



Bradford Matrix of Need v2.0

September 2020

1.a Cognition and Learning: Learning

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision | | | | | | | | | | | | | | |
|---------------------------------------|---|---|-----------|--------|-------------------------|---------|--------------------|---------|---------|---------|---------|---------|---------|---------|---------------|--|---|
| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p><u>MILD difficulties with learning:</u></p> <p>A child / young person who is said to have mild learning difficulties will be operating below Age Related Expectations.</p> <table border="1" data-bbox="297 448 647 858"> <thead> <tr> <th></th> <th>Mild</th> </tr> </thead> <tbody> <tr> <td>End FS</td> <td><DJ Step 12 (36 months)</td> </tr> <tr> <td>End KS1</td> <td><Y1ARE (72 months)</td> </tr> <tr> <td>End KS2</td> <td><Y4 ARE</td> </tr> <tr> <td>End KS3</td> <td><Y6 ARE</td> </tr> <tr> <td>End KS4</td> <td><Y7 ARE</td> </tr> <tr> <td>End KS5</td> <td><Entry Level2</td> </tr> </tbody> </table> <p>(See Progress Grid for interim years)</p> <p>Standardised assessment scores will be between 70-84 (above 2nd centile)</p> <p>A child / young person who is said to have mild learning difficulties is usually able to hold a conversation, and communicate most of their needs and wishes. They may need some support to understand abstract or complex ideas and be delayed across the curriculum. Such young people are often independent in caring for themselves and doing many everyday tasks. They usually have some basic reading and writing skills. Young people with Mild LD will usually have their needs met in a Mainstream setting, using resources normally available to the school / setting.</p> | | Mild | End FS | <DJ Step 12 (36 months) | End KS1 | <Y1ARE (72 months) | End KS2 | <Y4 ARE | End KS3 | <Y6 ARE | End KS4 | <Y7 ARE | End KS5 | <Entry Level2 | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • Increased differentiation of activities and materials by presentation, outcome, timing, scaffolding and additional resources • Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement • Differentiated questioning and targeted simplified level/pace/amount of teacher talk • Further modification of level, pace, amount of teacher talk to address pupils' identified need. • Alternative forms of recording routinely used to include electronic devices • Use of multi-sensory approaches • Awareness that the child / young person may need more time to complete tasks and that equality of access may mean that they need to do some things differently. • Small steps approach. • Routine feedback to pupils • Environmental considerations are made to meet the needs of all pupils e.g. seating position, personal space and classroom layouts, displays and signage • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer of skills • Flexibility of groupings allows for buddy support / good role models / focused teaching. • Advice from external agencies is implemented in the classroom • Pre and post tutoring/teaching is used to enable the pupil to engage with learning in the classroom. • Enhanced opportunities to use technological aids • Use of visual reminders, timers, resources and rewards to develop independence • Explicit teaching of strategies and use of resources to assist with the development of independent learning. | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT |
| | Mild | | | | | | | | | | | | | | | | |
| End FS | <DJ Step 12 (36 months) | | | | | | | | | | | | | | | | |
| End KS1 | <Y1ARE (72 months) | | | | | | | | | | | | | | | | |
| End KS2 | <Y4 ARE | | | | | | | | | | | | | | | | |
| End KS3 | <Y6 ARE | | | | | | | | | | | | | | | | |
| End KS4 | <Y7 ARE | | | | | | | | | | | | | | | | |
| End KS5 | <Entry Level2 | | | | | | | | | | | | | | | | |

SEND Support

Functioning/Attainment:

MODERATE difficulties with learning

A child / young person who is said to have moderate learning difficulties will be operating at the following curriculum levels:

| | |
|---------|-------------------------|
| End FS | <DJ Step 11 (30 months) |
| End KS1 | <PKSS4 (60months) |
| End KS2 | <Y2 ARE |
| End KS3 | <Y4 ARE |
| End KS4 | <Y5 ARE |
| End KS5 | <Entry Level 3 |

(See Progress Grid for interim years)

Standardised assessment scores will be between 50 and 70 (below the 2nd centile)

Young people with moderate learning difficulties will have some language skills that mean they can communicate about their day to day needs and wishes. They will require a highly differentiated curriculum and some personalised learning. They may need some support with caring for themselves, but will be able to carry out day to day tasks with support. Young people with MLD will usually have their needs met in a Mainstream setting, using resources normally available to the school / setting.

Needs-specific practice as described above, plus:

Bespoke Intervention – time bound and quantifiable:

My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.

Additional adults support the child / young person individually, under the direction of the teacher to:

- work on modified curriculum tasks;
- access regular individual support
- encourage independence
- create frequent opportunities for peer to peer interaction
- monitor the progress of the child / young person using structured methods
- Alternative curriculum pathway offers for KS4.

School / setting:

- Mainstream placement
- Universal Offer
- Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions.

Or

- Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions.
- Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online

LA:

- Hub support from Specialist teaching and Support Service (STASS) and/or EP Team
- Involvement from an Early Years Specialist Teacher or Access and Inclusion Officer via an EA1 (from health) or an early years SCIL Team referral.
- Involvement from Cognition and Learning Specialist Teachers
- BMDC central training and support offer
- Traded service from EPT

EHCP

Functioning/Attainment:

SEVERE learning difficulties

A child / young person who is said to have severe learning difficulties will be operating at the following curriculum levels:

| | |
|---------|-----------------------|
| End FS | <DJ Step 8 (20months) |
| End KS1 | <PKSS2 (36 months) |
| End KS2 | <PKSS3 |
| End KS3 | <PKSS4 |
| End KS4 | <Y1ARE |
| End KS5 | <Entry Level 1 |

(See Progress Grid for interim years)

Standardised assessment scores will be between 35 - 50 (<0.1st centile)

Young people with severe learning difficulties will usually use basic words and gestures to communicate their needs. They will need a high level of support in school / setting requiring significant personalisation of the curriculum.

They may be able to look after some if not all of their own personal care needs. Some young people will have additional medical needs and some need support with mobility issues. Young people with SLD will usually have an Education Health and Care Plan and will be educated in either a mainstream or specialist school environment.

Needs-specific practice as described above, plus:

Adapted or alternative curriculum – (Students engaged in subject-specific learning) with some elements of sensory learning. At secondary level access to a curriculum for independent living.

A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.

Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.

Bespoke Intervention – time bound and quantifiable:

Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.

School / setting:

- Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP.

or

- Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP.

Or

- Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies
- Access to appropriate resources and appropriately trained staff.

LA:

- EP monitoring support at the end of Phase;
- Teaching Support Team statutory offer;
- BMDC central training and support offer
- Traded service from EPT

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|-------------|--|--|---|---------|--------------------|---------|--------------------|---------|--------------------|---------|--------------------|---------|--------------------|-------------------|--|
| EHCP | Functioning/Attainment: | As above, plus: | School / setting | | | | | | | | | | | | |
| | <u>PROFOUND AND MULTIPLE Learning Difficulties</u> | | | | | | | | | | | | | | |
| | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">End FS</td> <td><DJ Step 5 (9months)</td> </tr> <tr> <td>End KS1</td> <td><PKSS1 (24 months)</td> </tr> <tr> <td>End KS2</td> <td><PKSS1 (24 months)</td> </tr> <tr> <td>End KS3</td> <td><PKSS1 (24 months)</td> </tr> <tr> <td>End KS4</td> <td><PKSS1 (24 months)</td> </tr> <tr> <td>End KS5</td> <td><PKSS1 (24 months)</td> </tr> </table> | End FS | <DJ Step 5 (9months) | End KS1 | <PKSS1 (24 months) | End KS2 | <PKSS1 (24 months) | End KS3 | <PKSS1 (24 months) | End KS4 | <PKSS1 (24 months) | End KS5 | <PKSS1 (24 months) | Curriculum | <ul style="list-style-type: none"> • A bespoke specialist environment to support students with complex needs • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A specialist teacher of SEND and appropriately experienced, specifically trained support staff to meet complex individualised needs. • A very high level of additional adult support with all aspects of self-care / self regulation / self-regulation (2:1) and during non-structured times (1:2) |
| End FS | <DJ Step 5 (9months) | | | | | | | | | | | | | | |
| End KS1 | <PKSS1 (24 months) | | | | | | | | | | | | | | |
| End KS2 | <PKSS1 (24 months) | | | | | | | | | | | | | | |
| End KS3 | <PKSS1 (24 months) | | | | | | | | | | | | | | |
| End KS4 | <PKSS1 (24 months) | | | | | | | | | | | | | | |
| End KS5 | <PKSS1 (24 months) | | | | | | | | | | | | | | |
| | (See Progress Grid for interim years) | Resources | <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT | | | | | | | | | | | | |
| | <p>Young people with profound and multiple learning difficulties (PMLD), will have severely limited understanding and will have multiple disabilities, which can include impairments of vision, hearing and movement as well as other challenges such as epilepsy and autism. Young people in this group need support with mobility and may have complex health needs requiring extensive support. They will require a bespoke curriculum and will have considerable difficulty communicating. Young people with PMLD will usually have an Education Health and Care Plan and be educated in a specialist provision.</p> | Environment: | | | | | | | | | | | | | |
| | | <ul style="list-style-type: none"> • Modified and supported curriculum with elements of sensory learning / A Sensory Engagement curriculum / Highly bespoke and individualised curriculum. • Use of modified and adapted teaching resources, materials and facilities to support teaching and learning / Use of specifically adapted teaching resources, materials and facilities to support teaching and learning / Bespoke and personalised resources to support the learning and mental and physical therapeutic specific needs of the child or young person. • A highly bespoke environment with access specialist therapeutic facilities and resources (based on clinical assessment) to support students with PMLD needs. | | | | | | | | | | | | | |

