Top up Funding



The purpose of this guidance document is to support schools in understanding the funding available to them to make appropriate provision for children and young people with Special Educational Needs and Disabilities. It includes an overview of the funding available as well the application process for accessing additional funding. It also provides further guidance on the level of need and types of provision that additional funding may be allocated for.

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1. SEN Funding for Schools

The Local Authority receives money from central government each year to fund schools. This is called the Dedicated Schools Grant (DSG). The DSG is split into four blocks of 'block' funding:

- Early years block
- Schools block
- High needs block
- Central block

2. Schools Block

The schools block is the main budget for mainstream schools. The schools block is made up of:

- **Element 1 per pupil funding**. This is used by individual schools to support all pupils. It includes those who have special educational needs.
- Element 2 SEN funding. This is for schools to spend directly on making special educational provision. Element 2 funding is often referred to as the SEN Notional Budget.

The SEN funding (element 2) for each school is calculated using a formula. This formula uses the following SEN 'proxy indicators'.

- Pupil numbers (AWPU)
- Prior attainment
- Social deprivation (IDACI, FSM, FSM6)

Each year the school is informed through their School Budget Share how much Notional SEN money they will receive in support of low-cost high incident pupils.

Schools should use their Notional SEN funding to meet the needs of the cohort of children and young people with SEND in their setting.

Things that a school may want to consider when allocating funding on resources:

- Expertise within the school to plan for any resources needed
- Curriculum pathways
- Specialist advice needed
- Specific SEND resources
- Provision specified in Education Health Care Plans
- Evidence-based interventions

3. Element Three - High Needs Block - Top Up Funding

Schools and academies should have sufficient funding in their delegated SEN funding budget to enable them to support the majority of pupils' SEND where required, up to the nationally agreed cost threshold of £6,000 per pupil. Where individual pupils require additional support that costs more than £6,000, the extra costs can be met by requesting Element 3 funding for the individual pupil.

Top-Up funding is intended to provide additional, individually targeted support for named pupils who have a range of complex special educational needs whilst remaining in mainstream schools. Top- up funding is provided where these needs, and the provision required to meet them, are more significant than those typically met by resources that are already available to schools.

Pupils who access top-up funding will have exceptionally complex special educational needs. Examples of the different levels for children with high incident, low cost needs are outlined the presenting needs section of the provision guidance tables below. The tables are split into area of need and the range of complexity at which this fall. The table also contains guidance on the type of provision that is required to meet need at each level and focus' on how the pupil's individual profile affects their access to the curriculum and school/setting life.

Pupils with needs in the higher ranges are likely to require:

- significant levels of regular teaching and/or support of a teaching assistant to address individual targets;
- daily highly structured learning opportunities;
- frequent access to small groups or individualised teaching;
- additional support required to ensure an integrated learning experience;
- support to ensure equal access and social integration opportunities during the school day;
- additional curriculum activities/arrangements that need to be in place within or outside of the usual learning environment for the child or young person to achieve.

Top-up funding can be used for a range of responses to SEND including:

- providing support for pupils with complex needs in mainstream settings;
- purchase one off resources or equipment for a specific child or young person;
- SEN training and development for specific members of staff in order to deliver specific provision.

4. Applying for Element Three – High Needs -Top-up Funding

It is expected, that prior to making an application for Top-Up funding a school or setting should be able to demonstrate how it has implemented universal and targeted SEN support through a graduated approach. This should include ongoing assessment, observation, support, advice and training for staff from the SEND support services, including health, in order to identify the level and complexity of need and appropriate provision to meet these needs.

The guidance below has been developed to help formulate the type and level of provision needed over and above those usually available to schools. The guidance is broken down into areas of need and give details of the presenting behaviours, appropriate assessment and planning, teaching and learning strategies, curriculum/intervention resources and staffing for each of the ranges.

Although the ranges are hierarchical no one statement, within each range, is more important than another. It is not envisioned that all children will need provision for all statements. These statements should support SEND Support Services, SENCOs and school leaders in defining the detailed and personalised support a pupil with complex and significant needs requires. This provision should increase access to the curriculum and learning environment and to support the child or young person in achieving their outcomes.

School should present the detail of what the provision looks like within their setting as part of the application for funding and should include specifics around what is needed to be delivered (e.g. social skills group, play therapy, learning intervention, support during recreational time, etc.), how often (15 minutes per day, 3x per week, every lunchtime etc.), by whom (TA, School staff, specialist etc.) and where (e.g. in the classroom, in a quiet withdrawal place etc.) School and settings will be able to provide this in a variety of formats relevant to their setting but may want to consider the use of individualised provision maps.

In the first instance the child or young person should be discussed at the multiagency individual school locality team meeting. In the majority of cases, it is expected that the application for top up funding within a mainstream setting, would be done using a SEND Support Provision Plan, without the need for an Education, Health and Care Plan. All applications will have been co-produced and supported by the SEND Link Advisor who is part of the locality team together with any other relevant outside agencies.

The final decision will be considered by the Decision-Making Group within the LA most suited to the pupil's main area of need. The group will consider the provision outlined in the appropriate plan and supporting evidence from the school and Link Advisor, in order to determine the additional resources required above that already available to the school/setting to deliver this provision and over what period. The funding will be allocated via support units. The higher the level of provision required; the more support units will be allocated.

Details of the amount and length of funding will be fed back to the school by the Link Professional, as well as a written letter of confirmation. The additional resources will be monitored termly by the Link Advisor.

Funding already allocated to each setting, including the notional SEN budget, will be considered alongside each new application for funding.

Funding may be awarded for individual or targeted approaches, but the LA expects that this is shared, where possible, so that other children and young people can benefit from the enhanced resources, equipment training or support.

Schools can also request funding for one off payments (e.g. purchase of equipment etc.) where it is felt the cost of providing this one-off purchase falls outside of the usual resourcing of a school and beyond the notional SEN budget.

Applications for adaptations to the environment (e.g. buildings) will be considered through the Sensory support Decision Making Group.

The SEND Support Service input will not usually be funded through the top - up funding except in exceptional circumstances as this forms part of the core allocation from the Local Authority.

5. Monitoring Top-Up Funding

It is expected that the Link Professional involved with the pupil will meet termly to monitor provision in place and the impact of it.

6. Appealing a decision

Where a school or setting disagrees with the decision made by the Decision-Making Group, they should discuss their concerns with the Link Professional who will provide feedback on the decision made and where necessary liaise with the Chair of the Decision-Making Group directly to resolve the concern. If a resolution cannot be reached, then this will be escalated to the Assistant Director for SEND and Inclusion.

7. Local Authority Schools' SEN High Needs Funding

The rest of the high needs block is used by the Local Authority to fund other types of SEN support and provision including statutory functions of the LA. The money is spent on many different types of support. This includes:

- State funded special schools.
- Resource Based provision in mainstream school
- Places in alternative provision and independent schools
- Pupil Referral Units (PRUs)
- Post 16 places and top ups (elements 1,2,3)
- All SEN packages (0-25years)
- Central services (statutory) such as:
 - Advisory teacher support services
 - Educational Psychology
 - SEND Support in the early years
 - SEND Keyworkers
 - Medical provision

Provision Guidance Tables

These provision tables support the identification of appropriate provision for children with high incidence, low cost needs – these are communication and interaction, cognition and learning and Social, emotional and mental health needs.

Using the Guidance to Support Learning

It is important to recognise that High Quality Teaching will provide a firm basis upon which to use the additional strategies identified at each range. Strategies and advice from earlier ranges need to be utilised alongside more specialised information as the ranges increase. Specialist health and Social Care interventions may be required at any level.

The ranges are colour-coded throughout the school age guidance as follows:

Range 1 – Setting-based responses – Universal mainstream

Range 2 – Setting-based responses – Universal/Targeted mainstream

Range 3 – Setting-based responses – Targeted mainstream

Range 4 - Targeted/Specialist either in mainstream or Resource Base

Range 5 - Specialist Resource either in mainstream, Resource Base or Special School

Range 6 - Typically Special School / Specialist College

Range 7 – Highly Specialist Provision possibly 24 hours

It is expected that the provision detailed in ranges 1 – 3 would be met from the resources typically available to schools. In some cases, where there is a combination of needs across several different areas, some top-up funding may be available via a SEN Support Provision Plan or EHCP to support the provision within range 3.

Cognition and Learning Provision Guidance Statements

| C&L Range 1 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources & Staffing |
|--|---|--|--|--|
| Presenting Behaviours | | Strategies | | |
| The pupil will have mild difficulties in aspects of literacy, numeracy or motor co-ordination despite regular attendance, appropriate intervention and quality teaching. Pupil may have difficulties with some or all of the following: • Below expected rate of attainment • Below age-related and national expectations • Difficulty with the acquisition/ use of language, literacy, numeracy skills • Difficulty with the usual pace of curriculum delivery • Some problems with concept development • Evidence of some difficulties in aspects of literacy, numeracy and/or motor co-ordination • Attainment levels are likely to be approximately a year delayed (e.g. identified as needing universal support on Birmingham SEN Toolkits) | SCHOOL Part of normal school and class assessments Normal curriculum plans include Quality First Teaching (QFT) strategies Parents and children involved in monitoring and supporting their targets Assessment In addition to normal classroom assessments, the teacher will also discuss next steps with the SENDCO As appropriate, complete further literacy and maths assessments using the Birmingham SEN Toolkits For concerns regarding motor skills use a motor skill check list and/or speak to the school nurse/OT Seek advice and information regarding specific difficulties from the Birmingham Dyslexia guidance or speak to PSS/EPS. Planning Normal curriculum plans to include QFT strategies and adjustments to activities to remove any barriers which difficulties may present Timetable any small group intervention into weekly routine as appropriate (the number of sessions would be dependent on the intervention) | Mainstream class with flexible grouping arrangements Consider collaborative learning strategies to promote cooperation and communication and increase pupil engagement in learning Opportunities for small group work based on identified need e.g. listening/thinking Mainstream class with flexible grouping arrangements Opportunities for small group work based on identified need e.g. reading, maths, motor skills Opportunities for generic type one-to-one programmes aimed at addressing gaps — any intervention should have clear entry and exit criteria | Quality First Teaching Simplify level/pace/amount of teacher talk Emphasis on assessment for identifying and teaching gaps in learning Opportunities for skill reinforcement/revision/transfer and generalisation Formal teaching of vocabulary and concepts | Main provision by class/subject teacher Mainstream class with enhanced differentiation Time limited programmes of small group work based on identified gaps in learning Opportunities for small group support focused on specific targets, with outcomes closely monitored Pupils should be in mainstream classes and should not routinely be withdrawn and taught by a TA All school staff should have access to regular, targeted Continuing Professional Development Full inclusion within the curriculum through use of differentiation and group support Activities planned through QFT with emphasis on concrete, experiential and visual supports Multi-sensory learning opportunities Strategies employed to encourage cognitive engagement, transferring and generalising learning e.g. Thinking Skills and problem solving Links established between new and prior learning with support from review and overlearning techniques |

| | and exit points and detailed provision map • Parents and children involved in monitoring and supporting their targets | | | |
|---|--|--|--|---|
| C&L Range 2 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources and Staffing |
| The pupil will have mild but | SCHOOL | Mainstream class with enhanced | Quality First Teaching | Parents are fully informed of |
| persistent difficulties in aspects | As Range 1 plus: | differentiation, with some targeted | Programme includes | school provision for child and |
| of literacy, numeracy or motor co- | Assessment | small group support | differentiated and modified tasks | involved in decisions about |
| ordination despite regular | SENDCO will use screening | Time limited programmes of | within an inclusive curriculum | interventions to meet the pupil's |
| attendance, appropriate | tools available for use in schools | small group work based on | Modify level/pace/amount of | needs |
| intervention and quality teaching. | to establish a profile of the pupil's | identified need | teacher talk to pupil's identified | Main provision by class/subject |
| Take note of descriptors for other | strengths and weaknesses. This | Opportunities for 1:1 support | need | teacher with support from |
| SEN needs, which may not be | will inform areas for intervention | focused on specific targets, with | Programmes to consist of small | SENDCO and advice from |
| primary need. | and adjustments/arrangements | outcomes closely monitored | achievable steps | specialist teachers as appropriate |
| Continuing and persistent | required for access to the | | Pre-teach concepts and | Additional adult, under the |
| difficulties in the acquisition/use of | curriculum and exams | As Range 1 provision plus: | vocabulary | direction of teacher, provides |
| language/literacy/numeracy skills | | Specific multisensory, | Multi-sensory learning | sustained and targeted support |
| The pupil is operating at a level | Planning | cumulative, structured | opportunities | on an individual/group basis |
| well below expected outcomes | Teaching plans clearly show | programmes to support the | Emphasis on using and applying | Include withdrawal on a time |
| and there is evidence of an | adjustments made for individual | acquisition of literacy, cursive | and generalisation of skills | limited basis, entry and exit |
| increasing gap between them and | pupil to access the curriculum | handwriting, numeracy and motor | Individual targets, within group | criteria clearly stated |
| their peers despite targeted | This should include planning for | skills e.g. Cued spelling, Direct | programmes and/or 1:1, are | |
| intervention and differentiation | additional adults supporting the | Phonics, Write Start. | carefully monitored and reviewed | As Range 1 provision plus: |
| through support plan | pupil within the classroom | Opportunities for mixed | | staff to deliver specific |

groupings as pupil's cognitive

ability is likely to be higher than

their literacy skills might indicate

• The child experiences success

interventions and expectations

through carefully planned

As Range 1 provision plus:

modifications that include

as appropriate e.g. word

prediction, text-to-speech

Differentiated curriculum with

alternative methods to record and

access text. This will include ICT

 Monitor effectiveness of interventions ensuring clear entry

• SENDCO to monitor planning of

intervention. This should be time-

tabled, and a private area made

explore SPLD factors in relation

reviewing of interventions so they

to relevant guidance, including the Birmingham Dyslexia

a personalised multi-sensory

available where applicable

• Regular monitoring and

Guidance

SENDCo and PSS/EPS to

Evidence of difficulties with

processing, understanding,

access to the curriculum

intervention

sequencing and reasoning that

impact on learning and/or limit

• Progress is at a slow rate but

with evidence of response to

aspects of cognition i.e. memory,

concept development, information

multisensory, cumulative,

Adults use the developmental

level of language appropriate to

Simple Thinking Skills Activities/

Intensive use of 'Thinking Skills'

matching/visual sequencing/

classifying and categorising

the child in questioning and

structured programmes.

