



MEPA TRAINING

SPECIAL EDUCATIONAL NEEDS (ACCESS) POLICY

THIS POLICY IS WRITTEN FOR AND APPLIED TO MEPA STUDIOS, MEPA TRAINING AND MEPA COLLEGE.

Updated & Adopted:	June 2024
Review Date:	June 2025



TABLE OF CONTENTS

Policy Introduction	3
Definition of SEN	3
Definition of disability	3
1 The kinds of special educational need for which provision is made	4
2 Information about the policy for identification and assessment of pupils with SEN	4
MEPA Academy	4
MEPA College – BTEC Programme.....	5
MEPA College – Three Year Professional Training Programme.....	5
3 Information about the school’s policies for making provision for pupils with special educational needs whether or not they have EHC Plans, including	6
4 The name and contact details of the SEN Co-ordinator	7
5 Information about the expertise and training of staff in relation to children and young people with special educational needs and how specialist expertise will be secured	7
6 Information about how equipment and facilities to support children and young people with special educational needs will be secured	7
7 The arrangements for consulting parents of children with special educational needs about, and involving them in, their education	8
8 The arrangements for consulting young people with special educational needs about, and involving them in, their education	8
9 The contact details of support services for the parents of pupils with special educational needs and disabilities and children and young people with SEND up to age 25 (Code of Practice 2015, 6.39)	8
11 The school’s arrangements for supporting pupils with special educational needs in transferring between phases of education or in preparing for adulthood and independent living	9
12 Information on where the Local Authority’s local offer is published	9
Appendix 1	10
Appendix 2	11

POLICY INTRODUCTION

This policy is written in line with the requirements of:-

- Children and Families Act 2014
- SEN Code of Practice 2015
- SI 2014 1530 Special Educational Needs and Disability Regulations 2014
- Part 3 Duties on Schools – Special Educational Needs Co-ordinators
- Schedule 1 regulation 51– Information to be included in the SEN information report
- Schedule 2 regulation 53 – Information to be published by a Local Authority in its local offer
- Equality Act 2010
- Schools Admissions Code, DfE 1 Feb 2012
- SI 2012 1124 The School Information (England) (Amendment) Regulations +2012
- SI 2013 758 The School Information (England) (Amendment) Regulations 2013

It is important to note that as independent provider of education, MEPA Training is not legally obligated to follow or adopt the SEN code of practice. However, we do ensure that we provide equal opportunities and support for all learners with us.

This policy should be read in conjunction with the following school policies:

- Teaching, Learning and Assessment;
- Safeguarding;
- Equal Opportunities;
- Complaints;
- Supporting Children with Medical Needs;
- Behaviour, Rewards and Sanctions;
- Accessibility Plan.

DEFINITION OF SEN

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

- Has a significantly greater difficulty in learning than the majority of others of the same age; or
- Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions. *SEN Code of Practice (2015, p 15)*

The four broad areas of special educational needs are defined as:

- **Communication and Interaction-** e.g. children with speech, language and communication needs and interaction difficulties, including children with ASD.
- **Cognition and Learning-** e.g. children who learn at a slower pace and/or have a specific learning need such as dyslexia.
- **Social, Emotional and Mental Health Difficulties-** e.g. children who present as being anxious, depressed or withdrawn or display challenging, disruptive or disturbing behaviour. This category also includes children with disorders such as ADD/ADHD or attachment disorders.
- **Sensory and/or Physical Needs-** e.g. children with a vision, hearing and/or a multi-sensory impairment, who require specialist support and/or equipment.

DEFINITION OF DISABILITY

Many children and young people who have SEN may also have a disability under the Equality Act 2010 – that is'...a physical or mental impairment which has a long-term and substantial adverse effect on their

ability to carry out normal day-to-day activities'. This definition provides a relatively low threshold and includes more children than many realise: 'long-term' is defined as 'a year or more' and 'substantial' is defined as 'more than minor or trivial' *SEN Code of Practice (2015, p16)*

1 THE KINDS OF SPECIAL EDUCATIONAL NEED FOR WHICH PROVISION IS MADE

At MEPA Training, provision is made for a range of frequently occurring special educational needs without an Education, Health and Care Plan, for instance: dyslexia, visual stress, Irlen's, ADHD, cognition and learning difficulties, processing difficulties, SEMH.

There are other kinds of special educational needs which do not occur as frequently and with which the school is less familiar, but training and advice can be accessed so that these kinds of needs can be met.

We previously had a student with an EHCP funded by Bromley Council however, at present, the school does not have any children with an Education, Health and Care Plan (EHCP). The admission arrangements for pupils without an Education, Health and Care Plan do not discriminate against or disadvantage disabled children or those with special educational needs.

2 INFORMATION ABOUT THE POLICY FOR IDENTIFICATION AND ASSESSMENT OF PUPILS WITH SEN

All students throughout MEPA Training with SEN will have a pupil passport created for them that identifies their need as well as provides teachers with a quick overview of how to support their learning and progression using agreed strategies. These are reviewed annually, however can be amended anytime throughout the year through consultation with parents/carers and the SEN team at MEPA Training.

Students with EHCPs will have three meetings a year to conduct annual reviews. These will be arranged with the SEN team, parents/carers and students.