1.b Cognition and Learning: Specific Learning Difficulties

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
|---------------------------------------|---|--|--|
| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>Mild Needs</p> <p>Young people are likely to be working persistently below age related expectations in their area of need, with standard scores below 85 in this area, despite access to appropriate educational opportunities</p> <p>There may be inconsistencies in their profile/strengths and weaknesses</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • Increased differentiation of activities and materials by presentation, outcome, timing, scaffolding and additional resources • Differentiated questioning and targeted simplified level/pace/amount of teacher talk • Further modification of level, pace, amount of teacher talk to address pupils' identified need. • Alternative forms of recording routinely used to include electronic devices (assistive technology) • Use of multi-sensory approaches. • Awareness that the child / young person may need more time to complete tasks and that equality of access may mean that they need to do some things differently. • Routine feedback to pupils • Environmental considerations are made to meet the needs of all pupils e.g. seating position, personal space and classroom layouts, displays and signage • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer of skills • Flexibility of groupings allows for buddy support / good role models / focused teaching. • Advice from external agencies is implemented in the classroom • Pre and post tutoring/teaching is used to enable the pupil to engage with learning in the classroom. • Enhanced opportunities to use technological aids including Access to IT resources and programmes to support learning. Specific teaching of IT/Typing skills. • Explicit teaching of strategies / resources to assist with the development of independent learning. • Consideration is given to individualised and differentiated homework tasks • Staff working with the child / young person (support assistant and teaching staff) will require training to support their understanding of the child's needs and the planning of individualised programmes of support • May require special exam arrangements | <p>School / setting:</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work. <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT |

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|---------------------|---|--|--|
| SEND Support | <p>Functioning/Attainment:</p> <p>Moderate Needs</p> <p>Young people are likely to be working persistently well below age related expectations in literacy and/or numeracy despite access to appropriate interventions</p> <p>Standardised assessment scores will be between 50 and 70 (below the 2nd centile) in their area of need and on measures of cognitive processing and fluency</p> <p>Difficulties with Literacy and Numeracy are significantly impacting on access to other areas of the curriculum.</p> <p>There are clear inconsistencies in their profile/strengths and weaknesses</p> | <p>Needs-specific practice as described above, plus: Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>Additional adults support the child / young person individually, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on modified curriculum tasks; • access regular individual support • encourage independence • create frequent opportunities for peer to peer interaction • monitor the progress of the child / young person using structured methods • Adult support and subject withdrawal for daily targeted interventions to support the development of literacy and or numeracy. May require special exam arrangements • Access to appropriate resources and specific interventions. • Planned time for small group and individual working with adult support. Staff training will be necessary | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • Involvement from Cognition and Learning Specialist Teachers • BMDC central training and support offer • Traded service from EPT |
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|-------------|--|--|---|
| EHCP | <p>Functioning/Attainment:</p> <p>Severe Needs</p> <p>Young people will be working persistently within Pre Key stage levels for literacy and/or numeracy despite access to intensive, regular evidence based interventions</p> <p>Post-16 students will be, working persistently towards Entry Level in Literacy / Numeracy / Functional skills/ equivalent despite access to intensive, regular evidence based interventions</p> <p>Standardised assessment scores will be between 35 - 50 (<0.1st centile) in their area of need and on measures of cognitive processing and fluency</p> | <p>Needs-specific practice as described above, plus:</p> <p>Curriculum differentiation and / or modification needed. Adult support and subject withdrawal for daily targeted interventions to support the development of literacy and or numeracy. Will have special exam arrangements</p> <p>A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.</p> <p>Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.</p> | <p>School / setting</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
|-------------|--|--|---|

2.a. Communication and Interaction: Speech and Language

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
|---------------------------------------|---|---|---|
| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>School based and other assessments/observations including those conducted by SaLTS, EPs and/or specialist teachers indicate the child / young person has mild difficulty with speech, receptive and/or expressive language.</p> <p>Language specific screening tools such as Wellcomm (GL assessment) and The Speech, Language and Communication Progression Tools (The Communication Trust) report <i>amber</i> in some/all areas. Thus evidencing delayed developmental progress</p> <p>Standardised assessment scores from language specific tests will be between 78 and 85</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • Adjustments to the language learning environment such as lighting, noise levels, access to quiet spaces, furniture and grouping arrangements so that pupils can see visual prompts and the teacher • Attention and listening skills: identify the cause of difficulties and teach the strategies with modelling and reinforcement • High levels of visual support: use of gestures, modelling, mirroring, objects of reference, pictures, symbols, role-play etc. to augment spoken language • Adult speech that: <ul style="list-style-type: none"> ○ Uses Clear and unhurried speech with normal intonation ○ Uses short sentences and the active voice ○ Avoids metaphors and idioms and minimises abstract language ○ Phrases instructions as directions, not questions ○ Delivers instructions in manageable chunks and waits for the child's response before giving the next • Modelling the use of clarification questions and praising YP when they use them • Systems of visual feedback to allow pupils to show they have understood e.g. traffic light cards • Personalised visual timetables, choice boards, task organisers etc. • Classification of words as tier 1, 2 and 3 (Beck et al., 2013). Use of tier 1/2 words to teach/pre-teach tier 3 words • Multisensory vocabulary teaching • Shared reading and targeted play to develop and extend knowledge of tier 2 vocab • Word finding skills through the use of categorisation activities • Structured phonological awareness skills teaching in small groups • Exemplification of the different purposes/functions of language • Reinforcement of new vocabulary and concepts in a range of contexts • Inclusive practices, such as peer rehearsal, to ensure everyone can answer • Talking frames to provide a structure for reporting, telling stories and sequencing etc. • Advice available from NHS or any other commissioned SALT provider is included in planning and implemented on a regular basis • Consider referral to NHS SALT if additional/ new advice is required | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT |

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|---------------------|---|-------------|-------------|---------|-------------|---------|-------------|---------|-------------|---------|--------------|---------|----------|--|---|
| SEND Support | <p>Functioning/Attainment:</p> <p>School based and other assessments/observations including those conducted by SaLTS, EPs and/or specialist teachers indicate the child / young person has moderate difficulty with speech, receptive and/or expressive language.</p> <p>Language specific screening tools report <i>amber</i> or <i>red</i> in all areas. Administration of the screener for lower age groups will indicate delayed developmental progress with the approximate levels:</p> <table border="1" style="width: 100%;"> <tr> <td>End FS</td> <td>=/< 3 years</td> </tr> <tr> <td>End KS1</td> <td>=/< 5 years</td> </tr> <tr> <td>End KS2</td> <td>=/< 7 years</td> </tr> <tr> <td>End KS3</td> <td>=/< 9 years</td> </tr> <tr> <td>End KS4</td> <td>=/< 11 years</td> </tr> <tr> <td>End KS5</td> <td>As above</td> </tr> </table> <p>Standardised assessment scores from language specific tests will be between 72 and 77</p> <p>Diagnosis of moderate DLD or speech disorder by SaLT</p> <p>Comorbid needs that are mild/moderate</p> | End FS | =/< 3 years | End KS1 | =/< 5 years | End KS2 | =/< 7 years | End KS3 | =/< 9 years | End KS4 | =/< 11 years | End KS5 | As above | <p>Needs-specific practice as described above, plus:</p> <p>Teaching approaches emphasise direct training for staff and finely graded and practical tasks which provide opportunities for repetition and reinforcement. Furthermore, specialist advice should be sought regarding the implementation of a modified curriculum that emphasises support for speech and language. Access to appropriate resources and guidance to facilitate the development of specific speech and language interventions and targeted support.</p> <p>Bespoke Intervention – time bound and quantifiable</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent and child / young person should take place.</p> <p>Additional adults, who have received appropriate training to ensure they have the necessary skills, support the child / young person individually or as part of a small group, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on modified curriculum tasks • access regular individual support • encourage independence • create frequent opportunities for peer to peer interaction • monitor the progress of the child / young person using structured methods • work on targets as advised by Speech and Language Therapy | <p>School / setting:</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • Involvement from an Early Years Specialist Teacher or Access and Inclusion Officer via an EA1 (from health) or an early years SCIL Team referral. • BMDC central training and support offer • Traded service from EPT |
| | End FS | =/< 3 years | | | | | | | | | | | | | |
| End KS1 | =/< 5 years | | | | | | | | | | | | | | |
| End KS2 | =/< 7 years | | | | | | | | | | | | | | |
| End KS3 | =/< 9 years | | | | | | | | | | | | | | |
| End KS4 | =/< 11 years | | | | | | | | | | | | | | |
| End KS5 | As above | | | | | | | | | | | | | | |
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EHCP

Functioning/Attainment:

School based and other assessments/observations including those conducted by SaLTS, EPs and/or specialist teachers indicate the child / young person has **severe** difficulty with speech, receptive and/or expressive language.