explanation

approach, sorting/

| . Commont in walling at the manifestation | and he adouted accordingly this | | Other recovered many includes |
|--|---------------------------------------|--|---|
| Support is required to maintain | can be adapted accordingly – this | | Other resources may include: |
| gains and to access the | should take place termly | | - Use real objects wherever |
| curriculum | Staff trained regularly on whole | | possible |
| Attainment is well below | class differentiation, / scaffolding. | | - Individual reading |
| expectations despite targeted | with opportunities for peer support | | - Alphabet arc activities |
| differentiation (e.g. identified as | | | - Busy box |
| needing targeted support on | | | - 5-minute box |
| Birmingham SEN Toolkits) | | | Visual timetables, timeline |
| Processing difficulties limit | | | |
| independence and may need | | | QFT is supplemented by |
| adult support in some areas | | | appropriate small group work with |
| May have difficulties with | | | close monitoring in place |
| organisation and independence in | | | Work on individualised |
| comparison to peers | | | outcomes (e.g. ITP) are |
| Self-esteem and motivation may | | | incorporated into provision |
| be an issue | | | Clear entry and exit criteria |
| Possibly other needs or | | | , |
| circumstances that impact on | | | |
| learning | | | |
| 3 | | | |

| C&L Range 3 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--|---|--|--|---|
| Presenting Behaviours | | Strategies | | |
| The pupil will have moderate and | SCHOOL | Mainstream class, | Quality First Teaching | Main provision by class/subject |
| persistent difficulties with | SENDCO should take advice | predominantly working on | Tasks and presentation | teacher with support from |
| literacy, numeracy or motor co- | from education and non- | modified curriculum tasks | increasingly individualised and | SENDCO and advice from |
| ordination despite regular | education professionals as | Frequent opportunities for small | modified in an inclusive | PSS/EPS and non-education |
| attendance, significant levels of | appropriate | group work based on identified | curriculum | professionals as appropriate |
| focused intervention, effective | (e.g. recommendations by | need | Visual cues to support auditory | A consistent structured |
| provision mapping and quality | PSS/EPS) | Frequent opportunities for 1:1 | information at all stages of | environment which may include |
| teaching | Reviews should take note of | support focused on specific | delivery | withdrawal, carefully monitored |
| Persistent difficulties in the | evidence-based needs | support plan targets through | Individualised level/pace/amount | and planned by class teacher for |
| acquisition/use of | Curriculum plans, and progress | intervention (e.g. Precision | of teacher talk | a specific target |
| language/literacy/numeracy skills | are closely monitored | Teaching, Toe-by-Toe, | Ensure transfer and | Additional adult, under the |
| and appear resistant to previous | Targets are individualised, short | Wordwasp, Power of 2) | generalisation of skills has | direction of the teacher, |
| interventions | term and specific (e.g. ITP) | Grouping needs to be flexible | occurred before teaching anything | provides sustained targeted |
| Pupil operating at a level | Continued regular engagement | and include positive peer models | new | support on an individual/group |
| significantly below expected | of parents/carer | with input from class teacher as | Small steps targets within group | basis |
| outcomes (e.g. identified as | Involvement of pupil in target | well as additional adults | programmes and/or 1:1 | Clear monitoring of |
| needing specialist support in | setting and personalised learning | Adults use the developmental | Alternative ways of recording as | effectiveness of interventions |
| some areas of the Birmingham | Consideration of specific | level of language appropriate to | appropriate | Additional adult to be trained to |
| SEN Toolkits) | literacy/ learning difficulties | the child in questioning and | Individualised targets are | deliver interventions and support |
| | evidence | explanation | incorporated into provision | |

| 'Thinking Skills' h, sorting/ |
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| ions and expectations |
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| C&L Range 4a | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--|---|--|--|--|
| Presenting Behaviours | | Strategies | | |
| The pupil will have significant and persistent difficulties with language, literacy, numeracy and/or motor co-ordination | SCHOOL SENDCO should take advice from education and non-education professionals as appropriate | Mainstream class, predominantly working on modified curriculum tasks Frequent opportunities for small | Quality First Teaching Tasks and presentation increasingly individualised and modified in an inclusive | Main provision delivered by class/subject teacher via a modified curriculum following advice from SENDCo, education |
| despite regular attendance and high-quality specialist intervention and teaching. • Key language, literacy and/or numeracy skills are well below functional levels for their year group (e.g. identified as needing specialist/specialist plus support across most areas of the | (e.g. assessment by PSS/EPS/Health and Social Care) • Curriculum plans, and progress are closely monitored • Targets are highly individualised and based on a small step assessment programme e.g. Birmingham SEN Toolkits, B | group work based on identified need • Daily opportunities for 1:1 multisensory support focused on specific support plan targets across a range of areas | curriculum • Visual cues to support auditory information at all stages of delivery • Teaching and activities are adapted to reduce the impact of processing difficulties e.g. working memory, processing speed | and non-education professionals as appropriate (e.g. PSS/EPS/Health and Social Care) • A consistent structured environment may include withdrawal, carefully monitored, and planned by class teacher for a specific target |
| Birmingham SEN Toolkits) Pupil cannot access text or record independently Pupil has significant levels of difficulty in cognitive processing requiring significant alteration to | Squared etc. Continued regular engagement of parents Curriculum plans, classroom support, interventions and graduated approaches are | | Individualised level/pace/ amount of teacher talk Ensure transfer and generalisation of skills has occurred before teaching anything new | Additional adult, under the direction of the teacher, provides sustained individual support, with the pupil still being included in group activities wherever possible Clear and regular monitoring of |
| the pace and delivery of the curriculum • Difficulties likely to be long term/lifelong • The condition is pervasive and debilitating and significantly affects access to curriculum and | recorded carefully to monitor the progress towards achievement of outcomes. (e.g. SSPP) | | Individualised targets within group programmes and/or 1:1 Tasks and presentation are personalised to the pupil's needs and monitored regularly to ensure they remain appropriate Emphasis on language, literacy, | effectiveness of interventions by class teacher, SENCo and other appropriate professionals • Additional adult to be trained to deliver interventions and support • Use real objects for thinking skill activities (explore the context for |
| academic progress High levels of support are required which include assistive technology Social skills and behaviour may be affected, and issues of self- | | | numeracy, PSHE and ICT • Access arrangements and adjustments are part of everyday learning and practice (normal way of working) | the objects) • Access to assistive technology should be made for those pupils with SPLD – e.g. Clicker, Text Help, Read/Write, and audio recording devices. |
| esteem and motivation are likely to be present • The pupil may appear to be increasingly socially immature and vulnerable because of limited social awareness, difficulties with reasoning, understanding or expressing thoughts | | | | |

| C&L Range 4b | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--|--|---|--|--|
| Presenting Behaviours | _ | Strategies | | |
| Severe and persistent difficulties in the acquisition/use of language /literacy/numeracy skills, within the curriculum and in out of school activities • Cognitive impairment severely restricts access to the curriculum • Cognitive impairment that is a lifelong disability and significantly impacts on social development and independence • Moderate/Severe Learning Difficulties • Complex needs formally identified/diagnosed • The level of adjustment and specialist teaching across the curriculum required is significantly greater than is normally provided in mainstream setting | SCHOOL SENDCO/Resource Base Lead should take advice from education and non-education professionals as appropriate (e.g. assessment by PSS/EPS/Health and Social Care) • Targets are individualised, short term and specific and based on a small step assessment programme e.g. Birmingham SEND Toolkits, Engagement scales, B Squared etc. • Continued regular engagement of parents • Progress is closely monitored and tracked • Curriculum plans, classroom support, interventions and graduated approaches are recorded carefully to monitor the progress towards achievement of outcomes. (e.g. SSPP/EHCP) | Modified curriculum tasks delivered within smaller class sizes Daily opportunities for small group/1:1 multi-sensory support, focused on specific support plan targets across a range of areas The pupil experiences success through carefully planned interventions and expectations | Modified class curriculum Quality First Teaching Tasks and presentation increasingly individualised and modified in an inclusive curriculum Visual cues to support auditory information at all stages of delivery Individualised level/pace/amount of teacher talk Ensure transfer and generalisation of skills has occurred before teaching anything new Small steps targets within group programmes and/or 1:1 Emphasis on literacy, numeracy PSHE and ICT Tasks and presentation are personalised to the pupil's needs and as 4a monitored regularly to ensure they remain appropriate Highly adapted teaching methods which incorporate the use of learning aids and multisensory teaching as standard | Main provision by class/subject teacher with support from SENDCo/Resource Base lead and advice from specialist teacher and non-education professionals as appropriate A consistent structured environment may include withdrawal, which is carefully monitored, and planned by the class teacher for a specific target Sustained targeted support on an individual/group basis Clear monitoring of effectiveness of interventions All adults trained to deliver interventions and support Intensive use of 'Thinking Skills' approach, sorting/matching/visual sequencing/classifying and categorising Use real objects wherever possible Pupil still included in year group activities wherever appropriate Visual timetables, timeline, cues, task plans For those pupils with SPLD access to assistive technology must be made Individualised literacy/ numeracy incorporated into provision Clear entry and exit criteria 1:1 Speech and Language Therapy if appropriate |

| C&L Range 5 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources and Staffing |
|---|--|---|---|--|
| Severe and persistent difficulties in the acquisition/use of language /literacy/numeracy skills, within the curriculum and in out of school activities. • Severe learning difficulties have been identified • Complex and severe language and communication difficulties • Profound Learning Difficulties, which are lifelong. • Complex Needs identified | • As 4b with long term involvement of specialist provision and appropriate non-educational professionals in accordance with the outcomes identified within the Education, Health and Care Plan. • Previous assessment informs the planning process for appropriate programmes • Targets are short-term and specific, monitored and reviewed on a short-term basis and may be based on non-subject specific assessment such as the engagement scales • Parents/carers are involved in all aspects | Extremely modified curriculum and individualised work Small group and 1:1 daily developing basic skills Need for specialist advice and guidance to model interventions for schools to follow above and beyond usual school offer. | As 4b plus access to aids personalised to the pupil's needs e.g. communication needs Ensure that appropriate advice and materials are always available such as PECS, Makaton, ICT | Staff need to be trained and have experience working with pupils with complex cognition and learning needs Access to extra staffing to support pupils in times of crisis and stress and to escort pupils on outings and trips Appropriately trained staff to deal with medical and physical issues as appropriate Group activities carefully monitored to ensure the pupil is not isolated or excluded Pupil still included in group activities wherever appropriate Emphasis on using real objects and experiences for all activities Visual support throughout Specialist ICT hard and software AAC systems to support communication environment Specialist equipment to promote self-help, physical access and mobility Appropriate indoor and outdoor provision in a safe and secure setting Specialist hygiene facilities if necessary Access to specialist educational and non-educational services in accordance with the EHC Plan. |

Cognition and Learning: PfA Outcomes and provision

| | Employability/Education | Independence | Community Participation | Health |
|-----------------------------|---|--|---|--|
| Reception to Y2 (5-7 years) | Child will have the listening skills and concentration to increase the amount of time they are able to maintain focus upon learning tasks Child will be developing early concepts of literacy and numeracy skills to enable them to lay the foundations of later learning. Child will have an awareness of 'growing up', and beginning to have some ideas of what they would 'like to be', when they are older. | Child will understand the concept of time and will develop the skills necessary to access digital and analogue clocks. Child will understand the concept of cooking and the contribution of ingredients to produce different foods. | Child will have an understanding of the concept of friendships and will be applying this in their approach to shared play with peers. | Child will understand the concept of being healthy, including the benefits of exercise and making healthy food choices and will begin to apply this in the context of mealtimes and attendance at clubs and sports activities. Child will understand the need for regular dental, vision and hearing checks to maintain good health. |
| Y3 to Y6 (8-11 years) | Child will understand and be able to talk about different careers and education options so that they are able to make choices about what they will do next. Child will begin to develop a profile of interests and aspirations in order to demonstrate individual strengths and skills. | Child will understand the concept of money, demonstrating awareness that different objects are of different monetary values and beginning to use money to pay for items such as snacks in school. Child will begin to understand concepts relation to travel and transport including paying for a ticket/pass, timetables, and road signs and will be aware of the role of these in facilitating independent travel. Child will understand the concept of recipes relating to preparation of food and will be able to follow these with adult support to make simple foods (cupcakes, sandwiches etc.) | Child will understand the importance of being safe within the local community, including online, and will begin to understand potential areas of risk, e.g. strangers, online hazards, bullying and ways to take steps to avoid these. Child will be familiar with the local area, including particular places, routes of travel to enable them to begin to understand where they are going and methods to get there. | Child will understand the purpose of vaccinations and will cooperate with these to ensure good medical health. Child will understand changes to their body associated with puberty and will be aware of self-care routines required to maintain good physical health. Child will understand minor health needs that they may have, asthma, eczema, difficulties with vision and/or hearing; they will understand the strategies and resources to manage these. |
| Y7 to Y11 (11-16 years) | Child will be able to understand information relating to course options (GCSE, NVQ, Entry level qualifications, vocational options etc.) including the requirements for access to a range of HE options to enable realistic and informed choices. | Child will understand monetary value, how much money they have and how much money items cost, and will be able to make decisions in relation to what they spend their money on as a first step towards financial budgeting. | Child will understand risks associated with social media, online gaming and online communities and will be increasingly competent in understanding how to keep themselves safe. Child will understand social norms and conventions in relation to a variety of | Child will understand information relating to sex education and sexual health in preparation for adulthood. Child will understand the role of the GP and the support available to them. |

| op ca wi co the Cr wo an int Cr of to sk wi Cr en | hild will be able to think about subject of the choices alongside longer term areer goals and ill be able to choose subjects and ourse options to enable next steps in eir chosen direction. hild will begin to think about and plan ork experience/part-time opportunities enable them to understand orkplace demands and requirements and to gain early experience in areas of terest for future employment. hild will continue to develop a profile interests and achievements in order demonstrate individual strengths and kills. This will be used in accordance ith careers sessions and guidance. hild will understand supported imployment options e.g. Access to | Child will demonstrate skills in accessing local transport services, buying a ticket/pass, understanding bus times, using these systems of travel to access school, for example. Child will understand information relating to different food groups and meal planning and will be able to understand instructions within a recipe card/book to enable them to cook simple meals with support. | friendships and relationships and will be able to use this knowledge to enable them to engage appropriately within a range social contexts. Child will understand options in relation to a range of leisure and social activities available and will be able to use this to make informed and positive choices about how they want to spend their free time. Child will show increased understanding of the wider picture and will build resistance to support emotional wellbeing. | Child will understand the risks associated with drugs and alcohol and will apply information learned to keep themselves safe. Child will have a more active role in understanding and managing more complex health needs to facilitate greater independence. |
|---|--|--|---|--|
| Provision Pl | ork. lease refer to detail provided within the Tognition and Learning. | Feaching and Learning Strategies and C | Curriculum/Interventions sections of the So | chool Age Ranges Guidance: |