MEPA Academy

For students at MEPA Academy, the progress of all pupils is monitored three times a year to review their academic progress. We also use a range of assessments with pupils at various points e.g. Cognitive Ability Test (CAT) all students, Boxall profile can be available, Leuven, Dyslexia and dyscalculia screeners. Class Teachers follow a 'Graduated Approach' to SEN where they Assess, Plan, Do and Review.

At MEPA Training we are experienced in using the following assessment tools: Dyslexia screener e.g. Lucid, dyscalculia screener, visual stress, Boxall profile, Leuven. We also have access to external advisors for MEPA Academy who are able to use the following assessment tools: Access Arranger, Christine Birch (ASPIRE SEN ONLINE)

Where progress is not sufficient, even if a special educational need has not been identified, extra support is put in place to enable the pupil to catch up. This includes provision such as: use of overlays, supported reading in class, mind maps, task management boards, learning mentor, pre-teach and over learning, processing time, brain breaks, access to a quiet room for emotional support, small class teaching. If the pupil is able to make good progress using this additional and different resource (but would not be able to maintain this good progress without it) the pupil will continue to be identified as having a special educational need.

If the pupil can maintain good progress without the additional and different resources they will initially be identified as SEN vulnerable and will be monitored within the plan, do review cycle. If the child is then making sufficient progress whereby, they no longer require additional support, in agreement with the parents/carers, the child will not be identified with special educational needs. When any change in identification of SEN is changed student and parents will be notified. All staff who work with the pupil ensure they are aware of the support to be provided and the teaching approaches to be used.

Some pupils may continue to make inadequate progress, despite high-quality teaching targeted at their areas of weakness. For these pupils, and in consultation with parents, we will use a range assessment tools to determine the cause of the learning difficulty.

MEPA College – BTEC Programme

Students who are completing the BTEC programme through MEPA College will have their theory class teachers apply a 'Graduated Approach' to SEN where they Assess, Plan, Do and Review. We also use a range of assessments with students at various points e.g. Dyslexia and Dyscalculia screeners. We also have access to external advisors for MEPA Academy who are able to use the following assessment tools: Access Arranger, Christine Birch (ASPIRE SEN ONLINE)

The BTEC programme has a heavy involvement of practical based learning as well as theory based learning. All teachers will be made aware of the support needed for each student so reasonable adjustments can be made.

If the pupil can maintain good progress without the additional and different resources they will initially be identified as SEN vulnerable and will be monitored within the plan, do review cycle. If the child is then making sufficient progress whereby, they no longer require additional support, in agreement with the parents/carers, the child will not be identified with special educational needs. When any change in identification of SEN is changed student and parents will be notified. All staff who work with the pupil ensure they are aware of the support to be provided and the teaching approaches to be used.

Some pupils may continue to make inadequate progress, despite high-quality teaching targeted at their areas of weakness. For these pupils, and in consultation with parents, we will use a range assessment tools to determine the cause of the learning difficulty.

MEPA College – Three Year Professional Training Programme

Students who are completing one of the Three Year Professional Training Programmes is a largely practical programme.

If the pupil can maintain good progress without the additional and different resources they will initially be identified as SEN vulnerable and will be monitored within the plan, do review cycle. If the child is then making sufficient progress whereby, they no longer require additional support, in agreement with the parents/carers, the child will not be identified with special educational needs. When any change in identification of SEN is changed student and parents will be notified. All staff who work with the pupil ensure they are aware of the support to be provided and the teaching approaches to be used.

Some pupils may continue to make inadequate progress, despite high-quality teaching targeted at their areas of weakness. For these pupils, and in consultation with parents, we will use a range assessment tools to determine the cause of the learning difficulty.

3 INFORMATION ABOUT THE SCHOOL'S POLICIES FOR MAKING PROVISION FOR PUPILS WITH SPECIAL EDUCATIONAL NEEDS WHETHER OR NOT THEY HAVE EHC PLANS, INCLUDING

3a How the school evaluates the effectiveness of its provision for such pupils

Each annual review of the SEN Pupil Passport will be informed by the views of the pupil, parents and class teachers and the assessment information from teachers which will show whether adequate progress is being made. As we are a small school, conversations with teachers are informal and regular which then informs of the SENCO of any additional needs of the student and how well they are progressing with their pupil passport targets.

The *SEN Code of Practice (2015, 6.17)* describes inadequate progress thus:

- Is significantly slower than that of their peers starting from the same baseline
- Fails to match or better the child's previous rate of progress
- Fails to close the attainment gap between rate of progress
- Widens the attainment gap

3b the school's arrangements for assessing and reviewing the progress of pupils with special educational needs

Every pupil in the school has their progress tracked. If these assessments do not show adequate progress is being made the SEN support plan will be reviewed and adjusted.

3c the school's approach to teaching pupils with special educational needs

High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching.

MEPA Training will regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered *SEN Code of Practice (2015, 6.3)*)

The Mainstream Core Standards advice developed by Kent County Council is followed to ensure that our teaching conforms to best practice. <http://www.kelsi.org.uk/special-education-needs/special-educational-needs/the-mainstream-core-standards>. In meeting the Mainstream Core Standards the school employs some additional teaching approaches, as advised by internal and external assessments e.g. one to one tutoring/ mentoring, small group teaching, use of ICT software learning packages.

