Plus Plan. This is not a legally binding document, but attracts the same additional funding as an EHCP

## **LEARNING SUPPORT BASE (ARC)**

Grangetown Learning Support Base is a local authority provision which has 15 KS2 places. Children are admitted to the base through panel which is held every three weeks. The provision focuses on cognition and learning needs and caters for children with a range of SEN, including; communication & interaction, cognition & learning, social, emotional and mental health difficulties and sensory and physical needs. The children are admitted onto the school role and if they live out of the area they receive transport to and from school. They also receive inclusion into their year class group every afternoon.

## **9. MANAGING PUPILS' NEEDS ON THE SEN REGISTER**

Children's needs are recorded and managed in a number of ways:

- SEND register;
- SEND as a user defined group on SIMS to monitor progress;
- SEN Support Plans and EHC Plans;
- Measure of progress for interventions groups;
- Formal SEND reviews three times per year;
- SENCO provides support for all teaching staff.

Teachers are responsible and accountable for writing, and updating, SEN Support Plans working in partnership with parents/carers and other agencies. This is overseen by the SENCO. The SENCO is responsible for co-ordinating the EHC Plan reviews.

The SEND budget will be managed effectively by the Headteacher and SEND link governor in order to provide appropriate additional support. The SEND link governor will report progress to the governing body and Ofsted.

How we decide upon the level of provision and the referral process is detailed in the SEND Information Report. This report is available and published on the school website. This document is available in alternative forms.

A range of agreed Local Authority documentation will be completed as appropriate, such as SARF, EHAS.

## **10. CRITERIA FOR EXITING THE SEND REGISTER**

If a child has:

- Demonstrated and maintained expected progress;
- Achieved the outcomes set and no longer requires provision that is additional to, or different from, the provision for other pupils
- Been discharged from additional, external support following multi-agency reviews;
- Demonstrated that there is no longer a need for intervention.

All children who have exited the SEND register will continue to be monitored for an appropriate period of time. Records will be kept securely and parents/carers will be informed throughout the process.

## **11. SUPPORTING PUPILS WITH MEDICAL CONDITIONS**

Steel River Academy Trust recognises that pupils at all of our schools with medical conditions should be properly supported so that they have full access to education, including school trips and physical education. Some children with medical conditions may be disabled and where this is the case the school will comply with its duties under the Equality Act 2010. The school fully complies with the DfE guidance on Supporting Pupils with Medical Conditions. Please refer to the Managing the Medical Conditions of Pupils policy which is available on each of our school's websites.

## **12. TRANSITION**

All schools within the Steel River Academy Trust will prepare for a child's transition to a new class, school or setting. Within the trust, each school will undertake a transitional week at the end of the academic year. This is an opportunity for the children to experience the new routines and to form positive relationships with the staff members they will be working with. Where additional support is needed for transition, each school will assess the needs of the child and offer a personalised transitional package. This may include an enhanced transitional visits with new class teachers, counselling or therapy groups, regular meetings with teachers or a pupil passport.

Throughout the transitional periods, children with communication and interaction barriers are considered carefully, particularly those with Autism Spectrum Disorder (ASD). In some cases, an individual school may sought support from external services such as the Specialist Teaching Service.

When a SEND child is transitioning from a primary setting to a secondary setting, the SENCO of each school will make contact with the appropriate Year 7 manager or SENCO of the new setting. Although secondary schools offer slightly different transitional packages, each school within the trust will share relevant SEND information and inform the new setting of the child's history.

## **13. TRAINING AND RESOURCES**

Funding for SEND is received from the following sources:

- Payment for pupils on the SEND register;
- Funding from EHCP;
- Pupil Premium;
- Additional money allocated from the school budget.

Funding is used to provide a range of appropriate resources and specialist CPD. Training is planned and organised according to specific need and performance management/appraisal objectives.

All teachers and support staff undertake induction on taking up a post and this includes a meeting with the SENDCo to explain the systems and structures in place around the school's SENDCo provision and practice and to discuss the needs of individual pupils.

All of the SENDCos in our MAT regularly attend the local authority's SENDCo network meetings in order to keep up to date with local and national updates in SEND.

#### **14. ROLES AND RESPONSIBILITIES**

The SEND governor has due regard to the SEND Code of Practice (0 -25) when carrying out its duties of special educational needs. The governing body and Academy Trustees endeavour to secure the necessary provision for any pupil identified as having SEND.

##### **Role of SENDCo in school:**

- The SENDCo is the key person who manages the day to day operation of this policy. The role encompasses the following:
  - Co-ordinates the provision for and manages the responses to children's SENDs
  - Supports and advises colleagues.
  - Oversees the records of all children with SEND
  - Liaises with parents,
  - Liaises with all external agencies and support services.
  - Monitors and evaluates the SEND provision and reports to the governing body.
  - Manages a range of resources, to enable appropriate provision for all children with SEN
  - Ensures that the school is kept up to date with legislation and statutory requirements in respect of SEND provision.
  - Contributes to the professional development of all staff.

#### **15. STORING AND MANAGING INFORMATION**

Some children on the SEN register will have a SEND file which is locked away. Any relevant information will be shared with the classroom teacher.

Safeguarding and Child Protection information is held separately in a locked cupboard. Please refer to the Child Protection Policy for more information.

All information held electronically is password protected.

#### **16. ACCESSIBILITY**

The DDA, as amended by the SEN and Disability Act 2001, placed a duty on all schools and LAs to plan to increase over time the accessibility of schools for disabled pupils and to implement their plans.

For information regarding accessibility, please refer to the Accessibility Policy.

Written information that is normally provided by the school to its pupils can be provided in alternative forms. Examples might include handouts, timetables, textbooks and information about school events. The information should take account of pupils' disabilities and pupils' and parents' preferred formats and be made available within a reasonable time frame.

If a parent needs to speak to key staff, an appointment will be made at the next possible opportunity.

#### **17. COMPLAINTS**

Each school has a statutory complaints procedure. This policy can be found on the school website or is available upon request from the school office.

## **18. REVIEWING THE POLICY**

Due to the current climate of reform, this policy will be reviewed annually.

***Every care has been taken in the compilation of this policy and the information provided is correct at the time of publication.***

## Appendix A

### SRAT SEND Procedures

***As a Trust we want to ensure that children receive the support they need in a timely manner to help them achieve their individual milestones. However, we are also mindful that many children have delayed development in a number of areas and for a number of reasons. Therefore, it is vital that we do not label children as SEND before a substantial period of individualised support, intervention and monitoring has been in place. This will allow time to accurately assess the child's needs and barriers to learning thus ensuring the child receives the right provision for their long term personal and educational development.***

***In order to ensure provision is right for our youngest children, the Trust will take a stronger focus on early identification and intervention for children in Reception and Year 1 so that support plans are put in place at the right time.***

***The following procedures will be adopted by all schools in Steel River Academy Trust to ensure consistency and equity across all our schools.***

- Children who are identified as range 1 for cognition and learning needs will be placed on the vulnerable learners list.
- Children who are identified as range 1 in multiple areas, will receive targeted interventions/additional support for a minimum of 1 term. If after this period, little or no progress is made a meeting will be arranged by the class teacher, SENDco and appropriate member of SLT to determine whether registration on the SEND register is the appropriate next step.
- Once a child is registered on the vulnerable learner list, this will be monitored and reviewed termly, If after two terms, there is little or no progress, the child will progress to the SEND register. This will be implemented after a pupil progress meeting which will include the class teacher, SENDCo and member of SLT. **Pupils must not remain on the vulnerable learner list for more than 1 year.**
- During pupil progress meetings, members of SLT alongside the SENDCo, will determine whether poor progress is a result of SEND need or whether this is down to poor classroom provision and quality first teaching before agreeing to register a child as SEND.

### Appendix B SEND Ranges

\*Expectations will differ depending on the actual age of the child/young person. Summer birthdays should be taken into account as a child born in August may be two academic years behind but only a few days off being one year behind.

## Cognition and Learning Descriptors

<p>Range One</p> <p>Mild</p> <p>FUNDING:</p> <p>Element 1</p>	<ul style="list-style-type: none"> <li>• May be below age-related expectations.</li> <li>• Difficulty with the acquisition / use of language, literacy, numeracy skills</li> <li>• Difficulty with the pace of curriculum delivery.</li> <li>• Some problems with concept development.</li> <li>• May have some difficulties with sequencing, organisation, remembering and following instructions.</li> </ul>
<p>Range Two</p> <p>Mild to Moderate</p> <p>FUNDING:</p> <p>Element 1</p>	<ul style="list-style-type: none"> <li>• Mild but persistent difficulties in the acquisition/use of language/literacy/numeracy skills despite regular attendance, appropriate intervention, and quality first teaching.</li> <li>• Pattern of strengths and weaknesses is likely to be present, which could present as a difference between verbal and written ability.</li> <li>• The C&amp;YP is operating at a level below expected outcomes and there is evidence of an increasing gap between them and their peers despite adapted learning activities and/or targeted intervention.</li> <li>• Evidence of difficulties with aspects of cognition i.e., memory, concept development, information processing, understanding, sequencing, and reasoning that impact on the learning and/or limit access to the curriculum.</li> <li>• Progress is at a slow rate but with evidence of response to intervention.</li> <li>• Processing difficulties limit independence and may need adult support in some areas.</li> <li>• May have difficulties with organisation and independence in comparison to peers.</li> <li>• Difficulties may impact on access to the curriculum.</li> <li>• C&amp;YP may need special arrangements and adjustments to support them in the classroom.</li> <li>• Self-esteem and motivation may be an issue.</li> </ul> <p>School to consider whether C&amp;YP needs to be on SEND Register and the initiation of a SEND Support Plan.</p>