Communication and Interaction – Autism Provision Guidance Statements

| ASC Range 1 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources & Staffing |
|--|--|--|---|---|
| Pupils will have communication and interaction needs that may affect their access to some aspects of the National Curriculum, including the social emotional curriculum and school life The pupil does not have a diagnosis of autism made by an appropriate multi-agency team Students may or may not have low level sensory needs NC Level Across the expected range with an uneven-learning profile showing relative weaknesses in some areas and strengths in others. | Assessment: • Will be part of school/setting and class teaching and assessments Planning: • Curriculum plans should include individual/group targets • Family to be involved regularly and support targets at home • Pupil will be involved in setting and monitoring targets, where appropriate • Information around the specific pupil will be shared with staff in setting at pupil progress, or equivalent, meetings | Must be included in mainstream class with specific support for targets which involve communication and interaction. Should be offered opportunities for small group work within the usual classroom planning and management. | Resources/Provision: The use of Quality First teaching approaches to support the development of social communication and interaction skills Must have full inclusion to the National Curriculum Flexibility may be required to enable the pupil to follow instructions and/or record work Instructions may need to be supported by use of visual and written cues Preparation for change and the need for clear routines will be required Reduction of complex language, especially when giving instructions and asking questions, will be required | Setting: • Flexible use of resources and staffing available in the classroom • Staff trained in de-escalation strategies Staff working directly with pupils must have knowledge and training in autism good practice when working with pupils with communication and interaction needs or autism evidenced using guidance such as AET standards with reference to the Autism Good Practice Guidance. |

| ASC Range 2 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources & Staffing |
|--|--|--|---|---|
| Presenting Behaviours | | Strategies | | |
| Pupils will have communication and interaction | Assessment: As range 1 plus: | Will be mainstream class- based and will have opportunity | As range 1 plus: • Curriculum access will be | As range 1, plus: Setting: |
| needs that affect access to a number of aspects of the | Use of more detailed NC assessment tools | for small group and individual work to target specific needs | facilitated by using a structured approach to provision which | Will need additional professional support from |
| National Curriculum, including the social emotional curriculum | Could also include other assessments relating to need, | relating to communication and interaction needs | should involve using visual systems or timetables; reducing | skilled colleagues, e.g. SENDCO, to aid curriculum |
| and school life | advice from SLT or OT advice | May need adaptations to the | language for instructions/ | modifications |
| Students may or may not | (where applicable) | working environment such as a | information giving | Should consider staff training |
| have low to moderate sensory | | quiet area within the classroom | Teaching approaches should | to ensure that they are trained |
| needs | Planning: | for individual work | take account of difficulties | to meet the needs of the |
| | Curriculum plans will reflect | As range 1 plus | identified within the range | students in their class |
| | levels of achievement and | | descriptors | |

| There may not be a diagnosis | include individually focused | The use of Quality First | Will need additional |
|---------------------------------|--------------------------------|---|---------------------------------|
| of autism by an appropriate | targets, especially in Speech, | teaching approaches to support | professional support from |
| multi-agency team. | Language and communication | the development of social | skilled colleagues to develop |
| | | communication and interaction | strategies to address social |
| NC Level | | skills | interaction, social |
| Across the expected range but | | Flexibility will be required to | communication and social |
| with an unusual profile showing | | enable the pupil to follow | understanding |
| relative weaknesses in certain | | instructions and/or record work | Will need use of additional |
| areas and strengths in others. | | Clear use of visual and written | school support to implement |
| | | cues will be useful to support | specific materials, approaches |
| | | instructions | and resources as appropriate |
| | | Preparation for change and | Staff trained in de-escalation |
| | | the need for clear routines will | strategies. |
| | | be required | Schools are encouraged to |
| | | Reduction of complex | have an Autism Lead |
| | | language, especially when | Practitioner in their setting- |
| | | giving instructions and asking | training and advice is provided |
| | | questions, will be required | by a Communication and |
| | | | Autism Team Advisor (CAT). |
| | | | Staff working directly with |
| | | | pupils must have knowledge |
| | | | and training in good practice |
| | | | when working with pupils with |
| | | | communication and interaction |
| | | | needs/Autism evidenced using |
| | | | guidance such as the AET |
| | | | standards with reference to the |
| | | | Autism Good Practice |
| | | | Guidance. |

| ASC Range 3 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources & Staffing |
|---------------------------------|---|--------------------------------|----------------------------------|-------------------------------|
| Presenting Behaviours | | Strategies | | |
| Pupils will have | Assessment: | As range 1 and 2 plus: | As range 1 and 2 plus: | As range 1 and 2 plus: |
| communication and interaction | As range 1 and 2 plus: | Inclusion within the | Will need to make noticeable | Setting: |
| needs that will moderately | More specialised assessment | mainstream classroom. | adaptations to the curriculum to | Advice/ training information |
| affect their access to the | tools in relation to specific | However, there will be a need | aid access and reduce anxiety | from Early Bird/Early Bird |
| National Curriculum, including | descriptors such as: PSE, AET | for an enhanced level of | Will need differentiation by | Plus/1st Steps and Jigsaw/ |
| the social emotional curriculum | Progression Framework, | individual support | presentation and/or outcome | Local Offer. Training will be |
| and all aspects of school life | TALC; Motivational | Targeted support will be | Will need enhanced PSHCE | sought |
| This is especially true in new | Assessment; STAR | needed which may include | teaching to ensure skills | Teaching approaches must |
| and unfamiliar contexts | behavioural analysis | unstructured parts of the day, | embedded | take account of difficulties |

| autism or C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment of independent herefore on the result of any assessment on the result of any assessment includes a profile of sensory needs diagnosis of autism made by an appropriate multi-agency diagnostic team * Students may or may not have moderate sensory needs * Planning may need to incorporate adaptations such as rest breaks, lime allocated to sensory difficulties and processing needs * Planning may need to incorporate adaptations such as rest breaks, lime allocated to sensory difficulties and processing needs * Students may or may not have moderate sensory needs * Planning may need to incorporate adaptations such as rest breaks, lime allocated to sensory difficulties and processing needs * Planning may need to incorporate adaptations such as rest breaks, lime allocated to sensory difficulties and processing needs * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Students may or may not have a diagnosic team * Planning: * Planning may need to incorporate adaptations such as rest breaks, lime allocated to sensory difficulties and processing needs * Clariculum plans will reflect levels of achievement and microlulum p | | 1 | 1 | T . | |
|--|--|---|---------------------------------|-----|---------------------------------|
| have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment adiagnosis of autism made by an appropriate multi-agency diagnostic team * Pupils may or may not have a diagnostic team * Pupils may or may not have and mount includes a profile of sensory needs * Planning: * Ourriculum plans will reflect levels of achievement and must include individually focused targets * Planning may need to incorporate adaptations such as as ret breaks, time allocated to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory and needs * Planning may need to sensory and needs * Planning may need to sensory difficulties and processing needs * Planning may need to sensory | The pervasive nature of | | | • | • |
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| adiplanning and to share with family assessment appropriate multi-agency diagnostic team must include individually focused targets Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs As range 1 and 2 plus: As range 1 and 2 plus: **The use of Quality First levels of achievement and must include individually focused targets **Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs **Planning may need to incorporate adaptations and processing needs **Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs **Planning may need to incorporate adaptations and processing needs **Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs **Planning: **Curriculum plans will reflect levels of achievement and must include individually focused targets **Planning may need to incorporate adaptations to reduce stress and anxiety **The use of Quality First teaching approaches to support the development of social communication and interaction skills **Flexibility will be required to enable the pupil to follow instructions and/or record work **Clear record work **Clear record work **Clear record work **Clear routines will be required **Reduction of complex land written cues will be required **Reduction of complex land written guidance such as the AET standards with reference to the Autism Cannon interaction and interaction skills **Schools should consider levelopment of specialist skills **Schools | have a detrimental effect on the | | | | |
| inherefore on the result of any assessment sasessment Pupils may or may not have a diagnosis of autism made by an appropriate multi-agency diagnostic team Students may or may not have moderate sensory needs Planning: Curriculum plans will reflect levels of achievement and must include individually focused targets Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs Perspectively of the development of enable the pupil to follow instructions. Preparation for change and the required to enable the pupil to formplex language, especially when giving instructions and asking questions, will be required Passesment includes a profile of sensory needs I samily Assessment includes a profile of sensory needs Planning: Curriculum plans will reflect levels of achievement and must include individually focused targets Planning: Planning: Curriculum plans will reflect levels of achievement and must include individually focused targets Planning: Planning: Curriculum plans will reflect levels of achievement and must include individually focused targets Planning: Planning: Planning: Curriculum plans will reflect levels of achievement and must include individually focused targets Planning: P | acquisition, retention and | | Support for areas of sensory | | |
| - Assessment includes a profile of sensory needs - Pupils may or may not have a diagnosis of autism made by an appropriate multi-agency diagnostic team - Students may or may not have moderate sensory needs - Curriculum plans will reflect levels of achievement and must include individually focused targets - Planning may need to incorporate adaptations such as rest breaks, time allocate to sensory difficulties and processing needs - Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs - Assessment includes a profile of sensory needs - Planning: - Curriculum plans will reflect levels of achievement and must include individually focused targets - Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs - Planning: - Curriculum plans will reflect levels of achievement and must include individually focused targets - Planning: - Curriculum plans will reflect levels of achievement and must include individually focused targets - Planning may need to incorporate adaptations to reduce stress and anxiety - As range 1 and 2 plus: - As range 1 and 2 plus: - The use of Quality First - Sechools should consider using approaches to support the development of social communication and interaction on the edvelopment of social communication and interaction on the development of social communication and interaction on the development of social communication and interaction support the development of social communication and interaction on the development of social communication and virtuence of using approaches to support the development of social communication and virtuence or support development of specialist skills - Flexibility will be required to enable the pupil to follow instructions and/or record work - Clear use of Vaulity First - Levels of Acrieval Planning Standards with reference to the Autism Cool Planning Standards with reference to the Autism Cool Planning St | | aid planning and to share with | needs which may include 'time | | |
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| recommendations made by the Autism Lead Practitioner and/or Communication and Autism | | | | | |
| Autism Lead Practitioner and/or Communication and Autism | | | | | |
| Communication and Autism | | | | | |
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| leam Advisor (CAT). | | | Team Advisor (CAT). | | |

| ASC Range 4a | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources & Staffing |
|----------------------------------|----------------------------------|-------------------------------|----------------------------|------------------------|
| Presenting Behaviours | | Strategies | | |
| Pupils will have | As range 1 – 3 plus: | As range 1 -3 plus: | As range 1- 3 plus: | As range 1 – 3 plus: |
| communication and interaction | Assessment: | Robust planning to meet | Must implement | Setting: |
| needs that significantly affect | Should include assessment | objectives defined in support | recommendations of AS /AOT | All staff aware of de- |
| their access to the National | advice from other agencies, e.g. | plans | Support | escalation strategies |
| Curriculum, including the social | SLT/OT/CAT/EP | | As range 1 -3 plus | |

emotional curriculum and all aspects of school life

- This is especially true in new and unfamiliar contexts but will also affect access at times of high stress in some known and familiar contexts and with familiar support/people available
- The pervasive nature of the Autism/ C&I need is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment
- Pupils will have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum
- Pupils may or may not have a diagnosis of autism by an appropriate multi-agency diagnostic team
- Students may or may not have significant sensory needs The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment.

The pupil will have an uneven learning profile but their attainment levels suggest they can access a differentiated mainstream curriculum.

NC Level

Across the expected range but with a significantly uneven

• Assessment should include details about sensory needs

Planning:

- Increased level of understanding by teaching and support staff will require plans for developing whole school understanding of pupil's needs
- To include all setting staff that come into contact with pupil on a daily basis
- Shadowing staff in specialist settings
- Planning must include adaptations to curriculum to ensure the development of independent learning and life skills

- Significant adaptations to curriculum, teaching methods and environment needed to access the curriculum. These will include: conceptual understanding of everyday language and subject specific vocabulary; pace of delivery; significant pre-learning and over learning of concepts and functions and use of alternative recording methods
- Where appropriate an alternative curriculum must be offered to develop independence and life skills
- Will need enhanced PSHCE and SRE programmes to ensure skills embedded; these are likely to need some element of individual work

- Key staff trained in Team Teach approaches
- Additional training of mainstream staff to support curriculum modifications and social interaction, social communication and social understanding
- Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced through the use of guidance such as the AET standards and competency frameworks, with reference to the Autism Good Practice Guidance.

| profile showing weaknesses in | | |
|-------------------------------|--|--|
| some areas and strengths in | | |
| others. | | |

| 400 Day 4h | Assessment and Discoving | Tarabian and Lagurian | 0 | D |
|---|--|---|---|---|
| | Assessment and Planning | | Curriculum/ Intervention | Resources & Staffing |
| ASC Range 4b Presenting Behaviours • Pupils will have communication and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available • The pervasive nature of the Autism/ C&I needs is likely to have a significant effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment Pupils may have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum. They will require significantly more support than is normally provided in a mainstream setting. NC Level Across the expected range but with a significantly uneven profile showing weaknesses in some areas and strengths in others. | Assessment: As ranges 1 – 4a plus: • Must include detailed assessment for PSHCE, life skills and sensory needs • Risk assessments must be carried out and shared with all staff and family Planning: • Where needed, positive plans to support behaviour must be completed and shared with family • Must include planning for whole day, including unstructured times • Planning must consider learning styles, identified strengths and learning needs | Teaching and Learning Strategies As ranges 1 – 4a plus: • Robust planning to meet objectives defined in Support Plan/EHCP • Access to a quiet area within the classroom must be available when needed to offer opportunities for distraction free learning • A variety of groupings must be used to ensure learning, including time in a quiet, distraction free environment | As ranges 1 -4a plus: Curriculum modifications must be selected to engage with C&I needs/Autism in relation to curriculum content and peer group Therapeutic approaches will be integral to curriculum delivery and used to support the emotional wellbeing of pupil Planning for unstructured times must be provided | Resources & Staffing As ranges 1 – 4a plus: Setting: Flexibility of staffing available to accommodate need, especially during unstructured times such as start and end of day, breaks and lunch and trips out of setting Key staff must have accredited training in Autism/C&I needs such as Elklan (or equivalent), or through the Autism Education Trust programmes with reference to the Autism Good Practice Guidance. Additional training of mainstream staff to support specific curriculum modifications in relation to needs identified in the range descriptors As range 1-4a plus: Specialist staff to devise strategies which will be shared with mainstream staff and implemented into planning Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET |

| | | frameworks with reference to the Autism Good Practice |
|--|--|---|
| | | Guidance. |

| ASC Range 5 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|---|---|---|---|---|
| Presenting Behaviours | | Strategies | | |
| Pupils will have communication and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available The pervasive nature of the Autism/ C&I needs is likely to have a significant effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment. Pupils at range 5 may be in the following settings: Mainstream The pupil may have a significantly uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum. They will require significantly more support than | As range 1 – 4 plus • Must include detailed assessment for PSHCE, life skills and sensory needs • Assessment of behaviour and medical needs to inform the planning process where required • Where needed, risk assessments, behaviour support plans and positive handling plans must be carried out and shared and co- produced with all staff and family • Must include planning for whole day, including unstructured times • Accurate and up to date assessment of independent levels (NC/Pre-Key stage descriptors or P Levels) must be kept as a working document to aid planning and to share with family • Long term involvement of education and non-education professionals is likely to be needed | As range 1– 4 plus Robust planning to meet objectives in the support plan/ EHCP if applicable A variety of groupings must be used to ensure learning, including time in a quiet, distraction free environment Daily opportunities to manage their own anxieties by graded access to a range of environments | As range 1– 4b plus: Curriculum modifications must be selected to engage with C&I needs/Autism in relation to curriculum content, peer group etc. Therapeutic approaches must be part of the curriculum and used to support the emotional wellbeing of the pupil Access to specialist approaches and equipment as part of a holistic package to meet the individual's sensory, social communication and understanding needs Use a range of alternative augmentative communication to support social and functional communication skills to enhance interaction and understanding (e.g. PECS, Makaton, electronic voice output communication aids (VOCA) | As range 1– 4b plus: SETTING: • Flexibility of staffing available to accommodate need, especially during unstructured times • Key staff must have advanced training in C&I needs/Autism • Additional training of mainstream staff to support pupil specific curriculum modifications in relation to needs identified in the range descriptors Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards and competency frameworks with reference to the Autism Good Practice Guidance. |