3d how the school adapts the curriculum and learning environment for pupils with special educational needs

The advice in the Mainstream Core Standards on how to adapt the curriculum and the learning environment for pupils with special educational needs is followed. We also incorporate the advice provided as a result of assessments, both internal and external, and the strategies described in the Education, Health and Care Plans. As part of our requirement to keep the appropriateness of our

curriculum and learning environment under review MEPA Training has identified the following aspects of the school which need training:

- reasonable adjustments
- update on referral process
- Identification of SEN needs
- How to support dyslexia students in class

3e how the school enables pupils with special educational needs to engage in activities of the school (including physical activities) together with children who do not have special educational needs

All clubs, trips and activities offered to pupils are available to pupils with special educational needs either with or without an Education, Health and Care Plan. Where it is necessary, MEPA Training will use the resources available to it, to provide additional adult support to enable the safe participation of the pupil in the activity. In some cases, an individual risk assessment will be put into place which will be shared with all relevant parties.

3f support that is available for improving the emotional and social development of pupils with special educational needs

An important feature of MEPA Training is to enable all pupils to develop emotional resilience and social skills, both through direct teaching for instance PSHE, peer mediation, wellbeing (ME) time, talk time and indirectly with every conversation adults may have with pupils throughout the day.

For some pupils with the most need for help in this area the following can be provided: access to The Business Suite, mentor time, external referral to CAMHS (mental health service), time-out space for pupil to use when upset or agitated or mentoring time with a senior leader. Pupils in the early stages of emotional and social development because of their special educational needs will be supported to enable them to develop and mature appropriately.

4 THE NAME AND CONTACT DETAILS OF THE SEN CO-ORDINATOR

At MEPA Training, Lewis Muir as the Senior Management member with oversight of the Special Educational Needs, whereas the SENCO is Tilly Cook.

Lewis Muir – LMuir@mepatraining.com

Tilly Cook – TCook@mepatraining.com

5 INFORMATION ABOUT THE EXPERTISE AND TRAINING OF STAFF IN RELATION TO CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND HOW SPECIALIST EXPERTISE WILL BE SECURED

Training will be delivered through the SENCo and the Senior Team. Where a training need is identified beyond this, a provider, who is able to deliver it, will be found.

6 INFORMATION ABOUT HOW EQUIPMENT AND FACILITIES TO SUPPORT CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS WILL BE SECURED

Where external advisors recommend the use of equipment or facilities which the school does not have, they will be purchased or sought for loan. For highly specialist communication equipment the school will seek advice from professionals involved with the child. Please note that as a independent education

provider, costs of some equipment/provisions may be required from parents/carers or fee payer of the student.

7 THE ARRANGEMENTS FOR CONSULTING PARENTS OF CHILDREN WITH SPECIAL EDUCATIONAL NEEDS ABOUT, AND INVOLVING THEM IN, THEIR EDUCATION

All parents of pupils are invited to discuss the progress of their children. In addition, the school is happy to arrange meetings outside these times. As part of our normal teaching arrangements, all pupils will access some additional teaching to help them catch-up if the progress monitoring indicates that this is necessary; this will not imply that the pupil has a special educational need.

If, following this normal provision, improvements in progress are not seen, we will contact parents to discuss the use of internal or external assessments which will help us to address these needs better.

From this point onwards the pupil will be identified as having special educational needs because special educational provision is being made and the parent will be invited annual reviews of this provision. Parents will be actively supported to contribute to assessment, planning and review. In addition to this, parents of pupils with an Education, Health and Care Plan will be invited to contribute to and attend an annual review, which, wherever possible will also include other agencies involved with the pupil. Information will be made accessible for parents.

8 THE ARRANGEMENTS FOR CONSULTING YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS ABOUT, AND INVOLVING THEM IN, THEIR EDUCATION

When a pupil has been identified to have special educational needs because special educational provision is being made for them, the pupil will be consulted about, and involved in the arrangements made for them as part of person-centred planning.

9 THE CONTACT DETAILS OF SUPPORT SERVICES FOR THE PARENTS OF PUPILS WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITIES AND CHILDREN AND YOUNG PEOPLE WITH SEND UP TO AGE 25 (CODE OF PRACTICE 2015, 6.39)

Information Advice and Support Kent (IASK) provides a free and confidential, information, advice and support service, for parents of a disabled child or child with special educational needs and to children and young people up to age 25 who have a special educational need or disability. Trained staff can provide impartial legally based information and support on educational matters relating to special educational needs and disabilities, including health and social care. The aim is to empower parents, children and young people to fully participate in discussions and make informed choices and decisions. Also, to feel confident to express their views and wishes about education and future aspirations.

They can be contacted on

HELPLINE: 03000 41 3000

Office: 03000 412412

E-mail: iask@kent.gov.uk

www.kent.gov.uk/iask

11 THE SCHOOL'S ARRANGEMENTS FOR SUPPORTING PUPILS WITH SPECIAL EDUCATIONAL NEEDS IN TRANSFERRING BETWEEN PHASES OF EDUCATION OR IN PREPARING FOR ADULTHOOD AND INDEPENDENT LIVING

At MEPA Training, we work closely with the educational settings used by the pupils before they transfer to us in order to seek the information that will make the transfer as seamless as possible. For pupils who transfer into school, with identified SEN, we contact the previous school to speak with relevant staff about strategies and / or adjustments which will support. We also rely on parents and students explaining these needs. If additional induction days are required, these can be arranged with the SENCo