<p>Range Three</p> <p>Moderate</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<p>As above plus:</p> <ul style="list-style-type: none"> <li>Moderate and persistent difficulties in the acquisition/use of language/literacy/numeracy skills despite regular attendance and high-quality intervention.</li> <li>Difficulties in some aspect of cognitive processing will be present: i.e., slow phonological processing. Poor working memory, and difficulties with auditory and visual processing.</li> <li>Operating at below average range and there is evidence of an increasing gap between them and their peers despite targeted, and adapted curriculum modification.</li> <li>Moderate difficulties with independent working and needs the support of an adult and a modified curriculum.</li> <li>Significant discrepancies between different areas of cognition or a highly unusual profile of strength and difficulties which may require an assessment from an appropriately qualified professional e.g., specialist teacher/EP/health professional.</li> <li>The difficulty will affect access to curriculum and specialist support and arrangements will be required. Assistive technology such as reading pens, laptops, tablet may be appropriate.</li> </ul> <p>SEND Support Plan should be in place and C&amp;YP should be on school's SEND Register.</p>
<p>Range 4i</p> <p>Significant</p> <p>FUNDING:</p> <p>Element 1 + Element 2 + Element 3</p>	<p>As above plus:</p> <ul style="list-style-type: none"> <li>Significant and persistent difficulties in the acquisition/use of language/literacy/numeracy skills despite regular attendance and high-quality intervention and teaching.</li> <li>Key language, literacy/and or numeracy skills are well below average.</li> <li>Difficulty accessing text and/or recording independently.</li> <li>Significant levels of difficulty in cognitive processing, requiring significant alteration to the pace and delivery of the curriculum.</li> <li>Difficulties with retaining information and skills.</li> <li>Significant level of difficulty in cognitive processing requiring alteration to the pace and delivery of the curriculum.</li> <li>May need access to a personalised curriculum with opportunities for multi-sensory learning.</li> <li>Difficulties likely to be long term/lifelong and may affect different areas.</li> <li>Significantly levels of difficulty affect access to curriculum and academic progress.</li> <li>High levels of support required which include assistive technology.</li> <li>May require appropriate support during unstructured times such as break/dinner time/after school clubs.</li> <li>Social skills and behaviour may be affected, and issues of self-esteem and motivation are likely to be present.</li> <li>The C&amp;YP may appear to be increasingly socially immature and vulnerable because of difficulties with social awareness, reasoning, understanding and/or expressing thought.</li> </ul> <p>SEND Support Plan/Plus should be in place and C&amp;YP should be on school's SEND Register.</p>
<p>Range Four (ii)</p> <p>Significant</p>	<p>As above plus:</p> <ul style="list-style-type: none"> <li>Difficulties are so significant that targeted interventions for literacy and numeracy and access to an adapted curriculum is required.</li> <li>Will need access to a personalised curriculum with opportunities for multi-sensory learning.</li> </ul>

<p>FUNDING:</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<ul style="list-style-type: none"> <li>• Significant and persistent difficulties in the acquisition/use of language/literacy/numeracy skills despite regular attendance and high-quality intervention and teaching.</li> <li>• Key language, literacy/and or numeracy skills are well below average.</li> <li>• Difficulty accessing text and/or recording independently.</li> <li>• Significant levels of difficulty in cognitive processing, requiring significant alteration to the pace and delivery of the curriculum.</li> <li>• Difficulties with retaining information and skills.</li> <li>• Needs access to a personalised curriculum with opportunities for multi-sensory learning.</li> <li>• Difficulties will be long term/lifelong and may affect different areas.</li> <li>• Significantly levels of difficulty affect access to curriculum and academic progress.</li> <li>• High levels of support required which include assistive technology.</li> <li>• May require appropriate support during unstructured times such as break/dinner time/after school clubs.</li> <li>• The C&amp;YP may appear to be increasingly socially immature and vulnerable because of difficulties with social awareness, reasoning, understanding and/or expressing thought.</li> <li>• Social skills and behaviour may be affected, and issues of self-esteem and motivation are likely to be present.</li> <li>• will need adult oversight to ensure that they are not vulnerable and at risk of danger to themselves or others.</li> <li>• At risk of vulnerability to outside influences and exploitation.</li> <li>• may be identified as having moderate learning difficulty by an appropriately qualified professional e.g., Educational Psychologist.</li> </ul> <p>SEND Support Plan/SEND Support Plan Plus in place. Consideration of EHC Needs Assessment may be appropriate.</p>
<p>Range Five</p> <p>Severe</p> <p>FUNDING:</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>As above plus:</p> <ul style="list-style-type: none"> <li>• Severe difficulties with cognitive impairment profoundly restricting access to the curriculum and may require specialist provision.</li> <li>• Significant and persistent difficulties in the acquisition/use of language/literacy/numeracy skills, with the curriculum and out of school activities</li> <li>• Difficulties are likely to overlap in more than one area.</li> <li>• The C&amp;YP may appear to be increasingly socially immature and vulnerable because of difficulties with social awareness, reasoning, understanding and/or expressing thought.</li> <li>• Social skills and behaviour may be affected, and issues of self-esteem and motivation are likely to be present.</li> <li>• Will need adult oversight to ensure that they are not vulnerable and at risk of danger to themselves or others.</li> <li>• At risk of vulnerability to outside influences and exploitation.</li> </ul> <p>EHC Needs Assessment underway or EHCP in place.</p>
<p>Range Six</p> <p>Profound</p> <p>FUNDING:</p>	<ul style="list-style-type: none"> <li>• <b>PROFOUND</b> learning needs with other significant barriers to learning e.g., SLCN/Sensory/Physical/Autism.</li> <li>• Profound difficulties with cognitive impairment that profoundly restrict access to the curriculum and require specialist provision.</li> <li>• Profound and persistent difficulties in the acquisition/use of basic language/literacy/numeracy skills</li> <li>• Understanding and engagement of the world around them will have profound impacts on all aspects of daily life – will be a lifelong disability.</li> </ul>



Element 1

+

Element 2

+

Element 3

EHCP in place

## Speech, Language and Communication Needs Descriptors

	<b>Speech, Language and Communication Needs Descriptors</b>
<p>Range One</p> <p>FUNDING:</p> <p>Mild</p> <p>Element 1</p>	<p>SLCN may be an emerging but not yet clearly identified primary area of need; the C&amp;YP has some difficulty with speech, language, or communication.</p> <p>Will present with some/all the difficulties below and these will mildly affect curriculum access and social development.</p> <ul style="list-style-type: none"> <li>Speech is understood by familiar adults but has some immaturities, which may impact on social interaction and the acquisition of phonics. Speech sound difficulties may impact on literacy difficulties.</li> <li>Difficulties with listening and attention that affect task engagement and independent learning.</li> <li>Comments and questions indicate difficulties in understanding the main points of discussion, information, explanations, and the C&amp;YP needs some support with listening and responding.</li> <li>Difficulties in the understanding of language for learning (conceptual language; size, time, shape, position)</li> <li>Reduced vocabulary, both expressive and receptive.</li> <li>may rely on simple phrases with everyday vocabulary.</li> <li>Social interaction could be limited and there may be some difficulty in making and maintaining friendships.</li> <li>Make present with difficulty in talking fluently e.g., adults may observe repeated sounds, words, or phrases, if this is consistent higher levels of need may be present.</li> <li>Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement.</li> <li>May present with some selective mutism but speaks in most social situations and settings.</li> </ul>
<p>Range Two</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<p>SLCN is identified as the primary area of need; the C&amp;YP has some difficulty with speech, language, or communication.</p> <p>Will present with some/all the difficulties below and these will <b>mildly-moderately</b> affect curriculum access and social development.</p> <ul style="list-style-type: none"> <li>Speech is usually understood by familiar adults; unfamiliar people may not be able to understand what the C&amp;YP is saying if out of context, which may impact on social interaction and the acquisition of literacy.</li> <li>Difficulties with listening and attention that affect task engagement and independent learning.</li> <li>Comments and questions indicate difficulties in understanding the main points of discussion, information, explanations.</li> <li>needs some support with listening and responding.</li> <li>Difficulties in the understanding of language for learning (conceptual language; size, time, shape, position)</li> <li>Reduced vocabulary, both expressive and receptive.</li> <li>May rely on simple phrases with everyday vocabulary.</li> <li>May rely heavily on Non-Verbal Communication to complete tasks (adult's gestures, copying peers) and this may mask comprehension weaknesses.</li> <li>Social interaction could be limited and there may be some difficulty in making and maintaining friendships.</li> <li>Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement.</li> <li>is likely to present with difficulty in talking fluently e.g., adults may observe repeated sounds, words, or phrases more consistently.</li> <li>May present with selective mutism. C&amp;YP does not speak in some social situations and this pattern of avoidance is consistent.</li> </ul>