| is normally provided in a mainstream setting. Special Attainment profile is below expected NC key performance indicators in most areas. Complex Needs Identified * | | |
|--|--|--|
| NC Level • Across the expected range with a significantly uneven learning profile showing relative weaknesses in some areas and strengths in others | | |
| For pupils in special school settings, attainment profile is below expected NC levels. | | |

| ASC Range 6 | Assessment and Planning | Teaching and Learning | Curriculum/ Intervention | Resources & Staffing |
|----------------------------------|---|--------------------------------|-------------------------------------|--|
| Presenting Behaviours | - | Strategies | | |
| Pupils will have | Assessment | Robust planning to meet the | Curriculum access will be | High staffing ratio to |
| communication and interaction | Targets must be individualised, | objectives in the EHCP | facilitated by using a predictable | support teaching and learning |
| needs identified by the range | short term, specific & reviewed | Small groups within a | approach which may involve | with sustained opportunities for |
| descriptors that profoundly | Detailed pre-NC assessments | specialist provision for | using visual systems or | 1:1 support |
| affect their access to the | (e.g. PIVATS, B-squared) to | communication and interaction | timetables and reducing | All staff trained and |
| National Curriculum, including | inform planning/target setting | needs | language for | experienced in working with |
| the social emotional curriculum | Ongoing teaching | Specialist educational setting | instruction/information giving | pupils with autism. |
| and all aspects of school life, | assessments including social | Daily opportunities for small | Teaching strategies should | Additional staffing to escort |
| even in known and familiar | communication skills, emotional | group and 1:1 teaching and | consider difficulties with transfer | pupils and support at times of |
| contexts and with familiar | wellbeing and life skills, | learning | of skills; teaching approach | crisis and stress |
| support/people available | including preparation for | Where possible, graded | should take account of difficulties | All staff trained and |
| Pupils will need an | adulthood | access to mainstream learning | in understanding the social rules | experienced in Team Teach |
| environment where | Long-term involvement of | activities and leisure | and expectations of the | approaches |
| interpersonal challenges are | educational and non- | opportunities | classroom | Consistent staff team |
| minimised by the adult | educational professionals as | | Use a range of alternative | experienced in working with |
| managed setting | appropriate in assessment and | | augmentative communication to | students who present with a |
| The pervasive nature of the | planning | | support social and functional | range of needs because of their |
| Autism/C&I needs is likely to | Assessment of emotional | | communication skills to enhance | autism diagnosis |
| have a detrimental effect on the | regulation, sensory needs, | | interaction and understanding | |

| | <u> </u> | | |
|--|--|--|--|
| acquisition, retention and | individual behaviour needs, and | (e.g. PECS, Makaton, electronic | Access to specialist |
| generalisation of skills and | medical needs must be used to | voice output communication aids | approaches, equipment and |
| therefore on the result of any | inform the planning process | (VOCA)) | therapeutic services as part of |
| assessment | Curriculum planning closely | Use of adapted teaching | the curriculum |
| Students may or may not | tracks levels of attainment and | materials and resources to | Staff working directly with |
| have profound sensory | incorporates individual targets | support teaching and learning for | pupils must have knowledge |
| processing needs | and therapy programmes | those with sensory and/or | and training in good practice |
| Pupils within the specialist | Individual care plan/protocol to | physical impairment | when working with pupils with |
| provision need an environment | be in place | Enhanced PSHCE/life skills | communication and interaction |
| where interpersonal challenges | Positive handling plan | and SRE programmes to ensure | needs/Autism evidenced using |
| are minimised by the adult | Behaviour Support Plan and | skills embedded | guidance such as the AET |
| managed setting The pervasive | risk assessment | | standards and competency |
| nature of the Autism/ C&I | Use of AET Progression | | frameworks with reference to |
| needs is likely to have a | Framework to show progress | | the Autism Good Practice |
| detrimental effect on the | with social/emotional and | | Guidance. |
| acquisition, retention and | independence skills. | | |
| generalisation of skills and | · | | |
| therefore on the result of any | | | |
| assessment. | | | |
| Pupils within the | | | |
| Communication and Interaction | | | |
| specialist setting, or enhanced | | | |
| DSP setting need an | | | |
| environment where | | | |
| interpersonal challenges are | | | |
| minimised by the adult | | | |
| managed setting. | | | |
| Complex Needs Identified | | | |

Communication and Interaction – Speech and Language Provision Guidance Statements

| S&L Range 1 As | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|---|--|-----------------------|---|---|
| Presenting Behaviours | ŭ | Strategies | | · · |
| Presenting Behaviours SLCN may be an emerging but not yet clearly identified primary area of need; the pupil has some difficulty with speaking or communication. Pupils will present with some/all of the difficulties below and these will mildly affect curriculum access and social development: Pupil does not have a diagnosis of an autism spectrum disorder made by an appropriate multiagency team Speech is understood by familiar adults but has some immaturities, which may impact on social interaction. Speech sound difficulties may impact on literacy difficulties. Difficulties with listening and attention that affect task engagement and independent learning Comments and questions indicate difficulties in understanding the main points of discussion, information, | School must: Identify evidence that the pupil's anguage is delayed Use EYFS profile, Birmingham SEN Toolkits assessment and hecklists as a system of dentification and monitoring Ensure the pupil is part of ormal school and class ssessments SENDCO and class teacher ould be involved in more specific ssessments and observations to larify SLCN as the primary area of need, and the nature of the difficulty Other assessment tools schools se: Welcomm, speech/Language Link, communication Trust Progression fools, School to consider whether of the professionals need to be envolved Schools could use the primary area of the second to the second of the | | School: • Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools • Literacy tasks may require some modification • Instructions supported by visual and written cues • To support pupils in attending to/understanding information and instructions, adults to use short instructions with everyday vocabulary, with repetition • Flexibility in expectations to follow instructions /record work • Opportunities for developing the understanding and use of language across the curriculum • Opportunities for time limited small group work based on identified need • Planning shows opportunities for language-based activities • Family supports targets at home • Pupil involved in setting and monitoring their own targets | School: • Main provision by class/subject teacher with advice from SENDCO • Additional adults routinely used to support flexible groupings, small group activities and differentiation under the guidance of the teacher • Adults actively support pupils by modifying teacher talk and scaffolding/modelling responses • Adults provide support to enable pupils to listen and respond to longer sequences of information in whole class situation • Adults provide encouragement and support to collaborate with peers in curriculum activities • Adults provide pre and post tuition to secure key and specific vocabulary at the start of a topic Resources: • Refer to The Communication Trust What Works for Pupils with SLCN database • Quality First Teaching strategies Interventions such as: • Talk across the Curriculum • Talking Partners@primary • Talking Partners@secondary • Colourful Stories • Chatterbox • Word aware • ICT, clicker voice recorder, Talk to Text, Widget, Communicate in |

| Pupils may rely on simple phrases with everyday vocabulary Social interaction could be limited and there may be some difficulty in making and maintaining friendships Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement Pupils may present with difficulty in talking fluently e.g. adults may observe repeated sounds, words or phrases, if this is consistent, higher levels of need may be present | | |
|--|--|--|
| present | | |

| S&L Range 2 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|-------------------------------------|--|------------------------------------|-------------------------------------|------------------------------------|
| Presenting Behaviours | | Strategies | | |
| SLCN is identified as the primary | School must: | Mainstream classroom with | School: | School: |
| area of need; pupil has some | Identify evidence that the pupil's | attention paid to position in the | Whole school understanding of | Main provision by class/subject |
| difficulty with speaking or | language is delayed | classroom and acoustics following | the pupil's individual needs | teacher with advice from |
| communication. | | the communication friendly | through training such as ICAN | SENDCO |
| Pupil will present with some/all of | Use EYFS profile, Birmingham | classroom model. | Communication Friendly Schools | |
| the difficulties below and these | SEN Toolkits and checklists as a | | | Adults routinely used to support |
| will mildly/moderately affect | system of identification and | Flexible pupil groupings; positive | Instructions supported by visual | flexible groupings and |
| curriculum access and social | monitoring | peer speech and language | and written cues | differentiation under the guidance |
| development. | Ensure the pupil is part of normal | models | | of the teacher |
| Speech is usually understood by | school and class assessments | Groupings reflect ability with | | |
| familiar adults; unfamiliar people | | modifications made to ensure | To support pupils in attending to / | Adults actively support pupils by |
| may not be able to understand | Actively monitor behaviour as an | curriculum access | understanding information and | modifying teacher talk and |
| what the child is saying if out of | indicator of SLCN | | instructions, adults to use short | scaffolding/modelling responses |
| context. | | Small group/individual work to | instructions with everyday | |
| The child's speech may have | SENDCO and class teacher | target specific needs | vocabulary, with repetition | Regular, planned support to listen |
| some immaturities or use of more | should be involved in more | | | and respond to longer sequences |
| unusual sounds within their | specific assessments and | | | |

talking, which may impact on social interaction. Speech sound difficulties may impact on the acquisition of literacy.

- Difficulties with listening and attention that affect task engagement and independent learning
- Comments and questions indicate difficulties in understanding the main points of discussion, information and explanations
- Pupil needs some support with listening and responding
- Difficulties in the understanding of language for learning (conceptual language: size, time, shape, position)
- Reduced vocabulary range, both expressive and receptive
- May rely on simple phrases with everyday vocabulary
- May rely heavily on non-verbal communication to complete tasks (adult's gestures, copying peers) and this may mask comprehension weaknesses

Social interaction could be limited and there may be some difficulty in making and maintaining friendships

Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement

Pupil is likely to present with difficulty in talking fluently e.g. adults may observe repeated

observations to clarify SLCN as the primary area of need, and the nature of the difficulty

Other assessment tools schools use: Welcomm, Speech/Language Link (Primary), Communication Trust Progression Tools.

School to consider whether other professionals need to be involved (e.g. PSS)

Flexibility in expectations to follow instructions /record work

Opportunities for developing the understanding and use of language across the curriculum

Opportunities for time limited small group/individual work based on identified need

Planning shows opportunities for language-based activities

Family supports targets at home

Pupil involved in setting and monitoring their own targets

Literacy tasks require regular modification

of information in whole class situation

Regular, planned encouragement and support to collaborate with peers in curriculum activities

Staff working directly with the pupil should have knowledge and training in good practice for teaching and planning provision for children with SLCN

Resources:

Refer to The Communication Trust What Works for Pupils with SLCN database

QFT strategies

Interventions such as: Talk across the Curriculum Talking Partners@primary Talking Partners@secondary TalkBoost (I CAN) Early TalkBoost (I CAN) Talking Maths Nurturing Talk Colourful Stories Chatterbox ICT support: Clicker 7 voice recorder, talk to text, communication apps Splingo Language Steps Rhodes to language Semantic Links Colourful semantics Word aware Flklan Wellcomm

Language for thinking

| sounds, words or phrases more consistently | | |
|--|--|--|
| | | |

| S&L Range 3 | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--|---|---|--|---|
| Presenting Behaviours | 3 | Strategies | | 3 |
| SLCN will be identified as the primary area of need with the nature of the difficulty clarified | As for ranges 1 & 2 plus: Provide evidence of monitoring | Mainstream classroom with attention paid to position in the classroom and acoustics following | As for ranges 1 & 2 plus: Planning identifies inclusion of | School Main provision by class/subject teacher with advice from |
| from observations and assessments by school, specialist education professionals and | and identification of pupil needs to support making a referral for assessment and advice from a | the communication friendly classroom model. | and provision for individual targets | SENDCO/specialist teacher and/or S< |
| health professionals. Will present with some/all of the | specialist teacher or S< where required. | Flexible pupil groupings; positive peer speech and language models | Whole school understanding of the pupil's individual needs through training such as ICAN | Additional adult support informed by differentiated provision planned by the teacher |
| difficulties below and these will moderately affect curriculum | Reviews should consider the evidence base if there is a need | Groupings reflect ability with | Communication Friendly Schools | |
| access and social development: Persistent delay against age related speech, language and communication | to consider specialist resources and provision | modifications made to ensure curriculum access Regular, focused, time limited | Additional steps are taken to engage families and the pupil in achieving their targets | Additional adult support focused on specific individual targets and any specialist teacher or S< advice as appropriate |
| Persistent difficulties that do not follow normal developmental patterns (disordered) | | small group/individual interventions | Mainstream class predominantly working on modified curriculum tasks Frequent opportunities for time limited small group and individual | Staff working directly with the pupil must have knowledge and training in good practice for teaching and planning provision |
| Speech | | | work based on identified need | for children with SLCN |
| Speech may not be understood by others where context is unknown. | | | Attention to position in the classroom and acoustics | Other resources: Refer to The Communication Trust 'What Works for pupils with |
| Difficulty in conveying meaning, feelings and needs to others due | | | Tasks and presentation personalised to pupil needs | SLCN' database |
| to speech intelligibility Speech sound difficulties impact | | | Curriculum access facilitated by a structured approach using visual systems, modification /reduction | Interventions: As range 1&2 |
| on literacy development | | | of language for instructions and information | |

| Speech sound difficulty may lead to limited opportunities to interact with peers | | Consideration to the transference and generalisation of skills | |
|--|--|--|--|
| May be socially vulnerable May become isolated or frustrated. Phonological awareness (speech sound awareness) difficulties may impact on literacy development. | | | |
| Expressive | | | |
| The pupil may have difficulty speaking in age appropriate sentences and the vocabulary range is reduced. This will also be evident in written work — sometimes children can write well but not speak well. | | | |
| Talking may not be fluent | | | |
| May have difficulties in recounting events in a written or spoken narrative | | | |
| Receptive | | | |
| Difficulties in accessing the curriculum, following instructions, answering questions, processing verbal information, following everyday conversations | | | |
| Needs regular and planned additional support and resources | | | |
| Difficulties with listening and attention that affect task engagement and independent learning | | | |

| May not be able to focus attention | | |
|--|--|--|
| for sustained periods | | |
| The state of the s | | |
| May appear passive or distracted | | |
| May appear passive or distracted | | |
| B.W. 10. 10. | | |
| Difficulties with sequencing, | | |
| predicting, and inference within | | |
| both social and academic | | |
| contexts. This may impact on | | |
| behaviour and responses in | | |
| everyday situations e.g. not | | |
| understanding the consequences | | |
| of an action | | |
| or arr action | | |
| | | |
| Social Communication | | |
| | | |
| Difficulties with speech and/or | | |
| language mean that social | | |
| situations present challenges | | |
| resulting in emotional outbursts, | | |
| anxiety, social isolation and social | | |
| vulnerability | | |
| Valiforability | | |
| Difficulties with using and | | |
| | | |
| understanding non-verbal | | |
| communication (NVC) such as | | |
| facial expressions, tone of voice | | |
| and gestures | | |
| | | |
| Poor understanding of abstract | | |
| language and verbal reasoning | | |
| skills needed for problem solving, | | |
| inferring and understanding the | | |
| feelings of others | | |
| 10011193 01 0111013 | | |
| Anxiety related to lack of | | |
| | | |
| understanding of time and | | |
| inference | | |
| | | |