12 INFORMATION ON WHERE THE LOCAL AUTHORITY'S LOCAL OFFER IS PUBLISHED.

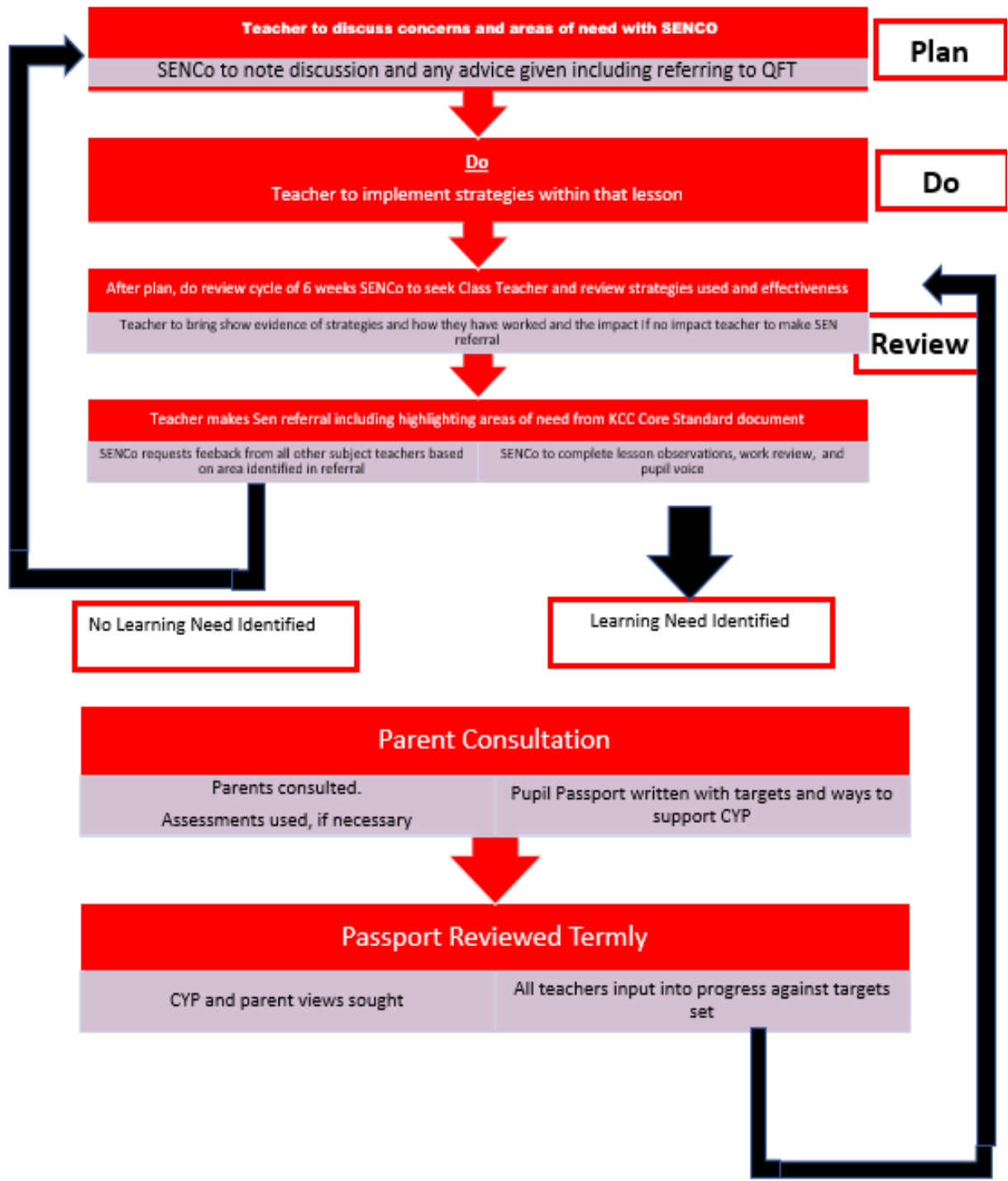
The Local Authority's local offer is on their website:

<http://www.kent.gov.uk/education-and-children/special-educational-needs>

Parents without internet access should make an appointment with the SENCo for support to gather the information they require.

APPENDIX 1

MEPA SEN Referral Process



APPENDIX 2

MEPA Training Cause for Concern Form
Please complete and send to SENCo

Pupil Name	Year Group	D.O.B	Name of referrer
SEN Status	EAL	Date of Referral:	

Assessment Data			
Assessment Type and Subject			
Assessment Data			

Provision Already in Place			
Current		Pervious	
Started	Finished	Started	Finished

Area of Concern	
Communication and Interaction	
Cognition and Learning	
Social, Emotional and Mental Health	
Physical, Sensory, Medical Needs	

Outline of Concern
Explain main concerns
Explain how the child presents in class and difficulties they have accessing the curriculum

Explain what works and what doesn't.
Any other relevant details
Details of any conversations with parents or outside agencies
Action to be taken by SENCo
Date:
Follow Up
Date:

Mainstream Core Standards	
<i>Highlight the relevant sections. Page numbers refer to the Core Standard document</i>	
<i>What you will see. (The difficulty/barrier, how this presents and the impact on the learner)</i>	
Communication and Interaction	
ASD and characteristics of ASD	
Young children with ASD or characteristics of ASD may be pre-verbal. <i>(Provision-strategies, intervention and resources see pg 20)</i>	Withdrawn behaviour Appearing to be in a 'world of their own' frustration, resulting in challenging behaviours. poor progress not associated with a learning need.
Difficulty understanding or using social communication – the 'unspoken rules'. <i>(Provision-strategies, intervention and resources see pg 20)</i>	<ul style="list-style-type: none"> • Social isolation and vulnerability. • Can appear rude or aggressive. • Makes mistakes in social interactions and lacks the skills to repair. • Appearing to struggle with boundaries, e.g. open discussion of matters considered private or social taboos.
Difficulties with language and non-verbal communication:	Not knowing that whole class/group instructions are meant for them – can