	School to consider whether C&YP needs to be on SEND Register and the initiation of a SEND Support Plan.
<p>Range Three</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<p>SLCN will be identified as the primary area of need with the nature of the difficulty clarified from observations and assessments by school, specialist education professionals and health professionals.</p> <p>Will present with some/all the difficulties below and these will <b>moderately</b> affect curriculum access and social development.</p> <ul style="list-style-type: none"> <li>• Persistent delay against age related speech, language, and communication expectations.</li> <li>• Persistent difficulties that do not follow a normal developmental pattern (disordered).</li> </ul> <p>School to consider implementing a SEND Support Plan or SEND Support Plan Plus.</p> <p>Receptive</p> <ul style="list-style-type: none"> <li>• Difficulties in accessing the curriculum; following instructions, answering questions, processing verbal information, following everyday conversations.</li> <li>• Needs regular and planned additional support and resources.</li> <li>• Difficulties with listening and attention that affect task engagement and independent learning.</li> <li>• May not be able to focus attention for sustained periods.</li> <li>• May appear passive or distracted.</li> <li>• Difficulties with sequencing, predicting, and inference within both social and academic contexts. This may impact on behaviour and responses in everyday situations e.g., not understanding the consequences of an action.</li> </ul> <p>Expressive</p> <ul style="list-style-type: none"> <li>• The C&amp;YP may have difficulty speaking in age-appropriate sentence and the vocabulary range is reduced. This will also be evident in written work – sometimes C&amp;YP can write well but not speak well.</li> <li>• Talking may not be fluent.</li> <li>• May have difficulties in recounting events in written or spoken narrative.</li> </ul> <p>Speech</p> <ul style="list-style-type: none"> <li>• Speech may not be understood by others.</li> <li>• Difficulty in conveying meaning, feelings and needs to others due to speech intelligibility.</li> <li>• Speech sound difficulties may impact on literacy development.</li> <li>• Speech sound difficulty may lead to limited opportunities to interact with peers.</li> <li>• May be socially vulnerable as a result, may become isolated or frustrated.</li> </ul> <p>Fluency</p> <ul style="list-style-type: none"> <li>• C&amp;YP is likely to present with difficulty in talking fluently e.g., adults may observe repeated sounds, words, or phrases consistently.</li> <li>• Avoidance and frustration may be present.</li> <li>• Frequent stammering.</li> <li>• Secondary characteristics may be seen such as eye blinking, facial tension.</li> </ul> <p>Social Communication</p>

	<ul style="list-style-type: none"> <li>• Difficulties with speech and/or language mean that social situations present challenges resulting in emotional outbursts, anxiety, social isolation, and social vulnerability.</li> <li>• Difficulties with using and understanding non-verbal communication (NVC) such as facial expressions, tone of voice and gestures.</li> <li>• Poor understanding of abstract language and verbal reasoning skills needed for problem solving, inferring, and understanding the feelings of others.</li> <li>• Anxiety related to lack of understanding of time and inference. Needs reassurance and forewarning of changes to routine or when encountering new situations/experiences.</li> </ul> <p>Selective Mutism</p> <ul style="list-style-type: none"> <li>• Does not speak in most social situations.</li> <li>• Speaks to a restricted number of people in a small range of settings.</li> <li>• Obvious signs of anxiety may be present.</li> </ul> <p>SEND Support Plan should be in place and C&amp;YP should be on school's SEND Register.</p>
<p>Range 4i</p> <p>Significantly</p> <p>FUNDING</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>SLCN will be identified as the primary area of need with the nature of the difficulty clarified from observations and assessments by school, specialist education professionals and health professionals.</p> <p>Will present with some/all the difficulties as described at Range 3 and these will <i>significantly</i> affect curriculum access and social development.</p> <ul style="list-style-type: none"> <li>• Could communicate or benefit from communicating using alternative augmentative communication (AAC).</li> <li>• Some or all aspects of language acquisition are significantly below age expected levels.</li> <li>• Significant speech sound difficulties making speech difficult to understand out of context.</li> <li>• Must have an identified Speech, Language and/or Communication Delay/Disorder identified by a Speech and Language Therapist.</li> </ul> <p>The main categories are:</p> <ul style="list-style-type: none"> <li>• Understanding and/or using language</li> <li>• Speech Sound development</li> <li>• Social interaction</li> <li>• Fluency</li> <li>• Selective mutism</li> </ul> <ul style="list-style-type: none"> <li>• School to implement a SEND Support Plan Plus (if other services are involved).</li> </ul> <p>Identification.</p> <ul style="list-style-type: none"> <li>• C&amp;YP with DLD and/or speech delay/disorder often have associated social and communication difficulties.</li> <li>• C&amp;YP with DLD and/or speech delay/disorder have difficulties with literacy associated with writing fluency, reading comprehension and spelling.</li> <li>• C&amp;YP may have behavioural, emotional, and social difficulties which impact on everyday interactions and learning.</li> <li>• Difficulties may impact in known and familiar contexts and with familiar support/people available.</li> </ul> <p>SEND Support Plan/Plus should be in place and C&amp;Y should be on school's SEND Register.</p>

Range 4ii	SLCN is identified as the primary area of need with the nature of the difficulty established and clarified from observations and assessments by school, specialist education professionals and health professionals.
Significantly	Will present with some/all the difficulties as described at Range 3 and these will <i>significantly</i> affect curriculum access and social development.
FUNDING	<ul style="list-style-type: none"> <li>• Could communicate or benefit from communicating using AAC.</li> <li>• Some or all aspects of language acquisition are significantly below age expected levels.</li> </ul>
Element 1	<ul style="list-style-type: none"> <li>• Significant speech sound difficulties making speech difficult to understand out of context.</li> </ul>
+	<ul style="list-style-type: none"> <li>• Must have a diagnosis of Development Language Disorder (DLD) and/or speech delay/disorder.</li> </ul>
Element 2	<ul style="list-style-type: none"> <li>• Must have an identified Speech, Language and/or Communication Delay/Disorder identified by a Speech and Language Therapist.</li> </ul>
+	
Element 3	<ul style="list-style-type: none"> <li>• School to implement a SEND Support Plan Plus (if other services are involved) and consider a request for an Education Health and Care Needs Assessment (EHCNA) if impacting on other areas of development.</li> </ul>
	<p>The main categories are:</p> <ul style="list-style-type: none"> <li>• Understanding and/or using language</li> <li>• Speech Sound development</li> <li>• Social interaction</li> <li>• Fluency</li> <li>• Selective mutism</li> </ul>
	<p>Identification</p> <ul style="list-style-type: none"> <li>• C&amp;YP with DLD and/or speech delay/disorder often have associated social and communication difficulties.</li> <li>• C&amp;YP with DLD and/or speech delay/disorder have difficulties with literacy associated with writing fluency, reading comprehension and spelling.</li> <li>• C&amp;YP may have behavioural, emotional, and social difficulties which impact on everyday interactions and learning.</li> <li>• Difficulties will impact in known and familiar contexts and with familiar support/people available.</li> </ul>
	<p>SEND Support Plan/SEND Support Plan Plus in place. Consideration of EHC Needs Assessment may be appropriate.</p>

# Communication and Interaction/Autism Descriptors

<p>Range 1</p> <p>Mild</p> <p>Element 1</p>	<ul style="list-style-type: none"> <li>Will have communication and interaction needs that may <b>mildly</b> affect their access to some aspects of the National curriculum, including the social emotional curriculum and school life.</li> <li>May or may not have a diagnosis of Autism made by an appropriate multi-agency team.</li> <li>May or may not have low sensory needs.</li> </ul>
<p>Range 2</p> <p>Mild - Moderate</p> <p>FUNDING:</p> <p>Element 1</p>	<ul style="list-style-type: none"> <li>Will have communication and interaction needs that may affect <b>mildly/moderately</b> their access to some aspects of the National curriculum, including the social emotional curriculum and school life.</li> <li>May or may not have a diagnosis of Autism made by an appropriate multi-agency team.</li> <li>May or may not have mild-moderate sensory needs.</li> </ul> <p>School to consider whether C&amp;YP needs to be on the SEND Register and the initiation of a SEND Support Plan.</p>
<p>Range 3</p> <p>Moderate</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<ul style="list-style-type: none"> <li>C&amp;YP at range 3 will have communication and interaction needs identified by the range descriptors that <b>moderately</b> affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life. This is especially true in new and unfamiliar contexts.</li> <li>The pervasive nature of the Autism/ C&amp;I needs is likely to have a detrimental effect on the acquisition, retention, and generalization of skills and therefore, on the result of any assessment.</li> <li>May or may not have a diagnosis of Autism made by an appropriate multi-agency team.</li> <li>May or may not have moderate sensory needs.</li> </ul> <p>SEND Support Plan should be in place and C&amp;YP should be on school's SEND Register.</p>
<p>Range 4i</p> <p>Significant</p> <p>FUNDING:</p> <p>Element 1 + Element 2 + Element 3</p>	<p>C&amp;YP at range 4i will have communication and interaction needs identified by the range descriptors that <b>significantly</b> affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life. This is especially true in new and unfamiliar contexts but will also affect access at times of high stress in some known and familiar contexts and with familiar support/people available.</p> <ul style="list-style-type: none"> <li>The pervasive nature of the Autism/ C&amp;I needs is likely to have a detrimental effect on the acquisition, retention, and generalization of skills and therefore on the result of any assessment.</li> <li>May have an uneven learning profile, but their attainment levels suggest they can access an adapted mainstream curriculum.</li> <li>May or may not have a diagnosis of Autism by an appropriate multi-agency diagnostic team.</li> <li>May or may not have significant sensory needs.</li> </ul> <p>SEND Support Plan/SEND Support Plan Plus should be in place and C&amp;YP should be on the school's SEND Register.</p>