| S&L Range 4a | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|---|--|---|---|--|
| | Assessment and Flaming | | Our rediditi/intervention | Resources and Stanning |
| Presenting Behaviours SLCN will be identified as the primary area of need with the nature of the difficulty clarified from observations and assessments by school, specialist education professionals and health professionals. Will present with some/all of the difficulties as described at Range | As for ranges 1 - 3 plus: Provide an appropriately trained teacher or teaching assistant to implement the advice of the SLT Where there is a diagnosis of Language Impairment or Speech Impairment the pupil's individual academic potential should not be | Strategies Mainstream classroom with attention paid to position in the classroom and acoustics following the communication friendly classroom model. Flexible pupil groupings Positive peer speech and | As for ranges 1 - 3 plus: Mainstream class predominantly working on modified curriculum tasks Individual targets following advice from SLT/specialist teacher must be incorporated in all activities throughout the school day | Main provision by class/subject teacher with advice from SENDCO which must include advice from specialist teacher and/or Speech and Language Therapist Additional adult 1:1 support focused on specific individual targets following SLT advice |
| 3 and these will severely affect curriculum access and social development. Could communicate or benefit from communicating using Augmented and Alternative Communication Some or all aspects of language acquisition are significantly below age expected levels Significant speech sound difficulties, making speech difficult to understand for all listeners when out of context and sometimes where it is known. Must have an identified Speech, Language and /or Communication Delay/Disorder. This could be difficulties in: Understanding and/or using language Speech Sound development Social Interaction | underestimated. However, planning must include a significant level of additional adult support and significant personalised differentiation to ensure curriculum access Planning, targets and assessments must address pastoral considerations relevant to the individual pupil's emotional well-being as well as social and functional use of language | language models Groupings reflect ability with modifications made to ensure curriculum access Daily, focused, time limited small group/individual interventions | Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools and/or training from SLT service Additional training of mainstream staff to support curriculum modifications Use of staff to implement specific materials, approaches and resources under the direction of the SLT Daily opportunities for individual / small group work based on identified need Provide 1:1 support focused on specific individual targets and any SLT advice as appropriate Pay attention to position in the classroom and acoustics Provide systematic and intensive mediation to facilitate curriculum access | /programme as appropriate Staff working directly with the pupil must have knowledge and training in good practice for teaching and planning provision for pupils with SLCN Additional training of mainstream staff to support curriculum modifications Additional adult support informed by differentiated provision planned by the teacher to include advice from Speech and Language Therapist Resources: Shape coding, cued articulation, Makaton, Widgit |

| More likely to be following a | | Ensure specific structured | |
|---------------------------------------|--|---------------------------------|--|
| disordered pattern of language | | teaching of vocabulary and | |
| development (DLD) | | concepts, in context | |
| Having difficulty with specific | | | |
| grammatical elements and | | Provide support for social | |
| vocabulary. | | communication and functional | |
| Have difficulty finding words and | | language use | |
| with use of non-specific | | | |
| vocabulary e.g. 'stuff' or using the | | Provide specialist support with | |
| wrong words for things. | | recording and communication | |
| May exhibit dysfluent behaviours | | | |
| as a result of their underlying | | Provide specific programmes to | |
| language disorder. | | develop independent use of ICT, | |
| Experience difficulty putting words | | recording skills and | |
| into a recognisable sentence | | communication through AAC as | |
| structure. | | appropriate | |
| May need more time to construct | | | |
| sentences. | | | |
| May display misbehaviour or | | | |
| internalise and withdraw as can't | | | |
| make self understood | | | |
| Identification | | | |
| Diagnosed by a Speech and | | | |
| Language Therapist | | | |
| | | | |
| Pupils with DLD may have | | | |
| associated social communication | | | |
| difficulties | | | |
| | | | |
| Pupils with DLD may have | | | |
| difficulties with literacy associated | | | |
| with writing fluency, reading | | | |
| comprehension and spelling | | | |
| | | | |
| Pupils with DLD may have | | | |
| behavioural, emotional and social | | | |
| difficulties which impact on | | | |
| everyday interactions and | | | |
| learning | | | |
| | | | |

| S&L Range 4b | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--------------------------------------|---------------------------------------|------------------------------------|------------------------------------|-------------------------------------|
| Presenting Behaviours | g | Strategies | | g |
| SLCN is identified as the primary | As range 4a plus: | Flexible pupil groupings | As range 4a plus: | School |
| area of need with the nature of | Provide an appropriately trained | | Small class sizes | Should have a placement with |
| the difficulty established and | teacher or teaching assistant to | Positive peer speech and | Daily targeted speech intervention | access to specialist teaching and |
| clarified from observations and | carry out SLT programmes daily. | language models | Access to regular speech and | non-teaching support within the |
| assessments by school, specialist | | Groupings reflect ability with | language therapy | classroom and wider setting to |
| education professionals and | All curriculum areas are planned | modifications made to ensure | Interventions embedded into | facilitate access to the curriculum |
| health professionals. | in detail to incorporate specialised | curriculum access | curriculum | and social communication |
| | teaching approaches (e.g. shape | | | |
| Will present with some/all of the | coding, cued articulation, | Will require small group and one- | | These staff will support |
| difficulties as described at Range | makaton) and finely graded | to-one support for speech and | | mainstream staff in planning and |
| 3 and these will severely affect | assessment. | language targets across all | | delivering appropriate, inclusive |
| curriculum access and social | | curriculum areas. | | and structured interventions and a |
| development to the extent that | Where there is a diagnosis of | | | differentiated curriculum |
| needs cannot usually be met in a | Developmental Language | There will need to be planned and | | |
| mainstream setting without | Disorder (with or without | monitored opportunities for social | | Ensure additional training is |
| specialist and intensive support. | associated speech impairment) or | interaction with adults and peers | | available for mainstream staff to |
| | where there is a severe speech | to develop language. | | support curriculum modifications, |
| | impairment, the pupil's individual | | | e.g. ELKLAN Materials can be |
| Some or all aspects of language | academic potential should not be | Group teaching of: oro-motor | | used. |
| acquisition are significantly below | underestimated. However, | skills, phonological awareness, | | |
| age expected levels | planning must include a | narrative, social skills etc. | | Resources: Shape coding, cued |
| | significant level of additional adult | | | articulation, Makaton, Widgit |
| Significant speech sound | support and significant | Concepts are delivered in | | |
| difficulties making speech difficult | personalised differentiation to | language children can access and | | Additional supervision will be |
| to understand out of context | ensure curriculum access | new learning continually broken | | required for all transitions and |
| | | down into small, achievable steps | | unstructured time. |
| Must have a diagnosis of DLD | It must be recognised that | | | |
| The main categories are: | language impairment is a | Emphasis on teaching language | | Teachers and Support Staff have |
| | persistent, severe and lifelong | skills – phonic awareness, | | specialist knowledge in the area |
| Mixed receptive/expressive | disability | expressive language, vocabulary, | | of Speech and Language |
| language impairment/disorder | | specific grammar, | | |
| | Planning, targets and | comprehension, repetition of key | | Team teaching with speech and |
| Expressive only language | assessments must address | concepts | | language therapists |
| impairment/disorder | pastoral considerations relevant | | | |
| | to the individual pupil (emotional | | | Specific speech and language |
| Higher order processing | well-being) as well as social and | | | programmes carried out with |
| impairment/disorder | functional use of language | | | individual children by therapists |
| Severe Speech Impairment | | | | and school staff |
| | | | | |
| Identification | | | | |
| | | | | |

| Diagnosed by a Speech and Language Therapist | | |
|--|--|--|
| Pupils with DLD often have associated social communication difficulties evident in rigid and repetitive behaviours | | |

Communication and Interaction - PfA Outcomes and Provision

| | Employability/Education | Independence | Community Participation | Health |
|-----------------------------------|---|--|--|---|
| Reception to Y2 (5-7 years) | Child will have the communication and interaction skills required to meet with adults from a range of careers and obtain information, appropriate to the child's age and developmental level, in relation to different jobs to enable them to begin to think about what they may like to do in the future. Child will engage with real world visits (fire stations, farms, etc.) and be able to communicate with adults present to obtain information relating to any questions they may have. | Child will have the communication and interaction skills required to enable them, with adult supervision support and modelling, to ask for things that they would like (ordering juice in a coffee shop, asking for a toy or food item at a shop counter etc.) | Child will be able to interact and communicate appropriately with peers to enable participation in teams and games, after school clubs and weekend activities. Child will have the communication and interaction skills required to begin to develop friendships with peers. | Child will have the language, communication skills required to gain the attention of an adult at times when they feel unwell in order to access appropriate medical care as required. Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise. |
| Y3 to Y6 (8- 11 years) | Child will be able to articulate their ideas in relation to different career and education options and will have the communication skills required to ask questions to support them in moving towards making choices. Child will be able to engage with career related role models/sessions on different career paths from visitors in school to further increase their understanding of potential options/areas of interest. | Child will have the communication and interaction skills required to enable them to ask for things that they would like, to pay for things in a shop or school lunch hall, as step toward independent living. Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required. | Child will have the communication and interaction skills required to develop and maintain friendships with peers. Child will be able to interact and communicate appropriately with peers to enable participation in team games, youth and after-school clubs. Child will have the language and communication skills required to outline any issues relating to bullying or safety online to an adult. | Child will have the language and communication skills required to explain the issue to an adult at times when they are hurt or feel unwell in order to access appropriate medical care as required. Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise. |

| Y7 to Y11 (11-16 years) | Child will be able to engage with structured careers advisory sessions, communicating their thoughts and ideas relating to potential career choices and having the interaction skills to talk with adults to obtain additional information/guidance as required to enable them to make informed choices. Child will have the communication and interaction skills (written or verbal) required to facilitate the building of a personal/vocational profile within careers sessions, moving towards building a CV for application for further education/training or employment. Child will have the communication and interaction skills required to function within a workplace environment, either with respect to work experience/voluntary work or part time employment to enable them to gain work related experience and explain areas of interest. | Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required. Child will have the communication and interaction skills required to enable them to socialise with peers (unsupervised) within the community and to access activities within the local community in accordance with their preferences. | Child will have the language, communication and interaction skills to develop and maintain friendships with peers and to integrate successfully into a range of social groupings and situations. Child will be able to interact appropriately via social media, online games and within the online community to maintain personal safety and lessen potential vulnerability. | Child will have the language and communication skills required to ask questions in order to obtain additional information relating to sex education managing more complex health needs, risks related to drugs and alcohol and support for mental health and wellbeing as required. Child will be able to communicate, with adult support/prompting, any health needs or concerns to a GP to obtain appropriate medical care or support as required. |
|-------------------------------|--|---|--|--|
| Provision | Please refer to detail provided within the Communication and Interaction, SLCN and | | d Curriculum/Interventions sections of the | e School Age Ranges Guidance: |

Social, Emotional and Mental Health Provision Guidance Statements

| SEMH Range 1 Presenting | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|---|---|---|---|---|
| Behaviours | 7.00000mont and 1 laming | | Curricularity into i vertical | Troobardoo ana Graming |
| SEMH Range 1 Presenting Behaviours Pupil experiences low level / low frequency difficulties with social and emotional difficulties which mildly affect curriculum access. Pupil may have difficulties with some or all of the following: Following classroom routines Complying with adult direction Responding appropriately to social situations Forming and sustaining relationships with peers Immature social/ emotional skills e.g. difficulties with turntaking, reciprocal attention, sharing resources etc. Some social isolation e.g. tends to play alone Low-level anxiety in social situations Feeling sad or down. | Assessment and Planning Assessment will continue as part of normal school and class assessments. • Monitoring of the pupil's response to feedback, change in routine or environment • Assessment for learning opportunities can be used to record observations and assessment of behaviour/anxiety levels • Consideration of the pupil's learning style, including active engagement activities. • Information from the pupil regarding their views using person-centred approaches • Observations by Teacher/class Teaching Assistant /Key Stage Coordinator • School is proactive in identifying individual needs and monitors that action is taken • SENDCO/ Wellbeing Lead may initiate more specific assessments and observations if required • SEMH/Wellbeing training for all staff. | Teaching and Learning Strategies The teacher is held to account for the learning and progress of the pupil in the mainstream class. • Quality First Teaching meets the needs of all pupil including SEMH • Flexible teaching groups • Some differentiation of activities and materials • Differentiated questioning • Use of visual, auditory and kinaesthetic approaches • Awareness that a pupil may need more time to complete tasks and that equality of access may mean that they need to do some things differently (chunking) • Resources and displays that support independence • Routine feedback to pupils • Environmental consideration to classroom organisation, seating and group dynamics • Transparent system of class/school rewards and sanctions • Rules and expectations consistent across staff • Use of different teaching styles • Clear routines e.g. for | Curriculum/Intervention The school can demonstrate an inclusive ethos that supports the learning and wellbeing of all children and young people. • Whole school ethos is based on relational approaches and strategies to supporting SEMH and behaviour management. • Positive whole school attendance ethos • The wider curriculum promotes positive examples of diversity • Well-planned and stimulating PSHEE/ Citizenship curriculum, differentiated to needs of cohort/class • Anti-bullying is routinely addressed and pupils are confident in reporting incidents • Whole class materials and interventions to promote wellbeing available for staff use in the classroom • Provision of planned opportunities to learn and practice social and emotional skills during structured activities • Restorative Practice approaches • Educational visits are planned well in advance and take into account the needs of all pupils | Resources and Staffing The pupil's SEMH needs can be managed in a mainstream class within an inclusive setting, with differentiation of task and teaching style: Regularly updated policies for SEND, Behaviour and Antibullying Regularly monitored inclusion policies are implemented consistently and underpin practice Stimulating classroom and playground environments Access to 'quiet areas' in school The school employs additional adults to support the needs of all pupils e.g. Midday Supervisory Assistants (MSAs), Family Support Worker All staff have received training in addressing SEMH needs and understand how to support pupils effectively Staff are familiar with current DfE guidance Staff access LA training to keep informed of meeting the needs of pupil Designated time is allocated to TAs for planning and liaison with |
| | may initiate more specific assessments and observations if required • SEMH/Wellbeing training for | Transparent system of class/ school rewards and sanctions Rules and expectations consistent across staff | practice social and emotional skills during structured activities • Restorative Practice approaches | Staff are familiar with current DfE guidance Staff access LA training to keep informed of meeting the needs of |
| | all staff. | styles | well in advance and take into | Designated time is allocated to |
| | | responsibilities e.g. class monitors, prefects, school council reps | | Social and Emotional Learning curriculum |