<p><i>(Provision-strategies, intervention and resources see pg 20)</i></p>	<p>appear that learners are reluctant or unwilling to follow instructions.</p> <ul style="list-style-type: none"> • Interpreting language literally; struggling to understand idioms, some jokes and sarcasm, which can lead to vulnerability and embarrassment. • Struggling to differentiate or misinterpreting tone of voice. • Initiating interactions inappropriately – shouting out, touching others to get attention, interrupting. • Difficulty in understanding body language. • Difficulty in recognising and interpreting facial expressions.
<p>Unusual communication: <i>(Provision-strategies, intervention and resources see pg 20)</i></p>	<p>Flat, monotonous tone – can lead others to believe that learner is unemotional.</p> <ul style="list-style-type: none"> • Immature tone. • Adoption of the accent of another language – often American. • Loud voice regardless of time or place – can appear opinionated and rude. • Lecturing tone – can cause difficulties with peer relationships. • Unusual eye contact – often avoidant and fleeting but can be overly intense.
<p>Difficulties with imagination – putting themselves in ‘someone else’s shoes’: <i>(Provision-strategies, intervention and resources see pg 22)</i></p>	<p>Struggle to understand another person’s point of view which can lead to others believing the child or young person lacks emotion and compassion.</p> <ul style="list-style-type: none"> • May struggle with some aspects of the curriculum requiring this skill.
<p>Sensory needs: <i>(Provision-strategies, intervention and resources see pg 22)</i></p>	<p>May be sensitive to (or afraid of) loud noises or particular sounds, smells or sights, leading to inability to concentrate, increased anxiety and agitation.</p> <ul style="list-style-type: none"> • May experience visual, auditory or olfactory overload leading to intense feelings of anxiety, being overwhelmed, ‘fright, fight or flight response. • May exit intolerable environments without warning or create a situation leading to them removal from the environment. • May refuse to enter certain environments.
<p>Difficulties in the classroom: <i>(Provision-strategies, intervention and resources see pg 23)</i></p>	<p>Planning (executive functioning) – finding it hard to organise ideas, plan projects, organise equipment and resources – can appear disorganised and may become</p>

	<p>anxious and confused.</p> <ul style="list-style-type: none"> • Sequencing or multi-step tasks. • Maintaining concentration if not understanding ‘the point’ of the task or experiencing sensory overload. • Reading and comprehension, due to problems with inference and vocabulary. • Literal understanding. • Intense focus and ‘getting stuck’ on an aspect of a task. • Refusal, avoidance or reluctance to complete homework – ‘school-work is for school and home is my refuge’. • Not understanding what is expected of any task (including homework). • Struggling with changes to usual school routines - or worrying that there might be a change. • Difficulty recording work. • Difficulty demonstrating level of knowledge and understanding in line with assessment criteria, leading to attainment scores not in line with learner’s abilities.
<p>Difficulties combine, leading to social isolation and difficulties making, maintaining and repairing friendships: <i>(Provision-strategies, intervention and resources see pg 24)</i></p>	<p>Feelings of sadness, loneliness, low self-worth and anxiety.</p> <ul style="list-style-type: none"> • Vulnerable to bullying and exploitation.
<p>Difficulties combine, leading to escalation in anxiety and deteriorating well-being and mental health. Difficulties combine (sometimes including the impact of the continuous challenge and effort of continually attempting to ‘mask’ difficulties), leading to: <i>(Provision-strategies, intervention and resources see pg 24)</i></p>	<p>Increased withdrawn behaviours.</p> <ul style="list-style-type: none"> • Increase in challenging behaviours. • Escalation in behaviours in order to be sent home or excluded. • Difficulties around eating in school or at home. • Escalating difficulties with emotional regulation at home. • Increase in demand avoidance. • Increase in perfectionism/ ‘overworking’. • Increasingly reporting feeling unwell. • Refusing to attend school, or parental efforts to ensure attendance are met with increasing resistance.
<p>Speech, language and communication</p>	
<p>Difficulties with saying what they want to and being understood (speech, phonology):</p>	<p>Reluctance to communicate verbally.</p> <ul style="list-style-type: none"> • Frustration at being unable to have them needs and wants met, which may lead to