<p>Range 4ii</p> <p>Significant</p> <p>FUNDING:</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>C&amp;YP at range 4ii will have communication and interaction needs identified by the range descriptors that <b>significantly</b> affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available.</p> <ul style="list-style-type: none"> <li>• The pervasive nature of the Autism/ C&amp;I needs is likely to have a detrimental effect on the acquisition, retention, and generalization of skills and therefore on the result of any assessment.</li> <li>• will have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum.</li> <li>• may require significantly more support than is normally provided in a mainstream setting.</li> <li>• may have significant sensory needs.</li> <li>• A referral should be considered for neuroassessment, or C&amp;YP have a diagnosis of Autism.</li> </ul> <p>SEND Support Plan/SEND Support Plan Plus in place. Consideration of EHC Needs Assessment may be appropriate.</p>
<p>Range 5</p> <p>Severe</p> <p>FUNDING:</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>C&amp;YP at range 5 will have communication and interaction needs identified by the range descriptors that <b>severely</b> affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available.</p> <p>The pervasive nature of the Autism/ C&amp;I needs is likely to have a detrimental effect on the acquisition, retention, and generalization of skills and therefore on the result of any assessment.</p> <p>C&amp;YP and young people at range 5 may be in the following settings:</p> <p>Mainstream/Additional Resourced Bases (ARP)</p> <ul style="list-style-type: none"> <li>• has an uneven learning profile, but their attainment levels suggest they can access an adapted mainstream curriculum.</li> <li>• will require significantly more support than is normally provided in a mainstream setting.</li> <li>• within an ARP should be considered for neuroassessment or have a diagnosis of Autism.</li> <li>• may need access to a low stimulus environment where there are reduced sensory demands.</li> <li>• may have severe sensory needs.</li> <li>• If C&amp;YP requires ARP provision, an EHCP must be in place.</li> </ul> <p>Special – in some cases.</p> <ul style="list-style-type: none"> <li>• Attainment profile is well below expected NC levels or may need substantial adaptation to their learning environment throughout the day.</li> <li>• should be considered for neuroassessment or have a diagnosis of Autism.</li> </ul> <p>EHC Needs Assessment underway or EHCP in place.</p>
<p>Range 6</p> <p>Profound</p> <p>FUNDING:</p>	<p>C&amp;YP at range 6 will have communication and interaction needs identified by the range descriptors that <b>profoundly</b> affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available.</p> <ul style="list-style-type: none"> <li>• will need access to a low stimulus environment where there are reduced sensory demands.</li> </ul>

Mainstream Element 1 + Element 2 + Element 3	<ul style="list-style-type: none"><li>• The pervasive nature of Autism/ C&amp;I needs is likely to have a detrimental effect on the acquisition, retention, and generalization of skills and therefore on the result of any assessment.</li><li>• Complex needs identified.</li></ul> <p>EHCP in place.</p>
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## Social, Emotional & Mental Health Descriptors

<p>Range 1</p> <p>MILD</p> <p>FUNDING:</p> <p>Element 1</p>	<p>Despite quality first teaching, C&amp;YP will have been identified as presenting with mild features of social, emotional, and mental health need.</p> <p>Social</p> <ul style="list-style-type: none"> <li>• May appear isolated.</li> <li>• Not yet making and maintaining age-appropriate friendship.</li> <li>• Lack some expected awareness of social and school expectations i.e., speaking out during input sessions.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• May present as isolated from peers.</li> <li>• Withdrawn.</li> <li>• Tearful at times</li> <li>• Low self-esteem</li> </ul> <p>Mental health</p> <ul style="list-style-type: none"> <li>• They may show signs of stress and anxiety and/or difficulties managing emotions on occasions.</li> <li>• May show some indications of reluctance to join in/participate or occasionally attend school.</li> </ul>
<p>Range 2</p> <p>Mild - Moderate</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<p>Despite intervention at range 1 SEMH needs continue to present a mild to moderate barrier to learning and coping with school expectations. School is regularly applying their own behaviour policies along with strategies as identified within their SEND Support Plan, but these are not having a positive impact.</p> <p>Social</p> <ul style="list-style-type: none"> <li>• may prefer own agenda and not able to follow instructions consistently.</li> <li>• is not yet able to maintain appropriate friendships and resolve conflict.</li> <li>• Yet to develop flexibility in understanding other's point of views.</li> <li>• has tendency to dominate play.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• May show patterns of stress/anxiety related to specific events in the day.</li> <li>• May have become socially and emotionally vulnerable, withdrawn, isolated, and unpredictable patterns of behaviour may be beginning to emerge.</li> <li>• Continues to have difficulties managing their strong feelings e.g., emotional outbursts, hyperactivity, impulsivity.</li> <li>• Reliance on adults for reassurance.</li> </ul> <p>Mental Health</p> <ul style="list-style-type: none"> <li>• Fearful and anxious in new situations.</li> <li>• Emergence of coping strategies such as self-harming such scratching, nail biting.</li> <li>• Indications of difficulty with sleep.</li> <li>• Starting to show patterns of absence from school relating to anxiety.</li> <li>• Increasing avoidance of lessons during the school day.</li> </ul>

	School to consider whether C&YP needs to be on the SEND Register and the initiation of a SEND Support Plan.
<p>Range 3</p> <p>Moderate</p> <p>FUNDING:</p> <p>Element 1 + Element 2</p>	<p>Despite intervention at range 2, SEMH needs continue to present moderate barrier to learning and coping with school expectations. School is regularly applying their own behaviour policies along with strategies as identified within their SEND Support Plan, but these are not having a positive impact.</p> <p>Social</p> <ul style="list-style-type: none"> <li>• Positive engagement with people and learning are increasingly infrequent.</li> <li>• Frequency of social conflict is increasing – physical/verbal aggressions, making threats.</li> <li>• Vulnerability to exploitation and bullying.</li> <li>• has yet to develop age-appropriate level of social resilience when faced with difficult situations.</li> <li>• Persistent in pursuing their own agenda and dominating interactions from their own perspective.</li> <li>• C&amp;YP has begun to receive suspensions in schools.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• shows regular patterns of stress/anxiety.</li> <li>• remains socially and emotionally vulnerable, withdrawn, isolated.</li> <li>• presents with inappropriate behaviour regularly.</li> <li>• Social and emotional gaps are widening between them and their peers particularly approaching transitional key stages.</li> <li>• continues to have difficulties managing their strong feelings e.g., excessive periods of anxiety, mood swings, unpredictable behaviour which affects their relationships.</li> <li>• Increased reliance on adults for reassurance.</li> <li>• Necessary involvement of outside agencies such as CAMHS.</li> </ul> <p>Mental Health</p> <p>C&amp;YP may present odd or unusual behaviours relating to emotional management such as:</p> <ul style="list-style-type: none"> <li>• Consistently heightened fear and/or anxiety which affects ability to self-regulate.</li> <li>• Deliberate self-harming.</li> <li>• Soiling.</li> <li>• Emergence of repetitive behaviours such as hand washing.</li> <li>• Indications of difficulty with sleep.</li> <li>• Noticeable over/under eating.</li> <li>• May be persistently absent from school – patterns of non-attendance may be emerging.</li> </ul> <p>C&amp;YP should be on SEND register and a SEN Support Plan/SEND Support Plan Plus in place.</p>
<p>Range 4i</p> <p>Significant</p> <p>FUNDING:</p> <p>Element 1 +</p>	<p>Despite intervention at range 3, SEMH needs continue to present significant barrier to learning and coping with school expectations.</p> <p>C&amp;YP continues to present with significant and persistent levels of behaviour, emotional, social difficulties which are now more complex and multi-agency collaboration is underway which would be typically evidenced over at least two terms.</p> <p>C&amp;YP is presenting with SEMH needs that require an individualised response from adults in school which should be evidenced within a SEND Support Plan/SEND Support Plan Plus. Schools must actively encourage parent/carers to be involved in the collaboratively process of implementing the SEND Support Plan/SEND Support Plan Plus.</p> <ul style="list-style-type: none"> <li>• The strategies to support and meet C&amp;YP's needs are over and above those reasonably expected and additional support may be required.</li> </ul>

<p>Element 2 + Element 3</p>	<ul style="list-style-type: none"> <li>• Despite proactive school interventions and support from external support from other services, C&amp;YP continues to receive suspensions and could be at risk of permanent exclusion.</li> <li>• C&amp;YP's ability to independently manage and respond to learning is limited to contexts where they may require adult support.</li> <li>• Communication of need may be presenting in extreme forms which may present as a risk towards self, property, or others.</li> </ul> <p>The C&amp;YP continues to present with the following:</p> <p>Social</p> <ul style="list-style-type: none"> <li>• Positive engagement with people and learning are increasingly infrequent.</li> <li>• Frequency of social conflict is increasing – physical/verbal aggressions, making threats.</li> <li>• Vulnerability to exploitation and bullying.</li> <li>• Yet to develop age-appropriate level of social resilience when faced with difficult situations.</li> <li>• Persistent in pursuing their own agenda and dominating interactions from their own perspective.</li> <li>• has begun to receive suspensions in schools.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• shows regular patterns of stress/anxiety.</li> <li>• remains socially and emotionally vulnerable, withdrawn, isolated.</li> <li>• presents with inappropriate behaviour regularly.</li> <li>• Social and emotional gaps are widening between them and their peers particularly approaching transitional key stages.</li> <li>• continues to have difficulties managing their strong feelings e.g., excessive periods of anxiety, mood swings, unpredictable behaviour which affects their relationships.</li> <li>• Increased reliance on adults for reassurance.</li> <li>• Necessary involvement of outside agencies such as CAMHS.</li> </ul> <p>Mental Health</p> <p>C&amp;YP may present odd or unusual behaviours relating to emotional management such as:</p> <ul style="list-style-type: none"> <li>• Consistently heightened fear and/or anxiety which affects ability to self-regulate.</li> <li>• Deliberate self-harming.</li> <li>• Emergence of repetitive behaviours such as hand washing.</li> <li>• Indications of difficulty with sleep.</li> <li>• Noticeable over/under eating.</li> <li>• May be persistently absent from school – patterns of non-attendance may be emerging.</li> </ul> <p>SEN Support Plan/SEND Support Plan Plus in place and C&amp;YP should be on school's SEND Register.</p>
<p>Range 4ii</p> <p>Significant</p> <p>FUNDING:</p> <p>Element 1</p>	<p>Despite intervention at range 4i, SEMH needs continue to present a significant barrier to learning and coping with school expectations.</p> <p>C&amp;YP continues to present with significant and persistent levels of social, emotional, mental health difficulties which are now more complex. Multi-agency collaboration is underway to be typically evidenced over at least two terms.</p> <p>C&amp;YP is presenting with SEMH needs that require an individualised response from adults in school which should be evidenced within a SEND Support Plan/SEND Support Plan Plus. This</p>