| | | | | Staff access support e.g. via solution-focused conversations/supervision Time to establish liaison with parents/ carers in line with school procedures e.g. parent consultation evenings Staff 'meet and greet' their pupils daily Structured system in place to support internal transitions Early years learning journals at foundation stage |
|--|---|--|--|--|
| SEMH Range 2 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources and Staffing |
| Pupil experiences low / medium level ongoing social and emotional difficulties which are mild and moderate. These may affect curriculum access. • Pupil may have a preference to follow own agenda • Difficulties following adult direction e.g. regular incidences of non-compliance/ uncooperative behaviour • Difficulties with self-regulating e.g. emotional outbursts, hyperactive, impulsivity, mood swings, feeling anxious/worried • Difficulties with appropriate learning behaviour e.g. sustaining attention and concentration, motivation to engage with work-related tasks • Low self-esteem and low general resilience • May experience difficulties responding to social situations, leading to social isolation from peers e.g. may be fearful or anxious in new situations | As range 1 plus • More detailed and targeted observation and assessment relating to SEND Support Plan formulation and intervention choice • Observations by SENDCO/Wellbeing Lead • Pupil involved in setting and monitoring their own SMART targets for individual provision map and review • Parents/carers involved regularly to support targets at home • Behaviour records analysed to consider triggers and patterns • 'Assess/ Plan/ Do/ Review' 'Cycle of Behavioural Change' used to give a context to behaviour • Close monitoring to identify 'hot spots' | Information about pupils needs/difficulties is shared with relevant staff (SEND support plan and meetings) Sharing of advice on successful strategies and targets e.g. use of visual supports, developing organisational skills Classroom teaching assistance is targeted towards support for specific tasks/settings, based on agreed SMART targets Personalised reward systems covering targeted lessons/activities Careful consideration of group dynamics within class Careful consideration of preferred learning style and motivational levers for the pupil when differentiating Opportunities for small group work based on identified need Time-limited intervention groups | Access to small group support e.g. Circle of Friends, Friends for Life. Group work to be planned and tailored to meet identified need and to include good role models Teaching effective problemsolving skills Individual or small group support for emotional literacy e.g. recognising emotions Learning tasks differentiated by task and outcome to meet individual needs Preparation for changes to activities/routines/ staffing Supervision when moving between locations/ classrooms Pupil encouraged to participate in extracurricular actives Educational visits planned well in advance and contingency plans in place to meet the needs of the pupil, should they be needed | The child or young person's SEMH needs require flexible use of additional support from within school resources: • Support/advice from SENDCO/ Wellbeing Lead • Personalised programme with SMART targets reviewed and updated regularly • Additional adults routinely used to support flexible groupings • Access to targeted small group work with class Teaching Assistant • Access to intervention group work with Teaching Assistant, Learning Mentor, ELSA (Emotional Literacy Support Assistant) or Thrive trained staff or equivalent, where appropriate. • Additional adults (Teaching Assistant) for focused support during unstructured times e.g. lunchtime supervision/ targeted extra-curricular activities |

| Hiding under furniture. | Opportunities for creative play | Access to a quiet area for |
|------------------------------------|---------------------------------|---|
| Immature social skills | activities, drama etc. | 'chill-out' time |
| affecting ability to establish and | , | Access to visual cues/ |
| maintain friendships | | timetable if needed |
| Reliance on adults for | | Access to in-school support |
| reassurance | | base (e.g. Nurture Group) if |
| Difficulties forming | | available |
| relationships with adults. | | Staff access targeted LA |
| Confused thinking. | | training |
| Problems sleeping. | | Consultation with support |
| , , | | services |
| | | Home-school communication |
| | | book |
| | | Time for scheduled meetings |
| | | with parents / carers on a |
| | | regular basis |
| | | Self-regulation strategies |
| | | such wobble cushion, stress |
| | | balls and tanglers |

| SEMH Range 3 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources and Staffing |
|--|--|---|------------------------------------|-------------------------------------|
| The pupil experiences | Support plan with asses-plan-do- | Identified daily support to | Teaching style adapted to suit | The pupil is struggling to cope |
| frequent and persistent | review cycles implemented and | teach social skills and address | pupil's learning style e.g. | with aspects of his/her local |
| difficulties with social and | co-constructed with | targets and outcomes on | level/pace/amount of teacher talk | mainstream school, requiring |
| emotional difficulties which | YP/parents/carers | SEND Support Plan | reduced, access to practical | increasing levels of individual |
| will significantly affect | Outcomes agreed and monitored | throughout day | activities | additional support from within |
| curriculum access. | with pupil and parents/carers. | Use of key-working | Personalised timetable | school resources and a multi- |
| Incidences of non-compliant | Consideration of Family Early | approaches to ensure the pupil | introduced in negotiation with the | agency approach: |
| and uncooperative behaviour | Help Assessment | has a trusted adult to offer | pupil, parents/ carers and staff. | School is offering provision |
| e.g. refusal to work, disrupting | Consider further specialist | support during vulnerable | This may include temporary | that is additional to and different |
| the learning of others | assessment | times | withdrawal from some activities | from that of peers |
| Difficulties self-regulating | 'Round Robins' to relevant staff | Personalised reward systems | e.g. assemblies, specific non- | School feel direct involvement |
| e.g. frequent emotional or | to gain overview of behaviour to | known to all staff in school who | core lessons. | of support services would be |
| aggressive outbursts, | inform planning | have contact with the pupil, | Curriculum should be modified | beneficial |
| sexualised language, | Pastoral/Teaching | implemented consistently | and/or differentiated to enable a | Access to 1:1 support for re- |
| excessive periods of anxiety, | Assistants/SENDCO/Wellbeing | across the curriculum | strong emphasis on developing | tracking, mentoring, |
| mood swings, unpredictable | Lead are routinely included in | Regular/daily small group | social & emotional regulation | motivational approaches etc. |
| behaviour, which affect | planning to ensure their input is | teaching of social and | Alternative curriculum | Additional individual support |
| relationships. | effective | emotional skills | opportunities at KS4 e.g. | for tricky situations and |

- Challenging behaviour requiring a range of therapeutic interventions or referral to specialist support services (Child and Adolescent Mental Health Service, Youth Offending Service)
- Inappropriate responses to fears and worries.
- Significant self-esteem issues affecting relationships and behaviour patterns ('acting in' or 'acting out')
- Low levels of resilience when faced with adversity.
- Behaviour causing a barrier to learning e.g. pupil disengaging, may destroy own / others' work, use work avoidance strategies, concentration very limited
- At risk of low level offending or anti-social behaviour.
- Socialising with peers and adults e.g. lack of empathy, victim or perpetrator of bullying
- May show low mood or refuse to communicate for periods of time
- Difficulties forming and sustaining quality relationships with adults.
- Risk of isolation or becoming socially vulnerable.
- Struggling with bereavement issues, feelings of guilt.
 The pupil's SEMH needs may co-exist with other secondary needs.

- Behaviour records updated daily and analysed to consider frequency, duration, triggers/patterns etc. in order to plan appropriate strategies
- Consultation and assessment with Educational Psychologist.
 Assessment of any additional needs e.g., relating to learning and language skills is considered.
- Proactive assessments of potentially tricky situations to inform adaptations to learning environment
- Careful planning and review of needs at transition, including effective liaison e.g. starting school, transfer to secondary or post-16 provision

- Individualised support to implement recommendations from support services
- Visual systems in place: prompt cards, behaviour plans, risk assessment, diaries School should have an appropriately trained & supervised Mental Health Support Team or Emotional Well-Being support Practitioners who are able to deliver time-limited evidence informed intervention programmes aimed at addressing specific needs e.g. therapeutic stories. Friends for Life. C/YP spends regular quality time with a 'Key Adult' who employs relational approaches to discuss any issues.
- vocational/college/work placements
- Time-limited intervention programmes with staff who have knowledge and skills to address specific needs, may include withdrawal for individual programmes (e.g. understanding anger, therapeutic stories) or targeted group work (e.g. FRIENDS)
- More formal meetings/ conferences using Restorative Practices, to include parents/carers
- Educational visits planned well in advance and risk assessments in place as appropriate and shared with key staff

- 'hotspots', in line with risk assessments
- Access to small group support outside mainstream classes

Small group teaching areas available to deliver planned programmes of support that promote emotional regulation and the development of social engagement skills.

Space available for C/YP to deescalate following episodes of emotional dysregulation

- Sustained access to intervention group work with Teaching Assistant, Learning Mentor, ELSA (Emotional Literacy Support Assistant) or Thrived trained or equivalent staff where appropriate
- Personalised timetable providing access to a Teaching Assistant / mentor staff for up to 12.5 hours per week
- Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies

SEN Support Plan/IBP/pastoral plan identifies and outlines support required to teach social & emotional skills in order to meet short term targets.

Progress should be tracked using appropriate social/emotional scales.

External services undertake

| | | assessments, support the monitoring of progress & provide advice. • 'Time-out' facilities • Specialist Staff Training (e.g. Positive Handling programmes /Team Teach). • Advice from support services e.g. Forward Thinking Birmingham, Social Care, Educational Psychologist, School, Youth Services • Allocation of appropriate space for professionals to work with the pupil, taking into account safeguarding issues • Multi-agency support to plan and review interventions • Access to time-limited short-term interventions in Alternative Hubs (not PRU) • Signposting parents/carers to parenting courses or offering access to drop-ins • Home-school communication book • Time for formal meetings with parents on a regular basis • Weekly mindfulness/individual wellbeing sessions • Sensory processing approaches Minimal off-site therapeutic intervention may be required. |
|--|--|--|
| | | Accesses 'Early Help' support. |

| SEMH Range 4a Presenting | Assessment and Planning | Teaching and Learning | Curriculum/Intervention | Resources and Staffing |
|--------------------------|-------------------------|-----------------------|-------------------------|------------------------|
| Behaviours | | Strategies | | |

The pupil experiences frequent and persistent difficulties with social, emotional and mental health difficulties which will significantly affect curriculum access.

- Challenging behaviour requiring a continuous range of therapeutic interventions or referral to specialist support services (e.g., Forward Thinking Birmingham, Youth Offending Service)
- Incidences of non-compliant and uncooperative behaviour e.g. refusal to work, disrupting the learning of others
- Self-regulating e.g. frequent emotional or aggressive outbursts, sexualised language, anxiety, mood swings, unpredictable behaviour, which affect relationships
- Significant self-esteem issues affecting relationships and behaviour patterns ('acting in' or 'acting out')
- Emerging concerns around mental health e.g. self-harm, irrational fears, risk-taking, and substance misuse
- Low levels of resilience when faced with adversity
- Behaviour causing a barrier to learning e.g. pupil disengaging, may destroy own / others' work, may use work avoidance strategies, concentration very limited

- Specialist assessments e.g., by Educational Psychologist, Primary Mental Health Worker, Youth Offending Service
- Involvement of educational and non-educational professionals as part of assess, plan, do, review cycle
- Risk assessment to identify dangers and need for additional support
- Use of SEMH profiles for measuring impact of interventions
- Completion of 'pupil passport' for Behaviour & Attendance Partnership if 'managed move' or Pupil Referral Unit place needed
- Personalised transition planning is prioritised (e.g. Rec/Y1, Y6/Y7, Y9, Y11/ post-16). This will include a transition plan in Y9-14, updated on a regular basis

- The class/subject teacher remains accountable for the progress of the pupil within the mainstream class
- Identified individual support across the curriculum in an inclusive mainstream setting.
- Daily teaching of social skills to address social and emotional targets and outcomes on support plan
- Use of key-working approaches to ensure the pupil has a trusted adult to offer support/withdrawal during vulnerable times
- Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum
- Time-limited intervention programmes with familiar staff who have knowledge, skills and experience to address pupil's specific needs; may include withdrawal
- Individualised support to implement recommendations from relevant professionals

- Teaching focusing on both learning and social-emotional curriculum / outcomes throughout the school day
- Targets informed by specialist assessment
- Regular/daily small group teaching of social emotional and behaviour skills
- Teaching style and tasks are adapted to suit the pupils' learning style e.g. level/ pace/amount of teacher talk reduced, access to practical activities
- Personalised timetable introduced in negotiation with pupil, parents and staff. This may include temporary withdrawal from some activities.
- Alternative curriculum opportunities at KS4 e.g. APs/vocational/college/ work placements
- Formal meetings/ conferences using Restorative Practices, to include parents/carers
- Educational visits planned well in advance and risk assessments in place, key staff have rehearsed possible scenarios
- Support through solutionfocused approaches, for staff working with the pupil
- Where the pupil is working below age-related expectations, personalised literacy and numeracy programmes will be required to address gaps in learning associated with SEMH needs

- The pupil is struggling to cope in a local mainstream setting, requiring considerable individualised support / resources above the delegated SEN budget. A multi-agency approach is needed.

 Wellbeing Lead and/or
- SENDCO provides support to Teacher and Teaching Assistants and takes responsibility for arranging appropriate CPD and quality assuring the learning experience
- Access to 1:1 support within school for re-tracking, mentoring/ coaching, motivational approaches, understanding anger etc.
- Additional individual support in line with risk assessments, incl. unstructured times
- Access to small group support outside mainstream classes
- Personalised timetable providing access to a suitably trained Teaching Assistant / mentor
- Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies
- Time to discuss, develop and review individual reward systems and report cards
- Time-out facilities
- Specialist Staff Training (e.g. Positive Handling programmes/ Team Teach)
- Direct involvement from support services e.g.

| Change in attendance patterns that requires in school interventions. Issues with socialising with peers and adults e.g. lack of empathy, victim or perpetrator of bullying May show low mood or refuse to communicate for periods of time Risk of isolation, exploitation or becoming socially vulnerable Inability to cope with day to day problems or stress. Significant tiredness. The pupil's SEMH needs may co-exist with other secondary needs. | | Consideration to access arrangements for internal and external examinations | Educational Psychologist in reviewing progress • Therapeutic intervention e.g. family therapy/ counselling/ play therapy/ art therapy if appropriate • Non-educational input e.g. YOS, and Keyworkers from the Local Area Teams to re-engage in education / training • Multi-agency support to plan and review interventions • Time and appropriate space for joint planning with pupil, parents/ carers, staff and other agencies to facilitate 'Team Around the Family' (TAF) approach • Additional 'off-site' provision may be required to supplement and enrich school-based learning e.g. vocational/practical or college/work placements within timetable • Support for parents/carers through access to targeted |
|--|--|---|---|
| | | | Support for parents/carers |

| SEMH Range 4b Presenting | Assessment and Planning | Teaching and Learning | Curriculum/ Intervention | Resources and Staffing |
|--|--|---|---------------------------------|-----------------------------------|
| Behaviours | | Strategies | | |
| The pupil experiences | Consider specialist | Time-limited targeted | Formal meetings/ conferences | Time to discuss, develop and |
| significant frequent and | assessments | intervention programmes with | using Restorative Practices, to | review individual reward |
| persistent social and emotional | Use of SEMH profiles and | familiar staff who have | include Parents/Carers | systems and report cards |
| difficulties which will severely | resources for measuring impact | knowledge, skills and | Personalised curriculum – | Time-out facilities |
| affect curriculum access. These | of interventions | experience to address pupil | Curriculum should be | |
| difficulties require multi-agency | May consider referral for an | specific needs, which may | significantly modified and | A high level of adult support may |
| support. | Education, Health and Care | include withdrawal | differentiated with a priority | be required across the |
| Daily incidences of non- | Needs assessment if | Individualised support to | emphasis on developing social | curriculum. A trusted adult |
| compliant and uncooperative | appropriate | implement recommendations | engagement and emotional | should be regularly available to |
| behaviour which are long-lasting | Personalised transition | from relevant professional | regulation skills. pupil may be | provide support / withdrawal |
| and frequent e.g. refusals to | planning is prioritised (e.g. | | | during vulnerable times. |