<p><i>(Provision-strategies, intervention and resources see pg 26)</i></p>	<p>challenging behaviours.</p> <ul style="list-style-type: none"> • Underestimation by others of what has been understood – reduced ability to express views and ideas. • Difficulties in initiating or responding to peer interactions, leading to social isolation. • Appearing withdrawn. • Potential difficulties with phonics; unable to produce target sounds and /or able to recognise target sound. • Speech sound errors impacting on spelling skills. • Reluctant to speak. • Appearing ‘stuck’ and reluctant to ask for help.
<p>Difficulties understanding what is being said and understanding and use of vocabulary and concepts. <i>(Provision-strategies, intervention and resources see pg 27)</i></p>	<ul style="list-style-type: none"> • Misunderstanding of tasks or rules. • Difficulty with new information or concepts. • Increased anxiety due to feelings of confusion. • Anxiety and confusion. • Not following instructions. • Watching others. • Using ‘empty word’ (“thingy,” stuff” “you know”. • Limited or unexpected responses. • Unable to use vocabulary in different situations and contexts. • Literal understanding. • Word-finding difficulties. • Not making progress in the development of understanding or new ideas through group discussion. • Appearing distracted or disengaged.
<p>Difficulties with attention and listening. <i>(Provision-strategies, intervention and resources see pg 28)</i></p>	<p>Learner is highly distractible (fidgeting, asking ‘off topic’ questions, low level disruption).</p> <ul style="list-style-type: none"> • Learner may not ask for help. • Learner may be quiet and withdrawn.
<p>Difficulties with narrative (using structure and rules in spoken language): <i>(Provision-strategies, intervention and resources see pg 28)</i></p>	<p>Not speaking in whole complex sentences.</p> <ul style="list-style-type: none"> • Using few words. • Muddles retelling of an event. • Words in the wrong order. • Difficult for the listener to follow what is being said. • He/she may be used incorrectly. • Correct use of tenses could be inconsistent.
<p>Dysfluency:</p>	<p>Repeats whole words or parts of words</p>

<p><i>(Provision-strategies, intervention and resources see pg 29)</i></p>	<p>several times.</p> <ul style="list-style-type: none"> • Stretches out sounds in a word. • Is unable to get started with a word or sentence/no sound comes out for several seconds. • Puts extra effort in to saying words. • Has tense and jerky speech. • Does things with body to try to ‘push out’ the word, e.g. foot stamping or finger tapping. • Avoids eye contact during a moment of stammering. • As children get older they may learn to mask their stammer by changing their words or avoiding talking in situations where they might stammer.
<p>Reluctant/selective speaker (child or young person wants to speak and are physically able but can’t; Selective Mutism is not a choice). <i>(Provision-strategies, intervention and resources see pg 29)</i></p>	<p>May not speak at all.</p> <ul style="list-style-type: none"> • May speak only in certain environments, e.g. at home. • May only speak to peers but not adults. • May only speak to one adult. • Find it difficult to speak to you when anxious. • Does not smile, looks blank. • Move stiffly or awkwardly. • Find it difficult to answer the register, to say hello, goodbye or thank you. • Worry more than others. • Be sensitive to noise and other environmental stimuli. • Be very sensitive to the feelings • Have good concentration skills.
<p>Cognition and learning</p>	
<p>Difficulties with learning (where, despite appropriate approaches and interventions and developing understanding of the learner’s needs, the rate of progress is reducing or static and the gap between same age peers with a similar starting point is increasing). <i>(Provision-strategies, intervention and resources see pg 31)</i></p>	<p>Learners will have much greater difficulty than their peers in acquiring basic literacy and numeracy skills and in understanding concepts. They may also have associated speech and language delay, low self-esteem, low levels of concentration and underdeveloped social skills</p> <p>Difficulty with:</p> <ul style="list-style-type: none"> • Pace of whole class teaching and learning. • Acquiring basic numeracy skills. • Understanding basic mathematical concepts e.g. time. • Understanding and/or remembering classroom instructions.

	<ul style="list-style-type: none"> • Distinguishing between Who? What? Where? When? How? and Why? questions. • Understanding verbal explanations. • Memory (short-term, working or long term). Learning, remembering and using appropriate curriculum vocabulary. <p>You may also see:</p> <ul style="list-style-type: none"> • A lack of confidence and reluctance to take risks with new learning situations. • Distractibility, passivity or tiredness. • Low self-esteem. • High level of dependence on adult support. • A tendency to copy peers. • Reluctance or inability to ask for help.
<p>Difficulties with working memory: <i>(Provision-strategies, intervention and resources see pg 32)</i></p>	<p>Struggles with pace of teaching and learning.</p> <ul style="list-style-type: none"> • Struggles to follow instructions – can do the first step. • Easily distracted. • Unable to complete homework even if explained and differentiated. • Fails to complete tasks. • Poor organisation. • Copies/follow others. • Poor organisation. • Appears anxious and/or avoidant of tasks or activities. • May not ask for help or is highly dependent on adult support.
<p>Specific learning difficulties affecting one or more aspects of learning including reading, spelling, writing, handwriting, arithmetic, or mathematical reasoning and/or memory which significantly impacts their ability to learn and demonstrate their learning. <i>(N.B. a small number of children may have a normal diagnosis/educational determination, for example, dyslexia, dyscalculia or dyspraxia. For all areas of need any provision or support should be provided in line with the needs of the child or young person and is NOT dependant on any formal diagnosis.)</i> <i>(Provision-strategies, intervention and resources see pg 33)</i></p>	<p>Difficulty with (some or all of the following):</p> <ul style="list-style-type: none"> • Auditory processing. • Phonological awareness – segmenting and blending phonemes. • Decoding words. • Difficulties with learning phonics beyond the simple alphabetic code. • Reading - Inaccurate or slow. • Visual processing. • Poor word recognition skills. • Writing - requires much effort. • Frequent and inconsistent spelling errors. • Handwriting and formatting on the page. • Copying from a worksheet, screen or board. • Acquisition and retention of mathematical