Language specific screening tools report *amber* or *red* in all areas. Administration of the screener for lower age groups will indicate delayed developmental progress with the approximate levels:

| | |
|---------|-------------|
| End FS | =/< 2 years |
| End KS1 | =/< 3 years |
| End KS2 | =/< 5 years |
| End KS3 | =/< 6 years |
| End KS4 | =/< 8 years |
| End KS5 | As above |

Standardised assessment scores from language specific tests will be less than 70

Diagnosis of **severe** DLD or speech disorder by SaLT

Comorbid needs that are moderate/severe

Needs-specific practice as described above, plus:

Teaching approaches place a high emphasis on direct training for staff and very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement. Furthermore, specialist advice from the Speech and Language Therapy Team should be sought regarding the modifications required to provide a specialist curriculum which places a high emphasis on speech and language development in adapted or specialist teaching settings with speech and language therapy.

A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.

Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.

Bespoke Intervention – time bound and quantifiable:

Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.

Additional adults, who have received appropriate training to ensure they have the necessary skills to support the child / young person individually or as part of a small group, under the direction of the teacher to:

- work on significantly modified curriculum tasks
- access daily individual support
- encourage independence
- create opportunities for peer to peer interaction
- monitor the progress of the child / young person using highly structured methods
- provide daily small group and individual interventions to work on programmes as advised by the Speech and Language Therapy Service
- provide opportunities for the YP to engage in community activity

School / setting:

- Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP.

or

- Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP.

LA:

- EP monitoring support at the end of Phase;
- Teaching Support Team statutory offer;
- BMDC central training and support offer
- Traded service from EPT

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| EHCP | <p>Functioning/Attainment:</p> <p>School based and other assessments/observations including those conducted by SaLTS, EPs and/or specialist teachers indicate the child / young person has severe and complex difficulty with speech, receptive and/or expressive language.</p> <p>Language specific screening tools delayed developmental progress within the realm of communication with the approximate levels:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">End FS</td> <td style="padding: 2px;">=/ < 2 years</td> </tr> <tr> <td style="padding: 2px;">End KS1</td> <td style="padding: 2px;">=/ < 3 years</td> </tr> <tr> <td style="padding: 2px;">End KS2</td> <td style="padding: 2px;">=/ < 5 years</td> </tr> <tr> <td style="padding: 2px;">End KS3</td> <td style="padding: 2px;">=/ < 6 years</td> </tr> <tr> <td style="padding: 2px;">End KS4</td> <td style="padding: 2px;">=/ < 8 years</td> </tr> <tr> <td style="padding: 2px;">End KS5</td> <td style="padding: 2px;">As above</td> </tr> </table> <p>Standardised assessment scores from language specific tests will be less than 70</p> <p>Diagnosis of severe and complex needs in the realm of speech and language by a SaLT</p> <p>Comorbid needs that are severe</p> | End FS | =/ < 2 years | End KS1 | =/ < 3 years | End KS2 | =/ < 5 years | End KS3 | =/ < 6 years | End KS4 | =/ < 8 years | End KS5 | As above | <p>An alternative specialist speech and language curriculum should be provided in a specialist teaching setting with access to speech and language therapy from local NHS core services or from another commissioned provider</p> <p>Use of appropriate resources and access to specific interventions from specialist staff. Planned time for small group and individual working with adult support. Staff training</p> <p>High level of adult support for learning.</p> <p>Alternative and Augmentative Communication (AAC) will be considered.</p> | <p>School / setting:</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A very high level of additional adult support with all aspects of self-care / self regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
| | End FS | =/ < 2 years | | | | | | | | | | | | | |
| End KS1 | =/ < 3 years | | | | | | | | | | | | | | |
| End KS2 | =/ < 5 years | | | | | | | | | | | | | | |
| End KS3 | =/ < 6 years | | | | | | | | | | | | | | |
| End KS4 | =/ < 8 years | | | | | | | | | | | | | | |
| End KS5 | As above | | | | | | | | | | | | | | |
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2.b Communication and Interaction: Social Communication including those with a diagnosis of ASC

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>A child / young person will have social communication and interaction differences, plus difficulties with social imagination, flexibility of thought, executive functioning and sensory processing that impact on some aspects school / School / setting life.</p> <p>School / setting staff could consider using any of the following assessments to identify and assess need;</p> <ul style="list-style-type: none"> • Engagement measure, • Wellbeing profile, • Sensory profile, • Behavioural analysis, • Language assessment (e.g. Elklan) and • Curriculum assessments. | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • A predictable environment and routine within a highly structured curriculum. • A differentiated curriculum incorporating the young person’s needs (this may include planned learning opportunities for tasks at developmental level rather than age). Within the differentiation, there should be a high emphasis on speech and language and social interaction development. • Use of visual prompts to support classroom routines and promote independence (these may need to be personalised to learning style to promote engagement) e.g. visual timetables. • Access to a quiet, distraction free work space for independent working or to calm/refocus in or near the classroom (if needed). • Pre and post teaching, shared with the home setting, to enable the child / young person to engage with learning in the classroom. • Demonstration provided of what is expected and the child / young person is given routine feedback e.g. using a system of visual feedback to show if something has been understood. • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer and generalisation of skills. • Ensuring that preferred methods of communication (as well as level of eye contact) are known by all staff within school / setting. • The young person’s name or agreed cue is used to gain their attention. • Minimal use of abstract language and targeted instructions considering young person’s language level and the pace/amount of teacher talk. • Instructions must be broken down into manageable chunks and given in order. The child / young person must be given processing time. • ‘Rules’ of good listening displayed, taught, modelled and regularly reinforced e.g. the child / young person is aware of pre-arranged cues for active listening. | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement. • Universal Offer. • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer. • Traded service from EPT. |