<p>+ Element 2</p> <p>+ Element 3</p>	<p>must include evidence that the intervention provided by external services has been incorporated within the coconstructed plan. Schools must actively encourage parent/carers to be involved in the collaboratively process of implementing the SEND Support Plan/SEND Support Plan Plus.</p> <ul style="list-style-type: none"> <li>• The strategies to support and meet C&amp;YP's needs are over and above those reasonably expected and additional support is required.</li> <li>• Despite proactive school interventions and support from external services, C&amp;YP continues to receive suspensions and is at risk of permanent exclusion.</li> <li>• C&amp;YP's ability to independently manage and respond to learning is limited to contexts where they will require adult support for increased periods of the school day.</li> <li>• Communication of need will be presenting in extreme forms which may present as a risk towards self, property, or others.</li> <li>• Increasing concerns around mental health and self-harming behaviours.</li> </ul> <p>The C&amp;YP continues to present with the following:</p> <p>Social</p> <ul style="list-style-type: none"> <li>• Positive engagement with people and learning are increasingly infrequent.</li> <li>• Frequency of social conflict is increasing – physical/verbal aggressions, making threats.</li> <li>• Vulnerability to exploitation and bullying.</li> <li>• Yet to develop age-appropriate level of social resilience when faced with difficult situations.</li> <li>• Persistent in pursuing their own agenda and dominating interactions from their own perspective.</li> <li>• Has received suspensions in schools.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• shows regular patterns of stress/anxiety.</li> <li>• remains socially and emotionally vulnerable, withdrawn, isolated.</li> <li>• presents with inappropriate behaviour regularly.</li> <li>• Social and emotional gaps are widening between them and their peers particularly approaching transitional key stages.</li> <li>• continues to have difficulties managing their strong feelings e.g., excessive periods of anxiety, mood swings, unpredictable behaviour which affects their relationships.</li> <li>• Increased reliance on adults for reassurance.</li> <li>• Necessary involvement of outside agencies such as CAMHS.</li> </ul> <p>Mental Health</p> <p>C&amp;YP may present odd or unusual behaviours relating to emotional management such as:</p> <ul style="list-style-type: none"> <li>• Consistently heightened fear and/or anxiety which affects ability to self-regulate.</li> <li>• Deliberate self-harming.</li> <li>• Emergence of repetitive behaviours such as hand washing.</li> <li>• Indications of difficulty with sleep.</li> <li>• Noticeable over/under eating.</li> <li>• May be persistently absent from school – patterns of non-attendance may be emerging.</li> </ul> <p>SEN Support Plan/SEND Support Plan Plus in place. Consideration of EHC Needs Assessment may be appropriate.</p>
<p>Range 5</p> <p>Severe</p>	<p>Despite proactive school interventions and support from external services having been implemented and reviewed, the C&amp;YP is experiencing severe, complex, frequent, and persistent SEMH needs. An accumulation of layers, which may include mental health, challenged</p>

<p>FUNDING:</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>relationships, a sense of disconnect with learning, language and communication difficulties may be observed. Provision outside the mainstream environment could be considered.</p> <p>C&amp;YP is presenting with SEMH needs that require an individualised response from adults in school which should be evidenced within a SEND Support Plan/Plus or EHCP. This must include evidence that the intervention provided by external services has been incorporated within the co-constructed plan. Schools must actively encourage parent/carers to be involved in the collaboratively process.</p> <ul style="list-style-type: none"> <li>• The strategies to support and meet C&amp;YP's needs are over and above those reasonably expected.</li> <li>• Alternative provision may have been considered and/or implemented but positive impact is yet to be achieved.</li> <li>• continues to receive suspensions and is at risk of permanent exclusion.</li> <li>• ability to independently manage and respond to learning is limited to contexts where they will require adult support for increased periods of the school day.</li> <li>• Communication of need will be presenting in extreme forms which may present as a risk towards self, property, or others.</li> <li>• Increasing concerns around mental health and self-harming behaviours.</li> </ul> <p>The C&amp;YP continues to present with the following as in range 4i/ii:</p> <p>Social</p> <ul style="list-style-type: none"> <li>• Positive engagement with people and learning are increasingly infrequent.</li> <li>• Frequency of social conflict is increasing – physical/verbal aggressions, making threats.</li> <li>• Vulnerability to criminal activity, exploitation and/or bullying.</li> <li>• Levels of aggression pose serious risk to self and others.</li> <li>• C&amp;YP has yet to develop age-appropriate level of social resilience when faced with difficult situations.</li> <li>• Persistent in pursuing their own agenda and dominating interactions from their own perspective.</li> </ul> <p>Emotional</p> <ul style="list-style-type: none"> <li>• shows regular patterns of stress/anxiety.</li> <li>• remains socially and emotionally vulnerable, withdrawn, isolated.</li> <li>• presentation is rarely within socially expected norms.</li> <li>• Social and emotional gaps are widening between them and their peers particularly approaching transitional key stages.</li> <li>• continues to have difficulties managing their strong feelings e.g., excessive periods of anxiety, mood swings, unpredictable behaviour which affects their relationships.</li> <li>• Increased reliance on adults for reassurance.</li> <li>• Necessary involvement of outside agencies such as CAMHS.</li> </ul> <p>Mental Health</p> <p>C&amp;YP may present odd or unusual behaviours relating to emotional management such as:</p> <ul style="list-style-type: none"> <li>• Consistently heightened fear and/or anxiety which affects ability to self-regulate.</li> <li>• Deliberate self-harming.</li> <li>• Emergence of repetitive behaviours such as hand washing.</li> <li>• Indications of difficulty with sleep.</li> <li>• Noticeable over/under eating.</li> <li>• May be persistently absent from school with patterns of non-attendance emerging.</li> </ul> <p>EHC Needs Assessment is underway or EHCP in place.</p>
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<p>Range 6</p> <p>Profound</p> <p>FUNDING:</p> <p>Element 1 + Element 2 + Element 3</p>	<p>The C&amp;YP is experiencing severe, complex, frequent, and persistent SEMH needs with an accumulation of layers, which include mental health, relationships, increased sense of disconnection with learning, language, and communication difficulties. Severe and increasing behavioural difficulties, often compounded by additional needs, and requiring provision outside the mainstream environment, including:</p> <p>Continuing profound and increasing behavioural difficulties, often compounded by additional needs, and requiring continued provision outside the mainstream environment, including:</p> <ul style="list-style-type: none"> <li>• The C&amp;YP experiences complex, frequent and persistent SEMH needs.</li> <li>• The C&amp;YP's behaviour is unpredictable and dangerous, with intense episodes of emotional and/ or challenging behaviour, high levels of anxiety making daily life extremely difficult and severely disrupting the learning of self and others.</li> <li>• SEMH needs may be compounded by co-existing difficulties.</li> <li>• The C&amp;YP is extremely vulnerable and there are safeguarding issues to consider due to acute levels of mental health concerns and increased risk-taking behaviours or 'sabotage' of situations/placements.</li> <li>• Self-harm and/or suicide ideation.</li> </ul> <p>A multi-agency approach, including educational and non-educational professionals, is essential.</p> <p>EHCP in place.</p>
<p>Range 7</p> <p>FUNDING:</p> <p>Element 1 + Element 2 + Element 3</p>	<p>C&amp;YPs experience many or all the above but within a non-maintained educational or residential placement (Out of Area). This may include provision for identified Health and Social Care needs, including therapeutic input from specialists. Cases will be known to the Local Authority and subject to joint commissioning arrangements via Joint Panel.</p> <p>Continued long term and complex behavioural, emotional, and social difficulties, necessitating a continued multi-agency response coordinated as annual, interim, or emergency SEND review and met in specialist provision.</p>

## Hearing Impairment Descriptors

Range 1 - Mild	<ul style="list-style-type: none"> <li>• Local Authority assessment (STARS) may be carried out at the request of Audiology/ENT to support decisions.</li> <li>• This is likely to include C&amp;YP with a mild or unilateral loss which may be temporary/fluctuating conductive or permanence sensorineural but who can manage well with reasonable adjustments and are subsequently not aided.</li> <li>• Unilateral/bilateral minimal average &lt;20dBHL or mild – aiding not appropriate.</li> <li>• Nat SIP eligibility score 0 to 24</li> </ul>
Range 2 – Mild - Moderate	<ul style="list-style-type: none"> <li>• Hearing loss:               <ul style="list-style-type: none"> <li>○ aid able chronic conductive,</li> <li>○ bilateral aid able minimal or mild</li> <li>○ moderate permanent unilateral</li> </ul> </li> <li>• May have hearing aids.</li> <li>• Moderate difficulty with listening, attention, concentration, speech, language, and class participation</li> <li>• Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder</li> <li>• Nat SIP eligibility score 25-39</li> </ul>
Range 3 - Moderate	<ul style="list-style-type: none"> <li>• Aided chronic conductive, or bilateral moderate permanent hearing loss.</li> <li>• Will have hearing aids and could have radio aid.</li> <li>• Will have moderate difficulty accessing spoken language, likely language delay.</li> <li>• May have difficulty with listening, attention, concentration, and class participation.</li> <li>• May have Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder</li> <li>• Nat SIP eligibility score 40-49</li> </ul>
Range 4i - Significant	<ul style="list-style-type: none"> <li>• Bilateral moderate or severe permanent hearing loss with no additional learning difficulties</li> <li>• Severe difficulty accessing spoken language and therefore the curriculum.</li> <li>• May have additional language delay associated with hearing loss.</li> <li>• Will have Hearing aids and may have radio aid.</li> <li>• Speech clarity likely to be significantly affected.</li> <li>• Difficulties with attention, concentration, confidence, and class participation.</li> <li>• Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder.</li> <li>• Nat SIP eligibility score 0-74.</li> </ul>
Range 4ii  Significant	<ul style="list-style-type: none"> <li>• Bilateral moderate/severe or severe/profound permanent hearing loss</li> <li>• May have additional language/learning difficulties associated with hearing loss.</li> <li>• Will have hearing aids and radio aid or cochlear implant.</li> <li>• Profound difficulty accessing spoken language and therefore the curriculum.</li> <li>• Speech clarity will be significantly affected.</li> <li>• Severe difficulties with attention, concentration, confidence, and class participation</li> <li>• Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder</li> <li>• Nat SIP eligibility score 50-74</li> </ul>