	<p>concepts e.g. Place Value.</p> <ul style="list-style-type: none"> • Remembering number facts and inability to use efficient calculation strategies to solve number problems e.g. counting on fingers rather than using number facts. • Mathematical reasoning. • Working memory. Avoidant or disruptive behaviour when being asked to engage in literacy- or numeracy-based tasks. • Variation in performance day by day. • Poor organisation skills. • Anxiety when asked to read out loud. • Poor written expression with a limited quantity of writing when compared to verbal expression.
Social, emotional and mental health difficulties	
<p>All of the descriptions provided represent how behaviours or presentation can be perceived by others. It is important to see these behaviours in the context of anxiety and possible language and or learning needs.</p> <p><i>(Provision-strategies, intervention and resources see pg 37)</i></p>	<p>‘Fight responses’:</p> <ul style="list-style-type: none"> • Verbal and physical aggression. • Violence towards property and/or people. • Inappropriate language. • Blaming others. • Pushing friends away. • Inflexibility and/or unable to follow rules or instructions. • Disrespectful. • Self-harming/self-sabotaging behaviours. • Refusal to follow instructions or comply with behavioural norms. • Stealing. • May appear to be being dishonest. ‘Flight’ responses: <p>‘Flight response’</p> <ul style="list-style-type: none"> • Moving to another area without notice or permission (absconding). • Hiding. • Inability to manage unstructured/free time. • Avoiding tasks and activities. • Hyperactive. • Hyper vigilant. • Agitated. • Fidgety. • Immature behaviours, tone of voice. ‘Freeze’ behaviours: <p>‘Freeze behaviour’</p> <ul style="list-style-type: none"> • Forgetful. • Distracted; difficulties with concentration and engagement.

	<ul style="list-style-type: none"> • Not listening or interacting. • Appears confused. • Clumsy. <p>‘Fold’ behaviours:</p> <ul style="list-style-type: none"> • Withdrawal from social engagements. • Passive with neutral expression. • Compliant – which can lead to vulnerability. • Providing only ‘yes’ and ‘no’ answers. • Self-harm. • Unable to accept praise. • Unable to show enjoyment of seemingly positive experiences.
	Physical symptoms that are medically unexplained, e.g. soiling, stomach pains.
<p>Attention difficulties including ADHD and ADD. <i>(Provision-strategies, intervention and resources see pg 39)</i></p>	<p>Having a short attention span and being easily distracted.</p> <ul style="list-style-type: none"> • Appearing forgetful or losing things. • Being unable to stick to tasks that they perceive as tedious or time-consuming. • Appearing to be unable to listen to or carry out instructions. • Constantly changing activity or task. • Having difficulty organising tasks.
<p>Hyperactivity and impulsiveness <i>(Provision-strategies, intervention and resources see pg 39)</i></p>	<ul style="list-style-type: none"> • Being unable to sit still, often fidgeting. • Struggling to concentrate on tasks. • Poor working memory. • Excessive physical movement. • Excessive talking. • Being unable to wait their turn. • Appearing to act without thinking. • Interrupting conversations. • Appearing to have little or no sense of danger.
<p>Attachment Difficulties (including Attachment Disorder) <i>(Provision-strategies, intervention and resources see pg 40)</i></p>	<p>Appears anxious.</p> <ul style="list-style-type: none"> • Appears withdrawn. • May experience intense and overwhelming emotions exhibited as anger or ‘loss of control’. • May appear to lack inhibitions e.g. hugging people, they don’t know or appearing to be ‘over friendly’ towards children and adults. • Finding it difficult to join in with play or interactive games. • Appearing to ‘sabotage’ situations where things are going well.

	<ul style="list-style-type: none"> • May avoid eye contact. • Struggles with impulse control. • Struggle with cause and effect' thinking. • Lacks self-belief and confidence (has low self-esteem).
<p>Low level disruption or behaviours that appear to want to draw attention, e.g. talking out of turn, frequent interruptions to learning, fiddling with objects. (Provision-strategies, intervention and resources see pg 40)</p>	
<p>Difficulty in making and maintaining healthy relationships. (Provision-strategies, intervention and resources see pg 40)</p>	
<p>Sensory, physical disability and complex medical needs</p>	
<p>ACCESS AND ENVIRONMENT Learners may experience not being able to: (Provision-strategies, intervention and resources see pg 42)</p>	<p>get around the school building easily or at all, e.g. past furniture in the classroom, down corridors, into all outside areas with friends.</p> <ul style="list-style-type: none"> • having to go to a different place from friends because of need to: <ul style="list-style-type: none"> • keep warm • avoid sunlight • be safe in case of a fire (not using lift) • going to a care suite for personal care because learner needs: <ul style="list-style-type: none"> • to be hoisted by an adult • to use special toilet equipment • to take a long time in the toilet • help with catheterisation • to hold onto rails.
<p>Have difficulties with written work: (Provision-strategies, intervention and resources see pg 43)</p>	<p>recording ideas may be very slow</p> <ul style="list-style-type: none"> • may be difficult to read • never be finished • full of mistakes • may need to use assistive technology.
<p>During learning tasks, learners may: (Provision-strategies, intervention and resources see pg 43)</p>	<p>appear confused</p> <ul style="list-style-type: none"> • not able to copy from the board • be very tired • unable to get started.
<p>Difficulties with the sport/PE curriculum means the learner may: (Provision-strategies, intervention and resources see pg 43)</p>	<p>refuse to join in</p> <ul style="list-style-type: none"> • be very self-conscious • get angry or upset • take a long time to change