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| | | <ul style="list-style-type: none">• The child / young person is encouraged and shown how to seek clarification and ask for help.• Additional support is used effectively to prompt the child / young person to ask and answer questions.• A range of structured and multi-sensory approaches used to support spoken language e.g. symbols, pictures, concrete apparatus, artefacts, role play.• Supporting the child / young person as needed to access and engage in social situations using strategies such as speaking buddies or similar (peer talk) to encourage responses.• Support to model appropriate coping strategies for emotional regulation and social problem solving.• Sensory adjustments to meet the needs of the child / young person and reasonable adjustments made as needed e.g. low stimulus display boards, use of ear defenders.• Alternative forms of recording using technological aids are routinely used, e.g. iPad, recording software etc.• Use of AET (Autism Education Trust) Audit Tool to review whole school / School / setting practice.• Advice may be available from NHS or any other commissioned provider (consider referral to NHS SALT if additional/ new advice is required)• Supported transition at the end of each academic year, particularly between phases. Information should be shared with key staff and a programme of activities should be planned to assist transition | |
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| <p>SEND Support</p> | <p>Functioning/Attainment:</p> <p>A child / young person will have social communication and interaction differences, plus difficulties with social imagination, flexibility of thought, executive functioning and sensory processing that will significantly affect their access to learning, including the social/emotional curriculum and all aspects of school / setting life. This is especially true in new and unfamiliar contexts.</p> <p>School / setting staff should consider using any of the following assessments to identify and assess need;</p> <ul style="list-style-type: none"> • Engagement measure, • Wellbeing profile, • Sensory profile, • Behavioural analysis, • Language assessment (e.g. Elklan) and • Curriculum assessments. | <p>Needs-specific practice as described above, plus: The curriculum should be modified and place high emphasis on social communication and social skills development, incorporating specialist advice. Approaches used should be based on best possible evidence and have required impact on progress.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>In addition to High quality teaching (see above), additional adult support individually or within a group, under the direction of the teacher, to:</p> <ul style="list-style-type: none"> • Access the curriculum and/or to work on modified curriculum tasks. • Access individual or small group sessions, to work on targets as advised by external agencies e.g. Speech and Language Therapy, Communication and Interaction Team. For example, small group sessions to work on social interaction skills, including support to apply into real life situations. • Support or provide alternative provision for unstructured times e.g. break times • Support the child / young person to recognise and understand their emotions e.g. Emotion Coaching and to then consistently use visuals provided for emotional regulation throughout the day. • Access sensory activities during the day to meet sensory need as appropriate e.g. movement breaks, walking, stimulus reduction. | <p>School / setting:</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • Involvement from an Early Years Specialist Teacher or Access and Inclusion Officer via an EA1 (from health) or an early years SCIL Team referral. • BMDC central training and support offer. • Traded service from EPT. |
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| EHCP | <p>Functioning/Attainment:</p> <p>A child / young person will have social communication and interaction differences, plus difficulties with social imagination, flexibility of thought, executive functioning and sensory processing that will severely affect their access to learning, including the social/emotional curriculum and all aspects of school / setting life. This is especially true in new and unfamiliar contexts. It will also affect access at times of high stress/anxiety in some known and familiar contexts and with familiar support/people available.</p> <p>School / setting staff must consider using any of the following assessments to identify and assess need;</p> <ul style="list-style-type: none"> • Engagement measure, • Wellbeing profile, • Sensory profile, • Behavioural analysis, • Language assessment (e.g. Elklan) and • Curriculum assessments. | <p>Needs-specific practice as described above, plus:</p> <p>The curriculum should be individualised with high emphasis on social communication, social skills development and sensory adaptations, incorporating specialist advice.</p> <p>A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.</p> <p>Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.</p> <p>Additional adults support the child / young person individually or within a small group, under the direction of the teacher to;</p> <ul style="list-style-type: none"> • Work on bespoke curriculum tasks focused upon developing key skills and encouraging independence, motivation and engagement. • Implement provision and strategies outlined in EHCP • Alternative assessment / qualifications (ASDAN etc.). • Develop independent life skills through access to targeted interventions and engagement in community activity. • Access individualised strategies e.g. alternative Communication systems if appropriate. • Express thoughts and opinions on their strengths, areas to develop and needs to feed into the statutory review process (pupil voice) • Use holistic approaches such as SCERTS (Social Communication, Emotional Regulation and Transactional Supports), or AET Progression Framework to establish baseline assessments and for target setting. | <p>School / setting:</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase. • Specialist Teaching Support Team statutory offer; • BMDC central training and support offer. • Traded service from EPT. |
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| EHCP | <p>Functioning/Attainment:</p> <p>A child / young person will have social communication and interaction differences, plus difficulties in social imagination, flexibility of thought, executive functioning and sensory processing that will profoundly affect their access to all aspects of school / setting life, even in known and familiar contexts and with familiar support/people available.</p> <p>School / setting staff must consider using any of the following assessments to identify and assess need;</p> <ul style="list-style-type: none"> • Engagement measure, • Wellbeing profile, • Sensory profile, • Behavioural analysis, • Language assessment (e.g. Elklan) and • Curriculum assessments. | <p>As above, plus;</p> <p>Curriculum</p> <ul style="list-style-type: none"> • Modified and supported curriculum with elements of sensory learning / A Sensory Engagement curriculum / Highly bespoke and individualised curriculum. <p>Resources</p> <ul style="list-style-type: none"> • Use of modified and adapted teaching resources, materials and facilities to support teaching and learning / Use of specifically adapted teaching resources, materials and facilities to support teaching and learning / Bespoke and personalised resources to support the learning and mental and physical therapeutic specific needs of the child or young person. • Greater focus on life skills, independence and preparation for adulthood. • Alternative assessment / qualifications (ASDAN etc.). • Alternative communication used, including PECS, Makaton, AAC devices etc. • Access to specialist agencies such as Speech and Language, Physiotherapy, Nursing Team, Music Therapy. • Access to specialist resources and facilities such as Rebound, Hydrotherapy • Support with personal hygiene and support at mealtimes. <p>Environment:</p> <ul style="list-style-type: none"> • A highly bespoke environment with access specialist therapeutic facilities and resources (based on clinical assessment) to support students with profound ASC needs. | <p>School / setting:</p> <ul style="list-style-type: none"> • A bespoke specialist environment to support students with complex needs • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A specialist teacher of SEND and appropriately experienced, specifically trained support staff to meet complex individualised needs. • A very high level of additional adult support with all aspects of self-care / self regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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3: Social, Emotional and Mental Health Needs

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>A child / young person may have mild presentation of social, emotional and mental health difficulties which could include issues with:</p> <ul style="list-style-type: none"> • social skills • emotional awareness/regulation • resilience and self esteem <p>which is beginning to have an impact on some aspects of school / School / setting life in areas such as academic progress, relationships or mental health.</p> <p>Identified through assessment such as observation, Boxall Profiles, STAR analysis or similar.</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • An appropriate whole school / setting ethos which includes a focus on the promotion of good mental health and well being • A positive behaviour policy which is socially and emotionally differentiated to meet the needs of all pupils and reviewed with staff at least annually • A classroom and playground environment which focuses on supporting positive relationships and the development of social skills • The provision of planned opportunities for pupils to learn social and emotional skills and build resilience • Consistent systems in place to ensure effective behaviour management strategies including effective consequences both positive and negative (rewards and sanctions) • Effective links between pastoral support, personal and social education, SEN and the curriculum • Differentiation of teaching and learning both academically and socially and emotionally • The planned teaching of personal social and emotional skills (e.g. a curriculum such as SEAL or targeted PHSE provisions) • Planned teaching of social communication skills • Personalised motivational reward systems covering targeted lessons / activities • Use of different teaching styles • Clear routines for transitions, for example planning for them with warnings • Careful consideration to enable adjustments to classroom organisation, seating and group dynamics • Nurturing classroom approaches • Opportunities to develop positive staff /child relationships • Offering a child / young person opportunities to take on responsibilities e.g. class monitors, prefects, school council reps • Coordinated approach to the young person's support to promote sharing of Information about a young person's needs/difficulties is shared with relevant staff • Sharing of advice on successful strategies and set targets e.g. use of visual supports, developing organisational skills. | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT • Traded Service SEMH |

- Classroom Teaching Assistance (TA) is targeted towards support for access for specific tasks/School / settings, based on IEP targets
- Planned and regular opportunities for small group work based on identified need

A suitable monitoring system should be in place to assess a young person's need, identify outcomes, implement support and monitor and evaluate progress, such as a one-page profile, a pupil passport or similar. The young person's day should be modified and/or differentiated with a strong emphasis on developing social and emotional regulation. The pupil may benefit from a predictable environment and routine within a structured curriculum with positive reinforcement.

Additional adults support the child / young person individually, under the direction of the teacher to:

- Teach social and emotional skills and address behavioural targets on individualised plans.
- Use key-working approaches to ensure the child / young person has a trusted adult to offer support during vulnerable times.
- Provide personalised reward systems known to all staff in school who have contact with the young person, implemented consistently across the curriculum.
- Deliver time-limited intervention programmes with staff who have knowledge and skills to address specific needs.
- Enable some planned time in smaller groups in order to develop social skills and emotional regulation.
- Provide access to appropriate support to aid the development of relationships (Buddies, Mentors, ESAs)

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| SEND Support | <p>Functioning/Attainment:</p> <p>A child / young person will have moderate presentation of social, emotional and mental health difficulties which is not responding to previous support strategies.</p> <p>This could include issues with:</p> <ul style="list-style-type: none"> • social skills • emotional awareness/regulation • resilience and self esteem <p>Detailed and targeted observation plus more systematic application of assessment tools to gain detailed evidence over time to support a planned approach, from which action plans are developed and regularly reviewed</p> | <p>Needs-specific practice as described above, plus: School / setting offer should be significantly modified and differentiated with an emphasis on developing social skills and emotional regulation. This will include a predictable environment and routine within a structured curriculum with positive reinforcement. Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>Additional identified adults support the child / young person individually, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • Access the curriculum in an inclusive mainstream School / setting. • Teach social and emotional skills daily to address behavioural targets on individualised plan (e.g. My Support Plan). • Use key-working approaches to ensure the child / young person has a trusted adult to offer support/withdrawal during vulnerable times. • Plan and deliver time-limited and evaluated intervention programmes with familiar staff who have knowledge, skills and experience to address young person’s specific needs. • Have planned, frequent time in smaller groups and individually in order to develop social skills and emotional regulation. • Provide opportunities for the child / young person to develop self-monitoring skills at the end of each session • Enable regular access to appropriate support to aid the development of relationships (Buddies, Mentors, ESAs) | <p>School / setting:</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • Involvement from an Early Years Specialist Teacher or Access and Inclusion Officer via an EA1 (from health) or an early years SCIL Team referral. • BMDC central training and support offer • Traded service from EPT • Traded Services from SEMH |
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| EHCP | <p>Functioning/Attainment:</p> <p>Child / young person presents with severe and persistent levels of social, emotional, mental health difficulties at all times, which are complex and long term and have not responded sufficiently to strategies, provision and adjustments at the SEND Support level of the graduated response. 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> <p>SEMH needs are severe in terms of frequency, duration and intensity.</p> <p>On-going assessment, which is multi-agency and involves parents/carers and a range of specialist professionals, such as CAMHS, EP, YOT, therapeutic provisions</p> | <p>Needs-specific practice as described above, plus:</p> <p>Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement. Consideration given to an environment that ensures the safety of the individual and others. Appropriately trained support for physical intervention/restraint. A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.</p> <p>Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.</p> <p>Additional adults support the child / young person individually or within a small group, under the direction of the teacher to;</p> <ul style="list-style-type: none"> • Deliver programmes of intervention based on evidence based approaches where appropriate. • Where recommended by health, planned programmes of therapeutic intervention • Intensive use of key-working approaches to ensure the child / young person has a trusted adult to offer support/withdrawal during vulnerable times. • Provide a personalised reward systems known to all staff in school / setting who have contact with the young person, implemented consistently across the curriculum. | <p>School / setting:</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT • Traded services from SEMH |
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| EHCP | <p>Functioning/Attainment:</p> <p>Difficulty managing emotional responses leading to extreme and demanding and/or dangerous behaviour which affects safety of self and others.</p> <p>SEMH needs profoundly affect access to learning due to frequency, duration and intensity.</p> <p>On-going assessment, which is multi-agency and involves parents/carers and a range of specialist professionals, such as CAMHS, EP, YOT, therapeutic provisions</p> | <p>Access to a specialist or Resourced Mainstream Social Emotional and Mental Health provision, providing provision described above, plus:</p> <ul style="list-style-type: none"> • An environment with a high teacher/pupil ratio. • Highly individualised curriculum approach and planned opportunities to access specific individual programmes of support. • Where appropriate, alternative assessment / qualifications (ASDAN etc.). • Access to multi agency support and strategies. • An environment that ensures the safety of the individual and others. • Appropriately trained support for physical intervention/restraint. • Where identified in EHCP, access to therapeutic intervention, support and strategies. <p>Curriculum</p> <ul style="list-style-type: none"> • Adapted or alternative curriculum – (Students engaged in subject-specific learning). <p>Resources</p> <ul style="list-style-type: none"> • Use of modified and adapted teaching resources, materials and facilities to support teaching and learning / Use of specifically adapted teaching resources, materials and facilities to support teaching and learning / Bespoke and personalised resources to support the learning and mental and physical therapeutic specific needs of the child or young person. <p>Environment:</p> <ul style="list-style-type: none"> • A highly bespoke environment with access specialist therapeutic facilities and resources (based on clinical assessment) to support students with severe and complex needs. | <p>School / setting</p> <ul style="list-style-type: none"> • A bespoke specialist environment to support students with complex needs • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A specialist teacher of SEND and appropriately experienced, specifically trained support staff to meet complex individualised needs. • A very high level of additional adult support with all aspects of self-care / self regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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4.a Sensory and/or Physical Needs: Visual Impairment