<p>Range 5</p> <p>Severe</p>	<ul style="list-style-type: none"> <li>• Bilateral moderate/severe/profound permanent hearing loss</li> <li>• Additional language/learning difficulties associated with hearing loss.</li> <li>• British Sign Language (BSL) or Signs to Support English (SSE) will be needed for effective communication.</li> <li>• Will have hearing aids/cochlear implants and a radio aid.</li> <li>• Profound difficulty accessing spoken language and therefore the curriculum without specialist intervention.</li> <li>• Speech clarity will be profoundly affected.</li> <li>• Will have significant difficulties with attention, concentration, confidence, and class participation.</li> <li>• Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder</li> <li>• Profound language delay and communication difficulties which may prevent the development of appropriate social and emotional health.</li> <li>• Nat SIP eligibility score 75+</li> </ul>
<p>Range 6 - Profound</p>	<ul style="list-style-type: none"> <li>• Bilateral moderate/severe/profound permanent hearing loss</li> <li>• Profound language/learning difficulties associated with hearing loss.</li> <li>• Additional difficulties and learning need not associated with hearing loss.</li> <li>• May have BSL/SSE or augmentative communication needed for effective communication.</li> <li>• Will have hearing aids/cochlear implants and a radio aid.</li> <li>• Profound difficulty accessing spoken language and therefore the curriculum.</li> <li>• Speech clarity will be profoundly affected.</li> <li>• Difficulty with attention, concentration, confidence, and class participation</li> <li>• Auditory Processing Disorder/Auditory Neuropathy Spectrum Disorder</li> <li>• Profound language delay and communication difficulties which prevent the development of appropriate social and emotional health.</li> <li>• Additional SEMH difficulties or learning needs not associated with hearing loss.</li> <li>• Nat SIP eligibility score 75+</li> </ul>



# Visual Impairment Descriptors

<p>Range 1</p> <p>Mild</p>	<p>Mild Visual Impairment</p> <ul style="list-style-type: none"> <li>• find concentration difficult.</li> <li>• peer or screw up eyes.</li> <li>• Distance vision approximately 6/18. This means that the C&amp;YP needs to be about 2 metres away to see what fully sighted C&amp;YP can see from 6 metres.</li> <li>• Can probably see details on a whiteboard from the front of a classroom, as well as others can see from the back of the room.</li> </ul> <p>Near vision: likely to have difficulty with print sizes smaller than 12 point or equivalent sized details in pictures.</p> <ul style="list-style-type: none"> <li>• who have nystagmus may be within this range or subsequent ranges depending on what their visual acuity is at worst. C&amp;YP who have nystagmus have fluctuating vision. Their vision can worsen if they are tired, upset, angry, worried, or unwell. It is likely their vision will worsen in unfamiliar places. They may struggle with depth perception and may find unfamiliar steps difficult or be cautious if the ground is uneven.</li> </ul>
<p>Range 2</p> <p>Mild-Moderate</p>	<p>Moderate Visual Impairment</p> <ul style="list-style-type: none"> <li>• find concentration difficult.</li> <li>• peer or screw up eyes.</li> <li>• move closer when looking at books or notice boards.</li> <li>• make frequent “copying” mistakes.</li> <li>• Distance vision: approximately 6/24. This means that the C&amp;YP needs to be about 1.5 metres away to see what fully sighted C&amp;YP can see from 6 metres.</li> <li>• Will not be able to see details on a white board from the front of classroom as well as others can see from the back.</li> </ul> <p>Near vision: likely to have difficulty with print sizes smaller than 14 point or equivalent sized details in pictures</p> <p>School to consider whether C&amp;YP needs to be on SEND Register and the initiation of a SEND Plan.</p>
<p>Range 3</p> <p>Moderate</p>	<p>Moderate to Significant Visual Impairment</p> <ul style="list-style-type: none"> <li>• will find concentration difficult.</li> <li>• will peer or screw up eyes.</li> <li>• will move closer when looking at books or notice boards.</li> <li>• will make frequent “copying” mistakes.</li> <li>• will have poor hand - eye coordination.</li> <li>• will have a slow work rate.</li> <li>• Distance vision: approximately 6/36. This means that the C&amp;YP needs to be about 1 metre away to see what fully sighted C&amp;YP can see from 6 metres.</li> <li>• Will not be able to see details on a white board without approaching to within 1 metre of it.</li> <li>• Near vision: likely to have difficulty with print sizes smaller than 18 point or equivalent sized details in pictures.</li> <li>• may have Cerebral Visual Impairment (CVI) – these C&amp;YP have normal or near normal visual acuities but will display moderate to significant visual processing difficulties.</li> </ul> <p>SEND Support Plan should be in place and C&amp;YP should be on school’s SEND Register.</p>
<p>Range 4i</p>	<p>Severe Visual Impairment</p>

<p>Significant</p>	<ul style="list-style-type: none"> <li>likely to be registered severely sighted/Visually Impaired or blind but still learning by sighted means.</li> <li>Distance vision: 6/36 or 6/60 or worse. This means that the C&amp;YP can see at 6m what a fully sighted person could see from 60m. It represents a difficulty identifying any distance information, people, or objects.</li> <li>would be unable to work from a white board in the classroom without human/technical support.</li> <li>Near vision: likely to have difficulty with any print smaller than 24 points. Print sizes must be in a range from 24 – 36, and materials will require significant differentiation and modification.</li> </ul> <p>SEND Support Plan/Plus should be in place and C&amp;YP should be on the school's SEND Register.</p>
<p>4ii Significant  Cerebral visual Impairment (CVI)</p>	<p>As above for 4(i)</p> <p>Cerebral Visual Impairment (CVI)</p> <ul style="list-style-type: none"> <li>CVI must be diagnosed by an ophthalmologist. The C&amp;YP will typically have good acuities when tested in familiar situations, but this will vary throughout the day. A key feature of CVI is that vision varies from hour to hour with the C&amp;YP's well-being.</li> <li>All C&amp;YP with CVI will have a different set of difficulties which means thorough assessment is a key aspect. The C&amp;YP has difficulties associated with dorsal processing stream, ventral processing stream or a combination of both.</li> </ul> <p>Dorsal stream difficulties include:</p> <ul style="list-style-type: none"> <li>Difficulties seeing moving objects.</li> <li>Difficulties reading</li> <li>Difficulties doing more than one thing at a time (e.g., looking and listening)</li> </ul> <p>Ventral Stream Difficulties include:</p> <ul style="list-style-type: none"> <li>Inability to recognise familiar faces.</li> <li>Difficulties route finding</li> <li>Difficulties with visual clutter</li> <li>Lower visual field loss</li> </ul> <p>SEND Support Plan/SEND Support Plan Plus in place. Consideration of EHC Needs Assessment may be appropriate.</p>
<p>Range 5 Severe</p>	<ul style="list-style-type: none"> <li>Usually C&amp;YP who have suffered a late onset visual impairment, or where their vision has deteriorated rapidly.</li> <li>who are born with severe visual impairment, who are identified early on as being tactile learners.</li> <li>Some may also be continuing to use print at point 48.</li> <li>Some will be making the transition from print to Braille.</li> <li>These C&amp;YP will usually be registered blind and learning by tactile methods.</li> <li>Some may have little or no useful vision, and very limited or no learning by sighted means.</li> <li>These C&amp;YP will usually be registered blind and learning by tactile methods; they will have little or no useful vision, and very limited or no learning by sighted means.</li> </ul> <p>EHC Needs Assessment is underway or EHCP in place.</p>

Range 6 Profound	<p>As above, and also:</p> <ul style="list-style-type: none"><li>• Severe learning difficulties as a prime need, and who are blind or partially sighted, or have a diagnosis of CVI, as a secondary need</li><li>• Distance vision: difficulty identifying any distance information.</li><li>• Near vision: will have difficulty responding to facial expressions at 50 cm</li></ul> <p>EHCP in place.</p>