Rec/Y1, Y6/Y7, Y9, Y11/ postdisapplied from some aspects work, defiance, leaving · Specialist provision in Education, health and care classroom/school site on a 16). This will include a mainstream may be appropriate of the curriculum. professionals should be working regular basis transition plan in Y9-14, for part of the week collaboratively with parents & · Behaviour causing a updated on a regular basis Daily access to staff with pastoral staff in schools who significant barrier to learning experience and training in have an understanding of meeting needs of SEMH pupils e.g. pupil disengaging. mental health issues & how to destroving own / others' work. Educational visits planned address them. work avoidance strategies, well in advance and risk unable to show level of assessments in place, key staff A flexible deployment of concentration have rehearsed possible resources to enable access to Difficulties socialising with scenarios small group enhanced SEMH peers and adults e.g. lack of Support through solutionprovision for a proportion (e.g. empathy, victim or perpetrator focused approaches, for staff 50%) of each school day for up working with the pupil of bullving to 12 - 18 months. This Increased risk exploitation, Where the pupil is working enhanced provision provides radicalisation, isolation or below age-related expectations, planned, frequent and becoming socially vulnerable personalised literacy and evaluated intervention Increasing concerns around numeracy programmes will be programmes (e.g. Theraplay) mental health e.g. self-harm, required to address gaps in delivered by staff who are irrational fears, risk-taking, and learning associated with SEMH trained & skilled to address specific needs. The C/YP is substance misuse needs Changes in eating habits. Consideration of access supported by trusted staff in Poor personal hygiene. arrangements for internal and mainstream classes for the Experiences phobias. external examinations remainder of the day. Difficulties with self-regulating Social engagement and emotional regulation skills are e.g. intense emotional or aggressive outbursts / taught daily to address targets Specialist Staff Training (e.g. uninhibited / unpredictable on the SEN Support Provision Positive Handling programmes/ outbursts Plan. Team Teach) • Increasing concerns around Direct involvement from mental health e.g. self-harm, support services e.a. irrational fears, risk-taking, and Educational Psychologist in substance misuse reviewing progress • The pupil does not have the • Therapeutic intervention e.g. social or emotional skills family therapy/ counselling/ play therapy/ art therapy if needed to cope in a mainstream appropriate environment without adult support for a significant Non-educational input e.g. proportion of the school day. Youth Offending Service, and Keyworkers from the Local Area Teams to re-engage in education / training

| | Multi-agency support to plan and review interventions Time and appropriate space for joint planning with the pupil, parents/ carers, staff and other agencies to facilitate 'Team Around the Family' approach Additional 'off-site' provision may be required to supplement and enrich school-based learning e.g. vocational/practical or college/work placements within timetable Support for parents/carers through access to targeted evidence-based parenting |
|--|---|
| | programmes |

| SEMH Range 5a Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/Intervention | Resources and Staffing |
|---|---|---|------------------------------------|----------------------------------|
| The pupil experiences | Specialist assessments | Identified highly skilled | Daily small group teaching of | Pupil requires specialist |
| significant complex, frequent | ongoing e.g. Educational | individual support across the | social skills and personalised | environment |
| and persistent SEMH needs | Psychologist, Forward Thinking | curriculum | PHSE programme e.g. risky | |
| with an accumulation of layered | Birmingham | Daily teaching of social skills | behaviour, Sex and | |
| needs, which could include | Long term involvement of | to address SEMH targets and | Relationships Education, life | Consideration to be given to an |
| mental health, relationships, | educational and non- | outcomes within SEND support | skills | environment that ensures the |
| learning, communication and | educational professionals as | plans or EHCP if applicable | Teaching style/tasks are highly | safety of the individual and |
| sensory. This includes: | part of Education Health and | Use of key-working | differentiated to suit the pupil's | others that ensures the safe |
| Lack of resilience when faced | Care Needs assessment and | approaches to ensure the pupil | learning style | emotional well-being & the |
| with challenge or criticism | review process | has a trusted adult to offer | Personalised pathway is a | development of the individual. |
| Can be verbally or physically | Multi-agency assessments | support/withdrawal during | priority to re-engage with | Full-time access to small class |
| aggressive. | indicate that needs are highly | vulnerable times | education | groups with high teacher-C/YP |
| Levels of aggression pose | complex and require a very high | Personalised reward systems | Alternative curriculum | ratio and high levels of support |
| serious risk to self and others. | level of support – formal | known to all staff in school who | opportunities at KS4 e.g. | to access the curriculum. |
| High levels of anxiety | diagnosis pathway to be | have contact with the pupil, | APs/vocational/college/ work | |
| affecting daily functioning, | considered/identified. | implemented consistently | placements | |
| thoughts of self- harm. | Risk assessment to consider | across the curriculum | Where pupil is working below | Access to appropriate |
| Constant hyper-vigilance, | risks to self and others | Individualised support to | age-related expectations, | specialist support. Intensive & |
| severe mood swings and panic | Personalised transition | implement recommendations | personalised literacy and | frequent use of a high level of |
| attacks. | planning is prioritised (e.g. | from relevant professionals | numeracy programmes will be | trusted adult support during |
| | Y6/Y7, Y9, Y11/post-16). This | | required to address gaps in | vulnerable times. Adults |

| barrier to learning e.g. destroying own / others' work, deteriorating/anti-social relationships with peers and adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring Y9-14, updated on a regular basis. Y9-14, updated on a regular who have knowledge, skills and experience to address the pupil's specific needs, to include withdrawal for personalised support Practices, to include Should have a sound understanding of mental health arrangements for internal and external examinations should have a sound understanding of mental health issues and how to address them. Continuous teaching of social and emotional regulation skills across the curriculum to address EHCP outcomes. | • Dehaviour causing cignificant | will include a transition plan in | Time-limited intervention | Joarning appointed with CEMIL | providing postoral support |
|--|---------------------------------|-----------------------------------|---------------------------|-------------------------------|--|
| destroying own / others' work, deteriorating/anti-social relationships with peers and adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring basis. who have knowledge, skills and experience to address the pupil's specific needs, to include withdrawal for personalised support • Consideration to access arrangements for internal and external examinations • Consideration to access arrangements for internal and external examinations • More formal meetings/ social and emotional regulation skills across the curriculum to address EHCP outcomes. | | | | _ | |
| deteriorating/anti-social relationships with peers and adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring experience to address the pupil's specific needs, to include withdrawal for personalised support experience to address the pupil's specific needs, to include withdrawal for personalised support experience to address the pupil's specific needs, to include withdrawal for personalised support experience to address the pupil's specific needs, to include withdrawal for personalised support experience to address the pupil's specific needs, to include withdrawal for personalised support experience to address the pupil's specific needs, to include withdrawal for personalised support • More formal meetings/ social and emotional regulation address them. Continuous teaching of social and emotional regulation address them. Continuous teaching of social and emotional regulation address them. | | , . | 1 1 0 | 110000 | |
| relationships with peers and adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring pupil's specific needs, to include withdrawal for personalised support pupil's specific needs, to include withdrawal for personalised support • More formal meetings/ social and emotional regulation skills across the curriculum to address EHCP outcomes. | | basis. | | | |
| adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring include withdrawal for personalised support • More formal meetings/ conferences using Restorative Practices, to include • More formal meetings/ social and emotional regulation skills across the curriculum to address EHCP outcomes. | | | | | |
| remorse, use of violence. • Poor attendance, requiring personalised support personalised support practices, to include skills across the curriculum to address EHCP outcomes. | | | | | |
| • Poor attendance, requiring Practices, to include address EHCP outcomes. | | | | | |
| | | | personalised support | | |
| l come level of additional l l l l l l l l l l l l l l l l l l | | | | | address EHCP outcomes. |
| | some level of additional | | | parents/carers | |
| external intervention to in • Support through solution- Regular involvement from | | | | | |
| school. focused approaches and regular multi-agency teams of | | | | | |
| • Some behaviours beyond supervision for staff working with professionals (incl. education, | | | | | |
| parent/carer control. the pupil the pupil health & care) where | • | | | the pupil | |
| May hurt others, self or appropriate. Identified | May hurt others, self or | | | | |
| animals. specialist skilled individual | | | | | |
| • Is reliant on adult to remain support across the curriculum. | | | | | 1 |
| on task May require planned | on task | | | | |
| programmes of intensive | | | | | |
| therapeutic intervention from | | | | | |
| healthcare professionals. | 1 | | | | healthcare professionals. |
| Accesses 'Early Help' support. | 1 | | | | Accesses 'Early Help' support. |
| | 1 | | | | · |
| • The pupil's SEMH needs | 1 | | | | The pupil's SEMH needs |
| present a considerable | 1 | | | | present a considerable |
| challenge to highly skilled staff | 1 | | | | challenge to highly skilled staff |
| • Access to 1:1 support from | 1 | | | | Access to 1:1 support from |
| experienced staff for | 1 | | | | experienced staff for |
| mentoring/ coaching, | 1 | | | | |
| motivational interviewing, | | | | | |
| conflict resolution, self-harm | | | | | |
| etc. | 1 | | | | · · |
| Additional individual support | 1 | | | | |
| in line with risk assessments | 1 | | | | |
| • Class sizes to be small | 1 | | | | |
| enough to allow teaching and | 1 | | | | |
| | 1 | | | | support to be differentiated and |
| personalised | 1 | | | | 1 |
| • Personalised timetable | 1 | | | | |
| providing access to Teaching | 1 | | | | |
| Assistant support as specified | 1 | | | | |
| in support plans or EHCP if | 1 | | | | |
| applicable | 1 | | | | |

| Г | The state of the s | | |
|---|--|--|---|
| | | | Formal behaviour monitoring |
| | | | systems to log and analyse |
| | | | incidents daily in order to |
| | | | review and modify strategies |
| | | | Time to discuss, develop and |
| | | | review individual reward |
| | | | systems and sanctions |
| | | | Specialist Staff Training |
| | | | including Positive Handling |
| | | | programmes / Team Teach - |
| | | | development of risk |
| | | | management plans. |
| | | | Direct involvement from |
| | | | support services e.g. |
| | | | Educational Psychologist |
| | | | Therapeutic intervention e.g. |
| | | | counselling/family therapy/ play |
| | | | therapy/art therapy if available |
| | | | Non-educational input e.g. |
| | | | Keyworkers from the Local |
| | | | Area Teams to re-engage in |
| | | | education or training, helping |
| | | | the pupil to plan for the future |
| | | | Involvement from voluntary |
| | | | sector to address needs re |
| | | | substance misuse, self-harm, |
| | | | sexual exploitation |

| SEMH Range 5b Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/ Intervention | Resources and Staffing |
|--|-------------------------|---|--|--|
| The pupil experiences severe and increasing behavioural difficulties often compounded by additional needs and requiring provision outside the mainstream environment. The pupil's behaviour is worrying, unpredictable and/ or severely disrupting the learning of self and others. | | The pupil is accessing specialist provision where appropriate Small class groups with high teacher: pupil ratio and high levels of support to access curriculum | Specialist teaching focusing on both learning and social-emotional curriculum / outcomes throughout the school day Targets and outcomes informed by Annual Review/EHCP | Resources required from specialist provision, which may include time-limited personalised tuition Specialist support, alongside a multi-agency approach is essential |

| Extreme risk-taking behaviours | 1 | | |
|--|---|--|--|
| e.g. arson, self-harm, sexualised | 1 | | |
| behaviour, criminal activity, use | 1 | | |
| of weapons, substance misuse | 1 | | |
| Verbally and physically | 1 | | |
| aggressive | 1 | | |
| Increased risk of exclusion from | 1 | | |
| Alternative Provision settings or | 1 | | |
| intervention settings. | 1 | | |
| Levels of aggression pose | 1 | | |
| extreme risk to self and others. | 1 | | |
| Provocative in appearance and | 1 | | |
| behaviour | 1 | | |
| Sexualised language and | 1 | | |
| behaviours | 1 | | |
| Majority of displayed | 1 | | |
| behaviours beyond parent/carer | 1 | | |
| control. | 1 | | |
| Totally reliant on adult support | 1 | | |
| to stay on task | 1 | | |
| Slow to develop age | 1 | | |
| appropriate self-care skills due to | 1 | | |
| level of maturity or degree of | 1 | | |
| learning difficulties | 1 | | |
| No sense of belonging to | 1 | | |
| positive familiar | 1 | | |
| relationships/positive role | 1 | | |
| models. | 1 | | |
| Disengagement and isolation | 1 | | |
| from school. | 1 | | |
| Often missing from home or | | | |
| school. | | | |
| Physical and medical needs | | | |
| which require regular review | | | |

| SEMH Range 6a Presenting | Assessment and Planning | Teaching and Learning | Curriculum/ Intervention | Resources and Staffing |
|--------------------------------|--------------------------------|------------------------------------|----------------------------|----------------------------------|
| Behaviours | | Strategies | | |
| The pupil experiences | Specialist assessments e.g. | The pupil is on roll of specialist | All of the previous | The pupil is struggling to cope |
| continuing profound and | by Educational Psychologist, | provision | Requires additional | in specialist provision, despite |
| increasing SEMH difficulties, | Child Adolescent Mental Health | School placement may be | /enhanced levels of highly | specialist support and high |
| often compounded by additional | | fragile | | staffing ratios |

needs and requiring continued provision outside the mainstream environment, including:

- Significant challenging behaviour requiring a range of therapeutic interventions or referral to specialist support services (Forward Thinking Birmingham, Youth Offending Service)
- Unable to manage self in group without dedicated support
- Subject to neglect, basic needs unmet or preoccupied with hunger, illness, lack of sleep, acute anxiety, fear, isolation, bullying, harassment, controlling behaviours
- Involved in substance misuse either as a user or exploited into distribution/selling
- Poor attendance, requiring high levels of additional external intervention to in school.
- All displayed behaviours beyond parent/carer control.
- Refusal to engage, extreme abuse towards staff and peers, disengaged, wilfully disruptive
- Significant damage to property
- Requires targeted teaching in order to access learning in dedicated space away from others
- Health and safety risk to self and others due to increased levels of agitation
- Sexualised language and behaviour; identified at risk of Child Sexual Exploitation
- Constantly missing from home or school.

Service, Forensic Psychology, Youth Offending Service, etc.