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>Visual loss is classified as mild with acuities in the range 6/12 to 6/18 Snellen / Kay or LogMAR 0.3 – 0.48</p> <p>Access to standard print sizes, age appropriate; some children may require larger print for sustained periods of reading</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • High quality teaching with a specific consideration for children with visual impairment needs in line with advice from initial assessment by QTVI. • Ensuring that all appropriate staff have information relating to the CYP’s vision needs. • School / setting must ensure that support is given to enable teachers to plan appropriately: <ul style="list-style-type: none"> ○ Glasses wear ○ Seating position and environmental factors affecting vision ○ Presentation of learning materials; differentiation of learning resources in line with advice i.e. worksheet size and format etc. made by staff within school / setting. ○ Teaching strategies to minimise impact of CYP’s vision; pace, oral descriptions, amount of copying /distance work etc. ○ Teaching methods which facilitate access to the curriculum, social / emotional development and class participation. • ICT is used to increase access to the curriculum, where appropriate • Where required; regular targeted small group support as deemed necessary • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer of skills • Advice from external agencies is implemented in the classroom • Pre and post teaching is used to enable the pupil to engage with learning in the classroom. • Enhanced opportunities to use technological aids • Multisensory approaches are used, where appropriate • Pupils are taught strategies and provided with resources to assist with the development of independent learning. • Alternative ways of recording include electronic devices • Attention is paid to access arrangements for statutory tests, and exams, according to | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT |

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| | | <p>normal ways of working</p> <ul style="list-style-type: none">• Awareness that the child / young person may need more time to complete tasks and that equality of access may mean that they need to do some things differently.• help in some aspects of mobility, orientation and independence skills. Staff in the school / setting will need appropriate training• Advice from external agencies is implemented in the classroom <p>Bespoke Intervention – time bound and quantifiable:</p> <p>A monitoring system could be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress e.g. in an IEP or school / setting based equivalent.</p> <p>School / setting should share information about the child / young person with all key staff. It should be reviewed regularly in consultation with the parents and child / young person and implemented consistently across the setting e.g. a One Page Profile</p> | | |
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| <p>SEND Support</p> | <p>Functioning/Attainment:</p> <p>Vision loss is classified as moderate with acuities in the range 6/18 to 6/36 Snellen / Kay or LogMAR 0.5 – 0.78</p> <p>Near vision will typically be assessed to be N18 print size, or above</p> | <p>Needs-specific practice as described above, plus: Differentiation to take into account pace of learning and visual presentation of learning materials. Settings and student peers will need awareness raising training.</p> <p>Support from VI team will be in relation to the NatSIP Eligibility Criteria score to determine the level of input required at SEND Support Stage.</p> <p>Greater emphasis on the need for:</p> <ul style="list-style-type: none"> • modification of classroom learning materials in order to access the curriculum i.e. some reformatting and enlarged materials form part of each lesson as necessary. • assistive technology to access everyday learning tasks such as iPad or laptop with the use of screen mirroring and file sharing software. • Greater recognition of the impact of low vision on all aspects of learning, communication and social skills. • Setting staff and peers may need low vision awareness training as necessary. • Attention is paid to access arrangements for statutory tests, and exams, according to normal ways of working • The young person is likely to require a referral for assessment from a Qualified Registered Habilitation Officer for assessment, environmental advice, and direct programme of work as required. • Environmental audit necessary to assess accessibility of school environment. Teaching methods facilitate access to the curriculum, social / emotional development and class participation. • Alternative ways of recording include electronic devices and ICT is used to increase access to the curriculum, where appropriate. Attention is paid to access arrangements for statutory tests, and exams, according to normal ways of working • May need assistive technology to access everyday learning tasks and or large print learning resources to enable full access to curriculum. <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>Additional adult support 1:1 and small group work for:</p> <ul style="list-style-type: none"> • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer of skills • Implementing advice from external agencies in the classroom • Teaching strategies and providing with resources to assist with the development of independent learning. • Create frequent opportunities for peer to peer interaction | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • VI Teaching Support Team offer; • Hub support from Specialist teaching and Support Service (STASS) and/or EP Team • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Vision loss is classified as severe with acuities with the range 6.36 - 6/60 Snellen/Kay or LogMAR 0.8, or greater</p> <p>Near vision: likely to have difficulty with any print smaller than 24 point. Print sizes may be an in a range from 24 – 36, and will require significant differentiation and modification.</p> <p>Pupils likely to be Registered Sight Impaired (partially sighted) or Severely Sight impaired (blind) but still learning by sighted means.</p> | <p>Needs-specific practice as described above, plus:</p> <p>As above, plus:</p> <ul style="list-style-type: none"> • Teaching approaches consider student needs on an individualised basis in planning and delivery of curriculum. • Regular consultation with QTVI about delivery of curriculum to ensure student can fully access all curriculum areas. • Pupil unable to work from a white board in the classroom without human or technical support, such as the use of an iPad or laptop in combination with screen mirroring and file sharing software. • Setting staff make substantial adaptations to all curriculum delivery and materials to facilitate access and inclusion. • Requires significant differentiation and modification to all printed materials in order to access the curriculum • Staff in the school / setting will need appropriate training in inclusion of visually impaired learners in the classroom. • Attention is paid to access arrangements for statutory tests, and exams, according to normal ways of working in consultation with QTVI. • The young person will require a referral for assessment from a Qualified Registered Habilitation Specialist for assessment, environmental advice, and direct programme of work as required to include family and school / setting staff. <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes and:</p> <ul style="list-style-type: none"> • work on significantly modified / differentiated curriculum and learning tasks, including the speed of lesson delivery, expectations regarding quantity of work, additional time for sustained tasks and speed of working • encourage independence • create opportunities for peer to peer interaction • monitor the progress of the young person using highly structured methods • provide opportunities for YP to develop independent living skills through access to targeted interventions overseen by Qualified Registered Habilitation Specialist • provide opportunities for the YP to engage in community activity and for social and emotional development. • provide access to strands of the 'Additional/specialist VI Curriculum' as directed by QTVI • Assistive technology (ICT) essential for inclusion and access. | <p>School / setting</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • VI Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Pupils with Cerebral Visual Impairment (CVI)</p> <p>CVI must be diagnosed by an Ophthalmologist. The pupil 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 pupil's well-being.</p> <p>All pupils with CVI will have a different set of difficulties which means thorough assessment is a key aspect. The pupil may have difficulties associated with Dorsal processing stream, Ventral processing stream or a combination of both.</p> <p>Dorsal stream difficulties include:</p> <ul style="list-style-type: none"> • Difficulties seeing moving objects • Difficulties reading • Difficulties doing more than one thing at a time (e.g. looking and listening) <p>Ventral Stream Difficulties include:</p> <ul style="list-style-type: none"> • Inability to recognise familiar faces • Difficulties route finding • Difficulties with visual clutter • Lower visual field loss | <p>Needs-specific practice as described above, plus:</p> <p>Any combination of difficulties will have a major impact on the pupil's ability to access the curriculum. Without input from a QTVI they will be unable to reach their full potential and will need some level of support from the VI Team; The school / setting must ensure that all staff are aware that the pupil will be experiencing visually related learning difficulties, and provide support to enable teachers to plan appropriately, based on previous visual performance and / or prognosis of possible changes. The school / setting must monitor pupil progress in this respect.</p> <p>This includes:</p> <ul style="list-style-type: none"> • Teaching methods which facilitate access to the curriculum, social / emotional development and class participation. • Setting staff make substantial adaptations to curriculum delivery and materials to facilitate access for a child with CVI • Setting staff provide modification / differentiation of learning materials to facilitate access. e.g. attention to speed of lesson delivery and speed of working of VI pupil. • ICT is used to increase access to the curriculum, where appropriate • Attention is paid to access arrangements for statutory tests, and exams, according to normal ways of working in consultation with QTVI. • Advice for teachers regarding ways to include the pupil in mainstream lessons • Training for staff on CVI and implications for learning <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes</p> <p>Additional adult support in class, and around school / setting, as indicated by assessment, to facilitate inclusive and independent learning, preparation of resources, and to ensure safety and.:</p> <ul style="list-style-type: none"> • Provide suitable technology such as laptop, audio books, speech software • Advice for teachers regarding ways to include the pupil in mainstream lessons • Training for staff on CVI and implications for learning • On-going assessment, teaching, advice, support and monitoring from a QTVI, to work with the pupil, their family and with school / setting staff. • Individual 1-1 for Habilitation and mobility teaching, as appropriate from Qualified Registered Habilitation Specialist • ICT and low vision aid skills training • Suitable technology such as laptop, audio books, speech software • Specific skill teaching e.g. touch typing, working with speech software/ amanuensis | <p>School / setting</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • VI Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Vision loss is classified as profound with acuities less than 6/60. LogMAR 1.32 plus</p> <p>Educationally blind / braille user / can access small quantities of print larger than N36</p> <p>Usually pupils who are born with severe visual impairment, and are identified early on as being tactile learners.</p> <p>Pupils who may be new to the country, with severe visual impairment. Pupils who may have suffered a late onset visual impairment, or where their vision has deteriorated rapidly.</p> <p>These pupils 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.</p> | <p>Needs-specific practice as described above, plus: Access to specialist provision to provide:</p> <ul style="list-style-type: none"> • Daily access to a Qualified Teacher of the Visually Impaired (QTVI) • Small group (up to 1:6) teaching by QTVI Usually for English and maths (10 hrs per week). • Weekly teaching of mobility skills from a qualified Habilitation Officer. • Social / Life Skills teaching in small group, up to 1:6 once a week with specialist support staff trained in meeting the needs of children with a vision impairment. • Access to mainstream classes facilitated by daily advice and input / delivery from QTVI. • In class resources adapted (large print or braille) specialist curriculum resource officer specialist support staff required to produce. • Specialist teaching of tactile learning. • Support from VISSA and or QTVI in class to ensure full access and understanding. • Lunchtime and break time support at a ratio of 1:4 (primary). • Up to 3 x per week braille teaching or specialist teaching of ICT suitable for use by children with a vision impairment. • Access to a specialist ICT curriculum from a QTVI / VISSA or specialist technical support officer <p>Additional Secondary needs may require:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes and provide:</p> <ul style="list-style-type: none"> • 1:1 support required 100% to facilitate a further bespoke personalised timetable to support learning and progress. • Personalised curriculum with access to specific programmes and specialist resources which is in addition to the core offer for VI. • Specialist multi-agency teaching and advice (in addition to the QTVI) will be required to support the additional needs such as epilepsy, autism, cognition and learning. • And / or individual specialist support for mobility, medical and personal care needs etc. • Trained / specialist staff to support social communication, social and emotional and sensory needs of the pupil e.g. to help with emotional regulation skills, as and when required throughout the day | <p>School / setting</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A very high level of additional adult support with all aspects of self-care / self regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • VI Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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4.b Sensory and/or Physical: Hearing Impairment