<b>Dual Sensory Impairment Descriptors</b>	
Range 3  <b>MODERATE</b>	<ul style="list-style-type: none"> <li><b>MILD</b> loss in both and making good use of at least one modality.</li> <li>May have hearing aids and/or low vision aids (LVAs).</li> <li>Non-progressive condition.</li> <li>May have a slower pace of working but has good compensatory strategies.</li> <li>May have some difficulty with listening, attention, and concentration but language and communication largely match potential given appropriate support.</li> <li>Low level of support needed to manage equipment and aids.</li> <li>May have additional learning needs.</li> <li>May have Auditory Processing Disorder/Auditory Neuropathy/Cerebral Visual Impairment.</li> </ul> <p>SEND Support Plan should be in place and C&amp;Y should be on school's register.</p>
Range 4 (i)  <b>SIGNIFICANT</b>	<ul style="list-style-type: none"> <li><b>MODERATE</b> loss in one modality and <b>MILD/MODERATE</b> in the other.</li> <li>May have hearing aids and/or low vision aids (LVAs).</li> <li>Non-progressive condition.</li> <li>May have additional language/learning needs associated with dual sensory impairment.</li> <li>Likely to have difficulties accessing incidental learning, including signed and verbal communication.</li> <li>May have a slower pace of learning, difficulties with attention, concentration and the development of independence and social skills.</li> <li>May have additional learning needs.</li> <li>May have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment.</li> </ul> <p>SEND Support Plan/Plus should be in place and C&amp;YP should be on the school's SEND register.</p>
Range 5  <b>SEVERE</b>	<ul style="list-style-type: none"> <li><b>SEVERE/PROFOUND</b> loss in one modality and <b>MODERATE</b> in the other or has a late diagnosed or recently acquired MSI.</li> <li>Uses hearing aids and/or low vision aids (LVAs).</li> <li>Non-progressive condition.</li> <li>May have delayed development in some areas of learning and difficulties generalising learning and transferring skills.</li> <li>May have difficulties coping with new experiences and have underdeveloped independence and self-help skills.</li> <li>Likely to have communication difficulties.</li> <li>Significant difficulties accessing incidental learning and the curriculum.</li> <li>Likely to require some individual support to access learning and social interactions and to develop life-skills.</li> <li>Likely to require a tactile approach to learning with access to real objects and context-based learning experiences and/or access to visual or tactile signed communication.</li> <li>Significant difficulties with attention, concentration, confidence, and class participation.</li> <li>Significantly slower pace of learning.</li> <li>May have additional learning needs.</li> <li>May have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment.</li> </ul> <p>EHC Needs Assessment is underway or EHCP in place.</p>
Range 6	<ul style="list-style-type: none"> <li><b>SEVERE/PROFOUND</b> loss in one modality and <b>MODERATE/SEVERE/PROFOUND</b> in the other and/or progressive condition.</li> <li>Likely to use hearing aids and/or LVA's.</li> </ul>

**PROFOUND**

- Severe and complex communication difficulties requiring an individual communication system using alternative and augmentative approaches.
- Require a tactile approach to learning with access to real objects and context-based learning experiences and/or access to visual or tactile signed communication.
- Have severe difficulties generalising learning and transferring skills.
- Difficulties coping with new experiences.
- Have underdeveloped independence and self-help skills requiring support.
- Have difficulties developing relationships and lack social awareness leading to social isolation.
- Likely to require a high level of individual support to access learning and social opportunities and to develop life-skills.
- May display challenging and/or self-injurious behaviour.
- May have additional learning needs.
- May have limited clinical assessment information because of additional complex educational needs.
- May have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment.

EHCP is in place.

## Physical and Medical Descriptors

<p>Range One</p> <p>Mild</p> <p>FUNDING:</p> <p>Mainstream</p> <p>Element 1 £4k</p>	<ul style="list-style-type: none"> <li>• Some mild problems with fine motor skills and recording.</li> <li>• Mild problems with self-help and independence.</li> <li>• Some problems with gross motor skills and coordination often seen in PE.</li> <li>• Some implications for risk assessment e.g., educational visits, high level P.E. or playground equipment.</li> <li>• May have continence/ toileting issues.</li> <li>• Possible low levels of self-esteem associated with physical/medical difficulty.</li> <li>• May have medical condition that impacts on time in school and may require a medical care plan.</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>• An Occupational Therapist may see C&amp;YP at any range due to an open referral system.</li> <li>• It would be anticipated that schools would usually be able to implement first line strategies at this point, based on advice and strategies given in training packages delivered by Occupational Therapy and availability of drop-in sessions/telephone consultations/</li> <li>• A Physiotherapist may intervene with C&amp;YP who have mild physical issues to help develop motor skills prevent further deterioration/reduce impact of conditions/early intervention to achieve more successful outcomes.</li> </ul>
<p>Range Two</p> <p>Mild- Moderate</p> <p>FUNDING:</p> <p>Mainstream</p> <p>Element 1 £4k</p> <p>+</p> <p>Element 2 =</p> <p>£6k</p>	<ul style="list-style-type: none"> <li>• Continuing mild to moderate problems with hand / eye coordination, fine / gross motor skills and recording, impacting on access to curriculum.</li> <li>• Making slow or little progress despite provision of targeted teaching approaches.</li> <li>• May have continuing difficulties with continence/ toileting.</li> <li>• May have continuing problems with self-esteem and peer relationships.</li> <li>• Continuing problems with self-help and independence.</li> <li>• Continuing problems with gross motor skills and coordination often seen in PE.</li> <li>• Some implications for risk assessment e.g., educational visits, high level P.E. or playground equipment.</li> <li>• May have medical condition that impacts on time in school and may require a medical care plan.</li> <li>• May need a SEND Support Plan</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>• An Occupational Therapist may see C&amp;YP at any range due to an open referral system.</li> <li>• It would be anticipated that schools would usually be able to implement first line strategies at this point, based on advice and strategies given in training packages delivered by Occupational Therapy and availability of drop-in sessions/telephone consultations/</li> <li>• A Physiotherapist may intervene with C&amp;YP who have mild physical issues to help develop motor skills prevent further deterioration/reduce impact of conditions/early intervention to achieve more successful outcomes.</li> </ul> <p>School to consider whether C&amp;YP needs to be on SEND Register and the initiation of a SEND Support Plan.</p>
<p>Range Three</p> <p>Moderate</p>	<ul style="list-style-type: none"> <li>• Moderate or persistent gross and / or fine motor difficulties</li> <li>• Recording and / or mobility now impacting more on access to the curriculum.</li> <li>• May need specialist input to comply with health and safety legislation, e.g., to access learning in the classroom, for personal care needs, at break and lunch times.</li> <li>• Increased dependence on mobility aids i.e., wheelchair or walking aid.</li> <li>• Increased use of alternative methods for extended recording e.g., scribe, ICT</li> </ul>

<p><b>FUNDING:</b></p> <p>Element 1 + Element 2</p>	<ul style="list-style-type: none"> <li>• May have medical condition that impacts on time in school and may require a medical care plan.</li> <li>• If there are SEMH needs associated with physical/medical needs – please use the SEMH section of these ranges for advice.</li> <li>• May need a SEN Support Plan/Plus</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>• An Occupational Therapist may see C&amp;YP at any range due to an open referral system.</li> <li>• It would be anticipated that schools would usually be able to implement first line strategies at this point, based on advice and strategies given in training packages delivered by Occupational Therapy and availability of drop-in sessions/telephone consultations/</li> <li>• A Physiotherapist may intervene with C&amp;YP who have mild physical issues to help develop motor skills or prevent further deterioration/reduce impact of conditions/early intervention to achieve more successful outcomes.</li> </ul> <p>SEND Support Plan should be in place and C&amp;YP should be on school’s SEND Register.</p>
<p>Range Four (i)</p> <p>Significant</p> <p><b>FUNDING:</b></p> <p>Element 1 + Element 2 + Element 3</p>	<ul style="list-style-type: none"> <li>• Significant physical /medical difficulties with or without associated learning difficulties.</li> <li>• Physical and / or medical condition will have a significant impact on the ability to access the curriculum. This may be through a combination of physical, communication and learning difficulties.</li> <li>• Significant and persistent difficulties in mobility around the building and in the classroom</li> <li>• May have significant personal care needs which require adult support and access to a hygiene suite.</li> <li>• May have developmental delay and/or learning difficulties which impacts upon access to curriculum – please use the Cognition and Learning section of these ranges for advice.</li> <li>• If there are SEMH needs associated with physical/medical needs – please use the SEMH section of these ranges for advice.</li> <li>• May need SEND Support Plan/Plus and/or Education, Health, and Care Plan</li> <li>• Primary need is identified as physical / medical.</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>• Occupational Therapy and Physiotherapy intervention will be based on assessed clinical need, including functional or physical needs and not necessarily on diagnosis on medical condition.</li> <li>• C&amp;YP in this category may require specialist equipment assessed via Physiotherapy/Occupational Therapy services.</li> <li>• Physical needs would be based on the outcome of specialised assessment on an individual basis for each specific C&amp;YP. C&amp;YP with long-term neurological conditions or traumatic physical injury requiring rehabilitation would be known to Physiotherapy in most cases.</li> </ul>
<p>Range Four (ii)</p> <p>Significant</p> <p><b>FUNDING</b></p>	<p>Some or all the following:</p> <ul style="list-style-type: none"> <li>• Significant physical difficulties and/or a medical condition with or without associated learning difficulties.</li> <li>• At risk of impaired progress and attainment.</li> <li>• Persistent difficulties in mobility around the building and in the classroom</li> <li>• Severe physical difficulties or a medical condition that requires access to assistive technology to support communication, understanding and learning.</li> <li>• May need high level support for all personal care, mobility, daily routines, and learning needs.</li> <li>• Will need SEND Support Plan/Plus and may need an Education, Health, and Care Plan</li> <li>• Primary need is identified as physical / medical.</li> </ul>