- Long term involvement of educational and noneducational professionals as part of statutory assessment, EHCP and Annual Review processes
- Ensure that the Outcomes in the EHCP are addressed when planning the individuals' curriculum and support
- Regular risk assessments to consider risks to self and others
- Target pupil social skills, empathy and managing behaviour whilst staying safe in school and community
- All professionals agree that the pupil needs can only be met with additional resources in specialist placement
- Personalised transition planning is prioritised (e.g. Y6/Y7, Y9, Y11/post-16). This will include a transition plan in Y9-14, updated on a regular basis

- Identified highly skilled individual support required throughout the school day
- Despite small class groups, with high teacher: pupil ratios and high levels of support to access curriculum, withdrawal of the pupil on a regular basis still needed to ensure safety of the pupil and others
- Use of key-working approaches to ensure the pupil has a trusted adult to offer support/withdrawal during vulnerable times
- Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum
- Personally tailored time-limited intervention programmes with staff who have knowledge, skills and experience to address the pupil's specific needs

skilled staff to re-engage and motivate the pupil

- The pupil requires a higher ratio of staff support within specialist provision due to high level of risk and vulnerability presented by the pupil
- Staff may need additional solution-focused supervision to increase resilience
- Additional resources are required to avoid the need to seek an out of area/residential placement
- The pupil may be returning from an out of area specialist placement
- Small class groups with high teacher: pupil ratio and high levels of support to access curriculum

| Medical conditions, such as | | |
|---|--|--|
| asthma or epilepsy, that may | | |
| require particular support from | | |
| specialist services | | |
| Complex needs identified | | |
| Detachment from reality | | |
| (delusions) paranoia and | | |
| hallucinations. | | |

| Range 6b Presenting | Assessment and Planning | Teaching and Learning | Curriculum/ Intervention | Resources and Staffing |
|--|--|--|----------------------------------|-------------------------------------|
| Behaviours | | Strategies | | |
| The pupil experiences complex, | EHCP is complete and pupil | Pupil is on roll at special | Multi-Agency Interventions | Personalised to the specific |
| frequent and persistent SEMH | has been assessed as needing | school | Provision is within a specialist | needs of the pupil |
| needs. | enhanced specialist provision | Pupil offered one to one | environment with appropriate | Advice available from relevant |
| The pupil's behaviour is | Assessment will be an ongoing | support from an adult for some | staff/student ratios | specialist services |
| unpredictable and dangerous, | process to determine progress | of the school day | Continued daily access to | Additional teams will include |
| with intense episodes of | in learning, and also: | There will be a greater ratio of | staff with experience and | any of the following multi- |
| emotional and/ or challenging | Development of social skills, | adults to pupil and staff will | training in meeting the needs of | agency Interventions: |
| behaviour, high levels of anxiety | empathy, managing own | have specialisms in managing | pupils with SEMH | Education Social Worker |
| making daily life extremely | behaviour and emotions, | pupils who present with | | Drug and Alcohol Team |
| difficult and severely disrupting | staying safe in school and in the | challenging behaviours | | Police |
| the learning of self and others | community | | | Health |
| SEMH needs may be | Involvement from a range of | | | Forward Thinking Birmingham |
| compounded by co-existing | specialist professionals in place, | | | Educational Psychologist |
| difficulties | such as Forward Thinking | | | Social Care |
| The pupil is extremely | Birmingham, Educational | | | Community Support Worker |
| vulnerable and there are | Psychologist, Youth Offending | | | Family Intervention |
| safeguarding issues to consider | Service | | | Families First |
| due to acute levels of mental | Multi-agency work continues, | | | School Nurse |
| health concerns and increased | and continual assessment to | | | Careers advice |
| risk-taking behaviours or | feed into the cycle of annual | | | Youth Service |
| 'sabotage' of | reviews | | | Voluntary Sector Organisations |
| situations/placements • Self-harm and/or suicide | Planning | | | Specialist Agency Interventions |
| Sell-narm and/or suicide ideation | EHCP and appropriate short- term targets | | | Youth Offending Service |
| Evidence of depression, OCD, | term targets Risk assessment will describe | | | (including MAPPA) Probation Service |
| eating disorders such as | | | | Social Care |
| anorexia. | procedures to keep safe the pupil, other staff and pupils, and | | | Community Support Worker |
| • Insomnia. | property. There will be an | | | Early Help |
| - Ilisolillia. | assessment of the risk of | | | Prevent Services |
| | absconding and procedures | | | i levelit Services |
| | absoliding and procedures | | | |

| A multi-agency approach, | described to manage such an | | |
|--------------------------------|---------------------------------------|--|--|
| including educational and non- | eventuality | | |
| educational professionals, is | Planning meetings will include | | |
| essential | parents/carers, and are multi | | |
| | agency | | |
| | , , , , , , , , , , , , , , , , , , , | | |

| SEMH Range 7 Presenting Behaviours | Assessment and Planning | Teaching and Learning Strategies | Curriculum/ Intervention | Resources and Staffing |
|--|---|----------------------------------|----------------------------------|----------------------------------|
| Pupils experience all of the | EHCP is complete and pupil | Pupil is on roll at special | Provision is within a specialist | Personalised to the specific |
| above but within a non- | has been assessed as needing | school | environment with appropriate | needs of the pupil |
| maintained educational or | enhanced, or more secure | This could be out of area | staff/ pupil ratios | Advice available from relevant |
| residential placement (Out of | specialist provision. | and/or residential special | Continued daily access to | specialist services |
| Area). This may include | Assessment will be an ongoing | school | staff with experience and | Additional teams will include |
| provision for identified Health | process to determine progress | Pupil offered one to one | training in meeting the needs of | any of the following multi- |
| and Social Care needs. | in learning, and also: | support from an adult for some | pupils with SEMH | Agency Interventions: |
| including therapeutic input from | Development of social skills, | of the school day | | Education Social Worker |
| specialists. Cases will be known | empathy, managing own | There will be a greater ratio of | | Drug and Alcohol Team |
| to the Local Authority and | behaviour and emotions, | adults to pupil and staff will | | Police |
| subject to joint commissioning | staying safe in school and in the | have specialisms in managing | | Health |
| arrangements via Joint Panel. | community | pupils who present with | | Youth Offending Service |
| Continued long term and | There will be involvement from | challenging behaviour | | Forward Thinking Birmingham |
| complex behavioural, emotional, | a range of specialist | | | Educational Psychologist |
| and social difficulties, | professionals in place, such as | | | Social Care |
| necessitating a continued multi- | Forward Thinking Birmingham, | | | Community Support Worker |
| agency response co-ordinated | Educational Psychologist, and | | | Family Intervention |
| as annual, interim or emergency | Youth Offending Service | | | Families First |
| SEND review and met in | Multi-agency work continues, | | | School Nurse |
| specialist provision. Difficulties | and continual assessment to | | | Careers advice |
| likely to include: | feed in to the cycle of annual | | | Youth Service |
| Extreme Self-harming | reviews | | | Voluntary Sector Organisations |
| behaviour | Planning | | | Specialist Agency Interventions: |
| Attempted suicide | EHCP and appropriate short- | | | Probation Service |
| Persistent substance abuse | term targets | | | Social Care |
| Extreme sexualised language | Risk assessment will describe | | | Community Support Worker |
| and behaviour, sexually | procedures to keep safe the | | | Early Help |
| exploited | pupil, other staff and pupils, and | | | Prevent Services |
| Extreme violent/aggressive | property. There will be an | | | |
| behaviour | assessment of the risk of | | | May require hospitalisation or |
| Serious mental health issues | absconding and procedures | | | inpatient facilities. |

| Long term non-attendance and | described to manage such an | | |
|------------------------------------|--------------------------------|--|--|
| disaffection | eventuality | | |
| Regular appearance in court | Planning meetings will include | | |
| for anti-social behaviour/criminal | parents/carers, and are multi- | | |
| activity | agency | | |
| Puts self and others in danger | | | |
| Frequently missing for long | | | |
| periods | | | |
| Extreme vulnerability due to | | | |
| Moderate Learning | | | |
| Difficulty/Specific Learning | | | |
| Difficulty | | | |
| Psychosis | | | |
| Schizophrenia | | | |

Social, Emotional and Mental Health - PfA Outcomes and provision

| | Employability/Education | Independence | Community Participation | Health |
|-----------------------------------|--|---|---|--|
| Reception to Y2 (5-7 years) | Child will interact with peers and begin to form friendships to support emotional wellbeing. Child will be able to manage the transition from one class to another at the end of the academic year. They will be able to form relationships with their new class teacher(s). | Child will show awareness of independent living skills (cooking, cleaning, DIY) and will extend and develop these through real world play Child will be able to access the dining hall alongside peers, following social routines in relation to seating and turn taking, and will be able to make appropriate choices in relation to meals | Child will interact with peers and begin to form friendships with peers to support emotional wellbeing. Child will maintain positive emotional wellbeing through participation in team games, after-school clubs and weekend activities. Child will begin to identify bullying in relationships and will be able to seek adult support. | Child will attend necessary dental, medical and optical checks following parental direction and supervision. Child will cooperate with self-care and personal hygiene routines with prompting and adult support as required. Child will have the support and strategies required to promote resilience and emotional wellbeing. Child will be able to indicate choices and inform others of these. |
| Y3 to Y6 (8-11 years) | Child will interact with peers, making and maintaining friendships with others to support emotional wellbeing. Child will be aware of structures in place to support social and emotional wellbeing and will access these as required. | Child will be able to maintain friendships with peers and access community based clubs/after school clubs to promote independence and emotional wellbeing. Child will have the social skills necessary to facilitate | Child will maintain friendships with peers to support emotional wellbeing and avoid isolation. Child will begin to identify bullying within relationships and will be able to identify support and strategies to manage this. Child will be able to manage social and emotional responses to change. | Child will understand physical and emotional changes associated with the onset of puberty and will manage these appropriately, with support as required, maintaining social and emotional wellbeing. With support, child will access strategies to manage any emotional or mental health needs associated with |

| | Child will show awareness of different feelings and emotions and with support will identify and apply appropriate strategies to manage these. | participation in sleepovers and residential trips. Child will be able to manage their feelings and emotions, accessing support to apply strategies as appropriate. Child will be developing selfadvocacy. | Child will be aware of strategies and precautions to remain safe online. | their physical or mental health conditions/diagnoses | |
|-------------------------------|---|--|---|--|--|
| Y7 to Y11 (11-16 years) | Child will have acquired the necessary social skills in order to interact with employers, clients and peers within the workplace within the context of work experience, voluntary work or part-time employment. Child will be able to form friendships in the context of education or employment to facilitate emotional wellbeing. Child should be aware of structures in place to support social and emotional wellbeing and will access these as required. Child will show awareness of different feelings and emotions and, with support, will identify and apply appropriate strategies to manage these. The YP will be able to learn from mistakes and show persistence in the face of challenge. | Child will have an awareness of boundaries and social conventions with respect to different relationships and social situations, including online. Child will begin to show awareness of potential abusive and exploitative behaviour in others and with support and guidance will be able to make safe choices. Young person will begin to make choices to include money, food, exercise, opportunities to socialise, form relationships with others, to support the development of confidence and emotional wellbeing. | Child will maintain friendships with peers to support emotional wellbeing and avoid isolation. Child will maintain positive emotional wellbeing through participation in community-based activities and socialisation with peers within the community in accordance with their own personal choices. Child will have an awareness of boundaries and social conventions within a range of relationships and social contexts, including online. Child will show increased awareness of the bigger picture and will build resilience to support emotional wellbeing. They will be able to attend trips beyond the home with increased independence and know their local area and the resources available/accessible. | Child will have an understanding of sex education and the social and emotional implications of intimate relationships. YP will have an understanding of the impact of drug and alcohol use on emotions and well-being. The child will have strategies and resources to support them to maintain positive mental health and emotional wellbeing, and know where and how to access support when needed. The child will understand using electronic devices and will recognise the importance of sleep and 'down time' in supporting social and emotional health and wellbeing. Child will access strategies and support, as required, to manage any emotional of mental health needs associated with their physical or medical health conditions/diagnoses. | |
| Provision | V | | | | |

Appendices: Process maps for funding.



Provision Group informs setting in writing of the funding allocation and payment dates

Link Advisor monitors funding use at termly planning meetings and any progress reviews attended.

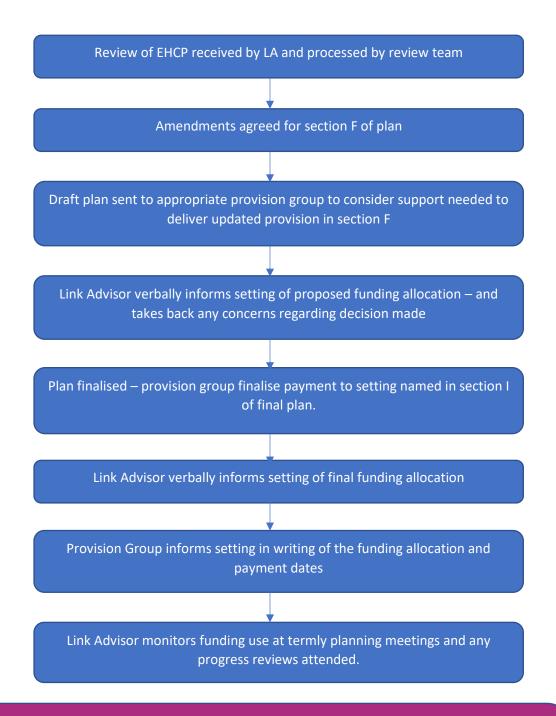
Documents needed:

Draft EHCP (required)

Paperwork used to inform the draft plan (optional)

Top-up funding

Reviewed EHCP



Documents needed:

Draft EHCP (required)

Review paperwork relating to provision being delivered (e.g. provision map/timetable of support) (optional)

Short term outcomes (optional)

Top-up funding

SEN Support Provision Plan (SSPP)

SSPP co-produced with appropriate LA SEND Support services and/or reviewed to demonstrate impact of provision.

When all co-producers agree, plan submitted to LA.

SSPP sent to appropriate provision group to consider support needed to deliver provision outlined in plan.

Link Advisor verbally informs setting of funding allocation – and takes back any concerns regarding decision made.

Provision Group informs setting in writing of the funding allocation and payment dates

Link Advisor monitors funding use at termly planning meetings and any progress reviews attended.

Documents needed:

SSPP (required)

Evidence of provision being delivered . provision map/timetable of support. (required)

Parental consent (required)

Outside agency declaration (required)

Professional reports/observation notes (optional)

Top-up funding

Exceptional Circumstances

Evidence presented to Provision Lead by Link Advisor

DMG consider evidence of exceptional circumstance and what options are available to support including additional funding.

Link Advisor verbally informs setting of support offer including any additional funding allocation — and takes back any concerns regarding decision made.

Provision Group informs setting in writing of the support offer including any additional funding allocation and payment dates

Link Advisor monitors funding use at termly planning meetings and any

progress reviews attended.

Documents needed:

Plan detailing provision required or alternative evidence of need (required)

Evidence of provision being delivered/required e.g. provision map/timetable of support. (required)

Professional reports/observation notes (required)