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>Hearing loss:</p> <ul style="list-style-type: none"> • mild with unaided threshold 21-40 dBHL or • unilateral with at least a moderate loss in affected ear <p>It is expected that a child with this level of hearing loss will score in the National Sensory Impairment Partnership (NatSIP) Eligibility Criteria range of 6-20</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>Hearing friendly strategies should be evident in the school / setting. Accessibility planning should involve consideration of acoustic and sound properties in school / setting. Some adult support for learning health and safety and risk management.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • Management of the acoustic and visual environment in class so that background noise is kept to a minimum and there are not too many visual distractions • Plan for short listening periods interspersed with individual/small group activities • Position pupil appropriately for different activities – in consultation with the pupil • Ensure that your face is in clear view so that the pupil can lip-read – make use of facial expression/body language to support what you say and as much as possible stand still when speaking • Get the pupil's attention – make eye contact – before speaking • Outline the content of the lesson at the beginning using visual cues/key words • Present lesson content in as visual a way as possible: use pictures, key words on the board, demonstration • Ensure that the deaf pupil has access to what the other pupils say e.g. repeat/rephrase the answers pupils give or ask them to speak at the front • Check that a task has been understood before the child begins e.g. 'tell me/show me what you have to do' • Recap main points at the end and provide an opportunity for the child to show that they have understood • Get feedback from the pupil regularly to monitor their access to lessons • Opportunities for 1:1 and small group work • Teaching methods which facilitate access to the curriculum, social/emotional development and class participation • Advice from Low Incidence Team is implemented in the classroom • Regular checking of auditory equipment: may have hearing aids and possibly a radio aid | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service and/or EP Team • BMDC central training and support offer • Traded service from EPT |

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| <p>SEND Support</p> | <p>Functioning/Attainment:</p> <p>Hearing Loss:</p> <p>Bilateral moderate (unaided threshold 41-70 dBHL) or severe (71-95dBHL) permanent hearing loss</p> <p>It is expected that a child with this level of hearing loss will score in the NatSIP Eligibility Criteria range of 21-30</p> | <p>Needs-specific practice as described above, plus:</p> <ul style="list-style-type: none"> • Hearing friendly strategies should be evident in the school. Accessibility planning should involve consideration of acoustic and sound properties in school / setting. • Teaching methods which facilitate access to the curriculum, social/emotional development and class participation <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <ul style="list-style-type: none"> • Modified curriculum tasks to allow access as advised by a Teacher of the Deaf <p>Additional adult support 1:1 and small group work for:</p> <ul style="list-style-type: none"> • Modified curriculum tasks to allow access as advised by a Teacher of the Deaf • Regular opportunities for 1:1 and small group work for specific identified parts of curriculum: <ul style="list-style-type: none"> ○ explanation, clarification and reinforcement of lesson content and language ○ specific interventions for speaking, listening and teaching of phonics ○ teaching strategies to assist the development of independent learning, ○ work on targets as advised by a Teacher of the Deaf ○ to develop social skills • Modification to the presentation of assessments • Create frequent opportunities for structured peer to peer interaction • Adult support to facilitate the development of independence and class participation • Monitor the progress of the young person using structured methods • Regular checking of auditory equipment: will have hearing aids and likely to have a radio aid • Pupils are taught strategies and provided with resources to assist with the development of independent learning • Daily checking of hearing aids and other technology • Advice from Teacher of the Deaf is implemented in the classroom | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • HI Teaching Support Team offer • Hub support from Specialist teaching and Support Service and/or EP Team • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Hearing loss:</p> <p>Bilateral severe (unaided threshold 71-95 dBHL) or profound (>95dBHL)</p> <p>It is expected that a child with this level of hearing loss will score in the NatSIP Eligibility Criteria range of 31-50</p> | <p>Needs-specific practice as described above, plus:</p> <p>Hearing friendly strategies should be evident in the school / setting. Accessibility planning should involve consideration of acoustic and sound properties in school / setting. Some adult support for learning health and safety and risk management.</p> <p>Access to speech dependent on hearing aids or cochlear implant and radio aid in school / setting. Highly likely to develop spoken language as preference and for curriculum delivery</p> <ul style="list-style-type: none"> • Considerable differentiation and / or modification needed in all areas of the curriculum. <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher and Teacher of the Deaf, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes and:</p> <ul style="list-style-type: none"> • work on significantly modified curriculum tasks • reinforce lesson content • support language development and differentiate language used in the classroom to an accessible level • provide daily individual support • encourage independence • create opportunities for peer to peer interaction • monitor the progress of the young person using highly structured methods • Work on programs advised by a Teacher of the Deaf and/or Speech and Language Therapist • Pre-teach new language • explain, clarify and reinforce lesson content • deliver modified curriculum tasks • Pre-teach new language • explain, clarify and reinforce lesson content • deliver modified curriculum tasks • support language development • create opportunities for peer to peer interaction • encourage independence • Implement advice from the Low Incidence Team in the classroom | <p>School / setting</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • HI Teaching Support Team statutory offer; • EP monitoring support at the end of Phase; • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Hearing loss is classified as profound with unaided threshold in excess of 95 dBHL.</p> <p>Bilateral severe/profound permanent hearing loss or Moderate hearing loss with additional complicating factor e.g. late diagnosis Additional language/learning difficulties associated with hearing loss BSL/SSE is highly likely to be needed for effective communication</p> | <p>Curriculum delivery in Local Authority led Resource Provision (LALRP), Mainstream or Special School / setting providing a highly individualised mainstream curriculum approach and planned opportunities to access specific individual programmes of specialist support and teaching from appropriately trained staff.</p> <ul style="list-style-type: none"> • Daily advice and input from a Qualified Teacher of the Deaf (QTOD) on a range of issues pertinent to deaf children • Small group (no more than 1:6) teaching by QTOD, usually for English and maths (10 hrs per week). • Small group (no more than 1:6) teaching by a QTOD for other subjects as required if unable to access mainstream teaching. • Weekly teaching of British Sign Language by a Deaf Instructor. • Delivery of specialist curricula for Deaf pupils such as Personal Understanding of Deafness (PUD) / Emotions curriculum. • Access to an Educational Audiologist and appropriate equipment to facilitate access to learning through residual hearing. • In class communication and learning support from specialist support staff trained in British Sign Language functioning equivalent to BSL Level 3 / or working towards level 3 (depending upon group / setting) • Access to mainstream classes facilitated by daily advice and input / delivery from QTOD • Access to a Highly Specialist Speech and Language Therapist, skilled in meeting the needs of deaf and hearing impaired children. <p>Additional Secondary needs may require: All the above plus:</p> <ul style="list-style-type: none"> • 1:1 support required 100% to facilitate a further bespoke personalised timetable to support learning and progress. • Personalised curriculum with access to specific programmes which is in addition to the core offer for Deaf / HI. • Specialist multi-agency teaching and advice (in addition to the QTOD) will be required to support the additional needs such as epilepsy, autism, cognition and learning. • And / or Individual specialist support for mobility, medical and personal care needs. • Trained / specialist staff to support social communication, social and emotional and sensory needs of the pupil e.g. to help with emotional regulation skills, as and when required throughout the day. • Individualised curriculum with specific programmes to support both the learning and SEMH needs of the pupil (in addition to the provision required for the sensory needs). • 1:1 specialist adult support for 100% of the time (within a small group setting or as separate 1:1 provision with appropriate adult). • Specialist/trained adult support, equivalent to 1:1, throughout the school day to ensure the physical and emotional safety of the pupil, peers and adults e.g. breaks, lunchtimes and on educational visits. | <p>School / setting</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A very high level of additional adult support with all aspects of self-care / self regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • HI Teaching Support Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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| | | <ul style="list-style-type: none">• Provision of appropriate specialist resources to support the individual with their social and emotional needs e.g. calm box, self-regulation tools etc.• Provision of an appropriate environment to suit the learning and social and emotional needs of the pupil with additional space e.g. calm room which can be used to ensure the safety of the individual, peers and adults.• Access to a range of appropriate multi-agency support and strategies e.g. SEMH team, Deaf CAMHS• Appropriate training for staff to support physical intervention e.g. Team Teach and SEMH needs e.g. Attachment training ideally from someone with experience of children with who are Deaf / hearing impaired• Trained / specialist staff to support social communication, social and emotional and sensory needs of the pupil e.g. to help with emotional regulation skills, as and when required throughout the day. | |
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4.c Sensory and/or Physical Needs: Multi-Sensory Impairment