<p>Element 1 + Element 2 + Element 3</p>	<ul style="list-style-type: none"> <li>Physical conditions that require medical/therapy/respite intervention and support.</li> <li>The need for an environment to support self-esteem and positive self-image.</li> <li>A developing neuro-muscular degenerative condition or traumatic incident resulting in brain or physical injury.</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>Occupational Therapy and Physiotherapy intervention will be based on assessed clinical need, including functional or physical needs and not necessarily on diagnosis on medical condition.</li> <li>C&amp;YP in this category may require specialist equipment assessed via Physiotherapy/Occupational Therapy services.</li> <li>Physical needs would be based on the outcome of specialist assessment on an individual basis for each specific C&amp;YP. C&amp;YP with long-term neurological conditions or traumatic physical injury requiring rehabilitation would be known to Physiotherapy in most cases.</li> </ul> <p>SEND Support Plan/SEND Support Plan Plus is in place. Consideration of EHC Needs Assessment may be appropriate.</p>
<p>Range Five  Severe  FUNDING  Element 1 + Element 2 + Element 3</p>	<p>A permanent, severe and/or complex physical disability or serious medical condition.</p> <p>The C&amp;YP will present with many of the following:</p> <ul style="list-style-type: none"> <li>A level of independent mobility or self-care that will require reasonable adjustments to be made.</li> <li>An inability to make progress within the curriculum without the use of specialist materials, aids, equipment, and high level of adult support throughout the school day.</li> <li>Furniture and/or extensive adaptations to the physical environment of the school</li> <li>Difficulties in making and sustaining peer relationships leading to concerns about social isolation, the risk of bullying and growing frustration.</li> <li>Emotional and/or some behavioural difficulties including periods of withdrawal, disaffection, and reluctance to attend school.</li> <li>A requirement that health care inputs and therapies may be intensive and on a regular basis.</li> <li>Given appropriate facilities is nevertheless unable to independently manage personal and/or health care during the school day and requires regular direct intervention.</li> <li>Is an Augmentative Alternative Communication (AAC) user.</li> <li>Has a degenerative condition which impacts on independence.</li> </ul> <p>The NHS notes:</p> <ul style="list-style-type: none"> <li>Occupational Therapy and Physiotherapy intervention will be based on assessed clinical need, including functional or physical needs and not necessarily on diagnosis on medical condition.</li> <li>C&amp;YP in this category may require specialist equipment assessed via Physiotherapy/Occupational Therapy services.</li> <li>Physical needs would be based on the outcome of specialist assessment on an individual basis for each specific C&amp;YP. C&amp;YP with long-term neurological conditions or traumatic physical injury requiring rehabilitation would be known to Physiotherapy in most cases.</li> <li>A C&amp;YP with degenerative condition may not require to be in this range simply because of diagnosis but due to assessed clinical need e.g., Duchenne Muscular Dystrophy C&amp;YP remain quite independent through most of their childhood years and may only require a lower range.</li> </ul> <p>EHC Needs Assessment is underway or EHCP in place.</p>



<p>Range 6</p> <p>Profound</p> <p>FUNDING</p> <p>Element 1</p> <p>+</p> <p>Element 2</p> <p>+</p> <p>Element 3</p>	<p>A permanent, severe and/or complex physical disability or serious medical condition along with a learning difficulty and/or severe SEMH needs.</p> <p>The C&amp;YP will present with many of the following.</p> <ul style="list-style-type: none"> <li>• The associated severe and complex learning difficulties impact on their ability to make progress within the curriculum despite the use of specialist materials, aids, equipment, furniture and/or extensive adaptations to the physical environment of the school.</li> <li>• Difficulties in making and sustaining peer relationships leading to concerns about social isolation and their vulnerability within the setting and wider environment.</li> <li>• Emotional and/or behavioural difficulties including regular periods of withdrawal, disaffection, and ongoing reluctance to attend school.</li> <li>• A requirement that health care inputs and therapies may be intensive and daily.</li> <li>• Given appropriate facilities is nevertheless unable to manage personal and/or health care during the school day and requires a high level of direct intervention.</li> <li>• Has a complex medical need requiring frequent monitoring and medical intervention throughout the school day.</li> <li>• Has a significant additional condition such as HI/VI/MSI which gives rise to the complexity of need.</li> <li>• Is an Augmentative Alternative Communication (AAC) user.</li> <li>• Has a degenerative condition.</li> <li>• May require Occupational Therapy/Physiotherapy intervention and specialist equipment.</li> </ul> <p>EHCP in place.</p>
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## Early Years Foundation Stage

Range Descriptors Overview	
<b>Range One</b>	<p><b>The child is not making expected progress.</b></p> <p>Difficulties are becoming apparent in relation to any of the prime areas:</p> <ul style="list-style-type: none"> <li>• Personal, social, and emotional development</li> <li>• Communication and language development</li> <li>• Physical development including fine and gross motor skills.</li> </ul> <p>Using the EYFS as a guide and being mindful that every child is an individual and they all learn and develop at different rates, the child's developmental profile shows the following level of delay:</p> <ul style="list-style-type: none"> <li>• At 2 years functioning at or below emerging 16-26 months</li> <li>• At 3 years functioning at or below emerging 22-36 months</li> <li>• At 4 years functioning at or below emerging 30-50 months</li> <li>• At 5 years functioning at or below emerging 40-60 months</li> </ul> <p>SEN Support Plan in place if affecting the child's learning.</p>
<b>Range Two</b>	<p><b>The child will have MILD but persistent difficulties and is not making expected progress despite a range of interventions and quality first teaching.</b></p> <p>Difficulties are becoming increasingly apparent in relation to any of the prime areas:</p> <ul style="list-style-type: none"> <li>• Personal, social, and emotional development</li> <li>• Communication and language development</li> <li>• Physical development including fine and gross motor skills.</li> </ul> <p>Using the EYFS as a guide and being mindful that every child is an individual and they all learn and develop at different rates, the child's developmental profile shows the following level of delay:</p> <ul style="list-style-type: none"> <li>• At 2 years functioning at or below developing 8-20 months</li> <li>• At 3 years functioning at or below developing 16-26 months</li> <li>• At 4 years functioning at or below developing 22-36 months</li> <li>• At 5 years functioning at or below developing 30-50 months</li> </ul> <p>SEN Support Plan in place</p>
<b>Range Three</b>	<p><b>The child will have MILD to MODERATE and persistent difficulties and is not making expected progress despite significant levels of focused intervention and implementation of advice and recommendations from external agencies and the provision of quality first teaching.</b></p> <p>Difficulties are clearly apparent in relation to any of the prime areas:</p> <ul style="list-style-type: none"> <li>• Communication and language development</li> <li>• Physical development</li> <li>• Personal, social, and emotional development</li> </ul>

	<p>Using the EYFS as a guide and being mindful that every child is an individual and they all learn and develop at different rates, the child’s developmental profile shows the following level of delay:</p> <ul style="list-style-type: none"> <li>• At 2 years functioning at or below emerging 8-20 months</li> <li>• At 3 years functioning at or below emerging 16-26 months</li> <li>• At 4 years functioning at or below emerging 22-36 months</li> <li>• At 5 years functioning at or below emerging 30-50 months</li> </ul> <p>SEN Support Plan is in place.</p>
<p><b>Range Four</b></p>	<p><b>The child will have MODERATE to SEVERE and persistent difficulties and is not making expected progress despite significant levels of focused intervention and implementation of advice and recommendations from external agencies and the provision of quality first teaching.</b></p> <p>Difficulties are clearly apparent in relation to any of the prime areas:</p> <ul style="list-style-type: none"> <li>• Communication and language development</li> <li>• Physical development</li> <li>• Personal, social, and emotional development</li> </ul> <p>Using the EYFS as a guide and being mindful that every child is an individual and they all learn and develop at different rates, the child’s developmental profile shows the following level of delay:</p> <ul style="list-style-type: none"> <li>• At 2 years functioning at or below developing 0-11 months</li> <li>• At 3 years functioning at or below developing 8-20 months</li> <li>• At 4 years functioning at or below developing 16-26 months</li> <li>• At 5 years functioning at or below developing 22-36 months</li> </ul> <p>SEND Support Plan</p> <p>Consideration given to application for an Education, Health, and Care Plan.</p>
<p><b>Range Five</b></p>	<p><b>The child will have SEVERE and persistent difficulties and is not making expected progress despite significant levels of focused intervention and implementation of advice and recommendations from external agencies and the provision of quality teaching.</b></p> <p>Difficulties are clearly apparent in relation to any of the prime areas:</p> <ul style="list-style-type: none"> <li>• Communication and language development</li> <li>• Physical development</li> <li>• Personal, social, and emotional development</li> </ul> <p>Using the EYFS as a guide and being mindful that every child is an individual and they all learn and develop at different rates, the child’s developmental profile shows the following level of delay:</p> <ul style="list-style-type: none"> <li>• At 2 years functioning at emerging 0-11 months</li> <li>• At 3 years functioning at or lower than emerging 8-20 months</li> <li>• At 4 years functioning at or lower than emerging 16-26 months</li> <li>• At 5 years functioning at or lower than emerging 22-36 months</li> </ul> <p>EHCP in consideration or in place.</p>

**Range Six**

- An assessment place in a specialist early years provision may need to be considered.
- EHCP in place

**Appendix C****Name of Primary School****SEN****Areas of concern before SEN file is opened.**

Name -	Year group -	Date -
Teacher -	Area of need -	
Is the child making progress? -		
Reading -	Writing -	Maths -

Is the child registered as a vulnerable learner or do other professionals/parents share similar concerns?	
What are the main areas of concern?	
What are the barriers to learning?	
What has already been put in place to support the child with their barriers to learning?	
Have the concerns already been shared with parents? If so, what was their response?	
What actions now need to be taken to support this child further?	

This document must be uploaded to CPOMS.



## Appendix D New Registering as SEND Process

- Teachers will complete a 'cause for concern form' for any child who they have requested a SEN file to be opened for. This will address what has already taken place to support the child and discussions had with parents. (Uploaded to CPOMS)
- Teachers will band the child against the R&C ranges document to establish which range they fall into for their areas of need. All areas need to be looked at so that a complete picture is created about the child's needs. (Uploaded to CPOMS)
- If a child falls into more than one range area of the ranges document, then a SEND file will be opened with parents, and the permission of SENDco/Headteacher.
- Cognition & learning band - The data will be looked at to see how far behind academically the child is. If the child is 4 or more terms behind, then a SEN file will be opened. However, due to COVID and other factors, this will be down to the discretion of the school SENDco/SLT in determining if a SEN file is needed at this point.



## Vulnerable Learners

The vulnerable learners list will consist of the following children –

- Any child who has had previous SEN
- SALT involvement in EYFS if there are no other concerns
- Previous SALT involvement
- Pastoral concerns including low level SEMH

The vulnerable learners list will be reviewed termly against the data and in discussion with the child's class teacher as to whether they need to come off, stay on or move up to a SEN file being opened.