	<ul style="list-style-type: none"> • fall over easily • get left behind during games.
<p>May have gaps in learning due to: (Provision-strategies, intervention and resources see pg 43)</p>	<p>illness and/or medical appointments</p> <ul style="list-style-type: none"> • time out of class for personal care or therapy needs
<p>Social and emotional impact of difficulties: (Provision-strategies, intervention and resources see pg 44)</p>	<ul style="list-style-type: none"> • May seek out adults. • May play with younger pupils. • May be socially isolated. • May to get away from my close adult support. • May negatively impact on approach and attitude to learning experience <p>varied mood because:</p> <ul style="list-style-type: none"> • their condition is getting worse • sometimes have a lot of pain • friends have 'moved on' leading to a sense of being left behind. • Find that alternative activities are offered that are not fun. • Feel sad that they cannot travel, meet with friends or have them to stay out of school.
Hearing impairment	
<p>ACCESS TO THE LEARNING ENVIRONMENT <i>Learners may not be able to:</i> (Provision-strategies, intervention and resources see pg 45)</p>	<p>hear what everyone else can hear</p> <ul style="list-style-type: none"> • hear in noisy environments • hear announcements or instructions about where to go and what to do • respond to fire alarms.
<p>ACCESS TO THE CURRICULUM <i>Learners may have difficulties with:</i> (Provision-strategies, intervention and resources see pg 46)</p>	<p>hearing the teacher</p> <ul style="list-style-type: none"> • hearing in a noisy classroom or when chairs are being moved • sitting next to noisy equipment such as heaters or data projectors • accessing spoken information when the teacher is facing away • hearing their peers in class discussions • understanding what is being said on DVDs or TV • understanding new or complicated language. Learners may: <ul style="list-style-type: none"> • appear confused or unable to start a task • mishear instructions • be very self-conscious • get angry or upset • get left behind in PE.

<p>ACCESS TO COMMUNICATION <i>Learners may:</i> <i>(Provision-strategies, intervention and resources see pg 47)</i></p>	<p>seek out adults and support from adults</p> <ul style="list-style-type: none"> • play with younger pupils • be socially isolated • wish to get away from close adult support • lack independence and resilience • express sadness about their deafness • feel sad that they cannot do some things independently.
<p>Multi-sensory impairment</p>	
<p>ACCESS TO THE LEARNING ENVIRONMENT <i>Learners may not be able to:</i></p>	<p>see or hear what everyone else can see and hear</p> <ul style="list-style-type: none"> • get around the school building or classrooms easily or at all • to engage positively with the outside space • hear in noisy environments • find things or specific people • participate fully in some sports activities • respond to instructions or announcements • respond to fire alarms.
<p>ACCESS TO THE CURRICULUM <i>Learners may have difficulties with:</i> <i>(Provision-strategies, intervention and resources see pg 48)</i></p>	<ul style="list-style-type: none"> • hearing their teacher • hearing in a noisy classroom • seeing work on the whiteboard • reading regular size print • seeing the details of pictures and illustrations • accessing spoken information when the teacher is facing away • hearing their peers in class discussions • understanding what is being said on DVDs or TV • understanding new or complicated language • writing in cursive script and reading cursive script • seeing fine detail such as mathematical signs • seeing computer icons • seeing the ball in PE games. <p>Learners may:</p> <ul style="list-style-type: none"> • appear confused or unable to start a task • be very self-conscious • get angry or upset

	<ul style="list-style-type: none"> • take a long time to complete tasks • get left behind in PE.
ACCESS TO COMMUNICATION <i>Learners may:</i> <i>(Provision-strategies, intervention and resources see pg 50)</i>	seek out adults and support from adults <ul style="list-style-type: none"> • play with younger pupils • be socially isolated • wish to get away from close adult support • lack independence and resilience • express sadness about their sensory impairment • feel sad that they cannot do things independently.
Visual impairment	
ACCESS TO THE LEARNING ENVIRONMENT <i>Learners may not be able to:</i> <i>(Provision-strategies, intervention and resources see pg 51)</i>	see what everyone else can see <ul style="list-style-type: none"> • get around the school building or classrooms easily or at all • to engage positively with the outside space • to access information in the same way as their peers • find things or specific people • participate fully in some sports activities.
ACCESS TO THE CURRICULUM <i>Learners may have difficulties with:</i> <i>(Provision-strategies, intervention and resources see pg 52)</i>	seeing work on the whiteboard <ul style="list-style-type: none"> • reading regular size print in books or on worksheets • sharing books • seeing the details of pictures and illustrations • seeing text or icons on a computer or finding the mouse marker • scanning work for information • finding equipment and resources • writing in cursive script and reading cursive script • seeing fine detail such as mathematical signs • seeing the ball in PE games. Learners may: <ul style="list-style-type: none"> • appear confused or unable to start a task

	<ul style="list-style-type: none"> • be very self-conscious • get angry or upset • take a long time to complete tasks • get left behind in PE.
<p>ACCESS TO COMMUNICATION <i>Learners may: (Provision-strategies, intervention and resources see pg 53)</i></p>	<p>seek out adults and support from adults</p> <ul style="list-style-type: none"> • play with younger pupils • be socially isolated • wish to get away from close adult support • lack independence and resilience • express sadness about them <p>visual impairment</p> <ul style="list-style-type: none"> • feel sad that they cannot do things independently.