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| SEND Support | <p>Functioning/Attainment:</p> <p>Mild loss in both modalities</p> <p>May have Auditory Processing Disorder/Auditory Neuropathy/Cerebral Visual Impairment</p> <p>Non progressive condition</p> | <p>Needs-specific practice as described above, plus: attention to seating, lighting, visual environment and acoustics. Consideration must be given to visually presented information, task instruction and oral sentence structure. Attention should be paid to speech development, the development of oral expression and aspects of orientation, mobility and independence skills, through curriculum differentiation</p> <p>Staff in the school / setting will need appropriate training and awareness of the potential impact of dual-sensory impairment should be evident in the classroom. The pace of learning should afford opportunities for clarification and reinforcement to ensure understanding</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>Additional adults support the child / young person individually, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on modified curriculum tasks; • access regular individual support • encourage independence • create opportunities for peer to peer interaction • monitor the progress of the A child / young person using structured methods • provide access to specialist delivery of the 'Additional Curriculum' | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Specialist teaching and Support Service and/or EP Team • BMDC central training and support offer • QTMSI Offer of initial advice and assessment • Traded service from EPT |

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| EHCP | <p>Functioning/Attainment:</p> <p>Moderate loss in one modality and mild/moderate in the other</p> <p>May have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment</p> <p>May have additional complex needs.</p> | <p>Needs-specific practice as described above, plus:</p> <p>As appropriate to assessed needs;</p> <ul style="list-style-type: none"> • Approaches to communication that may include use of Sign Supported English (SSE) and /or finger spelling to support oral communication • Significant curriculum differentiation across all subject areas • Adapted equipment to meet specialised MSI needs • Modified and adapted materials to ensure access to learning • Regular access to a visually and acoustically appropriate environment for small group and 1:1 sessions • Enhanced opportunities to use technological aids • Regular checking of low vision and/or hearing aids • Support with the development of mobility, orientation and independence skills • Significant individual support and additional time for clarification and reinforcement of learning to ensure understanding • Staff in the school / setting will need appropriate training and awareness of the potential impact of dual-sensory impairment should be evident in the classroom <p>A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.</p> <p>Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.</p> <p>Additional adults support the child / young person individually, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on significantly modified curriculum tasks; • access daily individual support • encourage independence • create frequent opportunities for peer to peer interaction • monitor the progress of the A child / young person using highly structured methods • provide opportunities for YP to develop independent living skills through access to targeted interventions • provide opportunities for the YP to engage in community activity • provide access to specialist delivery of the ‘Additional Curriculum’ | <p>School / setting:</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies • High level of adult specialist support for learning, health and safety and risk management <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase • Teaching Support Team statutory offer • BMDC central training and support offer • QTMSI Offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>Moderate / severe/ profound loss in both modalities</p> <p>May have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment</p> <p>May have additional complex needs</p> | <p>As appropriate to assessed needs;</p> <ul style="list-style-type: none"> • Individual approaches to communication that may include tactile modes of communication, use of Sign Supported English (SSE) and /or British Sign Language, tactile sign/manual alphabet, or visual/tactile symbol systems and may involve a Total Communication approach • An individual curriculum and daily timetable to ensure the development of communication skills and understanding of daily routine and to ensure students are not included in activities that they cannot access effectively • An Individual programme to support the delivery of specialised skills which may include; Braille, Moon, visual or tactile sign or symbol systems, the use of specialist technology and aids, mobility, orientation and independence skills • Opportunities to develop understanding of specific conditions as appropriate • Learning activities that involve real objects, events and processes where students may not have direct experience of a concept • Adapted equipment to meet specialised MSI needs • Appropriately modified and adapted materials to ensure access to learning • Daily access to a visually and acoustically appropriate environment for small group and 1:1 sessions • Regular checking of low vision and/or hearing aids • A pace of learning appropriate to the individual student • A high level of individual support and additional time for clarification and reinforcement of learning to ensure understanding <p>Staff in the school will need appropriate training and awareness of the potential impact of dual-sensory impairment should be evident in the classroom</p> <p>Deafblind Intervenors will need specialised training appropriate to their role</p> | <p>School / setting:</p> <ul style="list-style-type: none"> • Specialist MSI Provision/Support • Small Class sizes with an enhanced teacher pupil ratio (not more than 1:12) in a specialist setting for up to 7 hours a week to facilitate access to an appropriately differentiated / alternative curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP and full time individual support at all other times, within a mainstreams setting. <p>OR</p> <ul style="list-style-type: none"> • Smaller class size / enhanced teacher child ratio (no more than 1:12) and small group support (1:2) within a specialist environment for 25 hours per week, plus additional adult support (1:1) for no less than 1 hours per day, to facilitate access to an appropriately differentiated / alternative curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP • High level of Individual support from a qualified/experienced Deafblind Intervenor as assessed by specialist MSI teacher <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Teaching Support Team statutory offer; • BMDC central training and support offer • QTMSI Offer • Traded service from EPT |
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4.d Sensory and/or Physical: Physical

| CoP Stage | Individual learner characteristics | Additional to and Different from Interventions and Strategies | Provision |
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| Below Age Related Expectations | <p>Functioning/Attainment:</p> <p>School based (and possibly other assessments, eg Physio / OT) indicate the child / young person has mild physical difficulties which reduce their ability to participate / function at an age appropriate level.</p> <p>Assessment of physical skills approximates to GMFCS descriptor 1 or 2.</p> <p>https://cerebralpalsy.org.au/our-research/about-cerebral-palsy/what-is-cerebral-palsy/severity-of-cerebral-palsy/gross-motor-function-classification-system/</p> | <p>Needs-specific practice which is additional to and different from that which is normally available:</p> <p>Differentiation as part of high quality teaching needed in most subject areas. A monitoring system should be in place to assess the young person's needs, identify outcomes, implement support and monitor and evaluate progress, for example an IEP or One Page Profile. The teacher takes responsibility for devising, delivering and evaluating a personalised programme that accelerates learning.</p> <p>High quality teaching should include:</p> <ul style="list-style-type: none"> • Increased differentiation of activities and materials by design (i.e. adapted pencils, scissors etc.) • Alternative forms of recording routinely used • Awareness that the child / young person may need more time to complete tasks and that equality of access may mean that they need to do some things differently. • Small steps approaches / backwards chaining approach • Resources and displays that support independence. • Environmental considerations are made to meet the needs of all pupils e.g. seating position, personal space and classroom layouts, displays and signage • Advice to address safety and access in PE, safety issues during free-flow indoor/outdoor periods and unstructured periods of the day e.g. breaks • On-going opportunities for individual support focused on specific targets with reinforcement in whole class activities to aid transfer of skills • Flexibility of groupings allows for buddy support • Advice from external agencies is implemented in the classroom • There may be need for very structured and multi-sensory approaches to learning. • The teacher takes take responsibility for supporting others to devise, deliver and evaluate a personalised programme that accelerates learning. • Pupils are taught strategies and provided with resources to assist with the development of independent learning. • Alternative ways of recording include electronic devices e.g. laptop, tablet <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Additional adults to:</p> <ul style="list-style-type: none"> • Support the development of fine and/ or gross motor skills or spatial awareness through a structured programme / implementation of activity programmes / recommendations/ care plans recommended by external agencies. • Support the development of self-care / self regulation and hygiene programmes | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Additional adult support amounting up to 10 hrs per week (pro rata) comprising of small group and 1:1 support to facilitate access to the curriculum and deliver individually planned programmes of work • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Physical / Medical Team and/or EP Team • BMDC central training and support offer • Traded service from EPT |

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| <p>SEND Support</p> | <p>Functioning/Attainment:</p> <p>School based (and possibly other assessments, eg Physio / OT) indicate the child / young person has moderate physical difficulties which reduce their ability to participate / function at an age appropriate level.</p> <p>Assessment of physical skills approximates to GMFCS descriptor 2 or 3.</p> <p>https://cerebralpalsy.org.au/our-research/about-cerebral-palsy/what-is-cerebral-palsy/severity-of-cerebral-palsy/gross-motor-function-classification-system/</p> | <p>Needs-specific practice as described above, plus: Significant modification / differentiation of some aspects of the curriculum. Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement</p> <p>Close supervision to address safety and access in PE may need alternative PE, safety issues during free-flow indoor/outdoor periods and unstructured periods of the day e.g. break times.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>My Support Plan (or equivalent) in place to assess the young person’s needs, identify outcomes, implement support and monitor and evaluate progress. Planned reviews including the parent/carer, child / young person and where possible other involved professionals should take place.</p> <p>Additional adults support the child / young person individually, under the direction of the teacher to:</p> <p>Additional adults may support the young person individually or in small groups, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on modified curriculum tasks; • access regular individual support • encourage independence whilst maintaining health and safety minimising risk • create frequent opportunities for peer to peer interaction • monitor the progress of the young person using structured methods • access programmes of support as advised by the paediatric therapy teams • assist with personal/intimate care, • access environment/ or individual equipment, • facilitate therapy programmes, • provide catch up sessions minimising the impact of missed learning due to absence relating to condition • Close supervision to address safety and access in PE • access independence and self-care / self regulation skills sessions (up to 3 times per week) • Support managing pacing and fatigue • work on modified curriculum tasks; • access regular individual support • encourage independence • create frequent opportunities for peer to peer interaction • monitor the progress of the A child / young person using structured methods • access programmes of support and equipment as advised by the paediatric therapy teams • Support to address self-care / self regulation needs and use modified equipment. • Appropriately trained support for moving and handling may be required • May require bespoke equipment- mobility and seating / accessible building, | <p>School / setting</p> <ul style="list-style-type: none"> • Mainstream placement • Universal Offer • Up to 16 hours per week additional adult support (1:1 and small group support) to facilitate access to the curriculum and deliver individually planned programmes of work / interventions. <p>Or</p> <ul style="list-style-type: none"> • Smaller class size / enhanced adult child ratio (no more than 1:13) within a mainstream environment for up to 16 hours per week, plus additional adult support for appropriately differentiated / modified or alternative curriculum and deliver individually planned programmes of work/ interventions. • Early years children may be eligible for Early Years Inclusion Funding see eligibility criteria Early Years Inclusion Funding: Bradford Schools Online <p>LA:</p> <ul style="list-style-type: none"> • Hub support from Physical / Medical Team and/or EP Team • Involvement from an Early Years Specialist Teacher or Access and Inclusion Officer via an EA1 (from health) or an early years SCIL Team referral. • BMDC central training and support offer • Traded service from EPT |
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| EHCP | <p>Functioning/Attainment:</p> <p>School based (and possibly other assessments, eg Physio / OT) indicate the child / young person has severe physical difficulties which reduce their ability to participate / function at an age appropriate level.</p> <p>Assessment of physical skills approximates to GMFCS descriptor 3 to 5.</p> <p>https://cerebralpalsy.org.au/our-research/about-cerebral-palsy/what-is-cerebral-palsy/severity-of-cerebral-palsy/gross-motor-function-classification-system/</p> | <p>Needs-specific practice as described above, plus:</p> <p>Significant modification / differentiation of the majority of the curriculum. Teaching approaches place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement for needs that are purely PD this would only be relevant when teaching independence skills, not for learning</p> <p>May need constant adult support to access the curriculum and may need to use an established communication system in a wide variety of familiar and unfamiliar situations using appropriate access methods.</p> <p>Staff may need training in the use of communication aids.</p> <p>Hygiene room access, hoisting, manual handling training, accessible building</p> <p>A monitoring system should be in place to identify short term targets from the EHCP, implement recommended provision and monitor and evaluate progress, for example an IEP.</p> <p>Termly planned sharing of information including the parent and child / young person should take place as well as a statutory annual review.</p> <p>Bespoke Intervention – time bound and quantifiable:</p> <p>Under the direction of the teacher, additional adults support the child / young person as described in section F of the EHCP, to address the identified outcomes.</p> <p>Additional adults support the child / young person individually, under the direction of the teacher to:</p> <ul style="list-style-type: none"> • work on significantly modified curriculum tasks; • access daily individual support • encourage independence • create opportunities for peer to peer interaction • monitor the progress of the A child / young person using highly structured methods • Provide opportunities for YP to develop independent living skills through access to targeted interventions • To provide opportunities for the YP to engage in community activity • Access programmes of support and equipment as advised by paediatric therapy services • assist with personal/intimate care • provide catch up sessions minimising the impact of missed learning due to absence relating to condition • access independence and self-care / self regulation skills sessions (up to 3 times per week) • If hoisting is needed this requires 2:1 support. | <p>School / setting</p> <ul style="list-style-type: none"> • Additional adult support amounting to no less than 16 hrs per week (pro rata) comprising of no less than 3 hours per day (1:1) for core learning activities, and no less than 2 hours per day small group support to facilitate access to the curriculum and deliver individually planned programmes of work and interventions / strategies outlined in EHCP. <p>or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:6) for up to 15 hrs per week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies outlined in EHCP. <p>Or</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) throughout the day with additional adult support (1:2) 20 hours per week (pro rata) to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Physical / Medical Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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| <p style="text-align: center;">EHCP</p> | <p>Functioning/Attainment:</p> <p>School based (and possibly other assessments, eg Physio / OT) indicate the child / young person has Multiple and complex physical difficulties. These will have a significant impact on posture, movement and function.</p> <p>Assessment of physical skills approximates to GMFCS descriptor 4 or 5.</p> <p>https://cerebralpalsy.org.au/our-research/about-cerebral-palsy/what-is-cerebral-palsy/severity-of-cerebral-palsy/gross-motor-function-classification-system/</p> <p>A child / young person will be wheelchair dependent and may or may not be able to communicate intentionally</p> | <p>As above through a highly individualised curriculum approach and planned opportunities to access specific individual programmes of support.</p> <p>Significant modification / differentiation of the majority of the curriculum. Will need to use an established communication system in a wide variety of familiar and unfamiliar situations using appropriate access methods.</p> <p>Staff will require advice and training re appropriate equipment and specific programmes of work and to adapted IT provision. Close supervision to address safety and access in PE, safety issues during free-flow indoor/outdoor periods and unstructured periods of the day e.g. break times. Support to address self-care / self-regulation needs and use modified equipment. Likely to require a portable writing aid. Appropriately trained support for moving and handling will need to be considered. Staff will need training in the use of communication aids.</p> <p>Some 2:1 support needed due to manual handling needs.</p> <p>Significant modification / differentiation of the majority of the curriculum. May need to use an established communication system in a wide variety of familiar and unfamiliar situations using appropriate access methods.</p> <p>Adult assistance and close supervision during unstructured times including break and lunchtimes due to physical difficulties for health and safety reasons and to provide support for social interactions.</p> | <p>School / setting</p> <ul style="list-style-type: none"> • Enhanced teacher pupil ratio (not more than 1:13) with additional adult support (1:2) for up to 15 hours a week (pro rata). Individual support (1:1) at all other times to facilitate access to the curriculum and deliver individually planned programmes of work, including interventions / strategies listed in EHCP. • A very high level of additional adult support with all aspects of self-care / self-regulation (2:1) and during non-structured times (1:2) • Access to appropriate resources and appropriately trained staff. <p>LA:</p> <ul style="list-style-type: none"> • EP monitoring support at the end of Phase; • Physical / Medical Team statutory offer; • BMDC central training and support offer • Traded service from EPT |
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