

Wirral's graduated
approach to inclusive
practice and meeting
educational need



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Wirral's graduated response to inclusive practice and meeting educational need

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INTRODUCTION

Wirral aims and visions and ambitions /rational for graduated approach

Wirral is committed to ensuring that all schools and settings are equipped to deliver 'High quality teaching that is differentiated and personalised and will meet the individual needs of the majority of children and young people' (Code of Practice 2015).

SEND is everyone's responsibility- everyone has a part to play in ensuring that a CYP with SEND receives the support they need when they need it. Through the Graduated Approach, we can effectively support CYP to reach their full potential by identifying strengths and support needed through the four-part cycle of Assess, Plan, Do Review.

The SEND code of practice (2015) states the following definition of SEN:

Special educational needs (SEN)

xiii. A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

xiv. A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or

- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions

Categorised into four areas of need:

Communication and interaction

Cognition and learning

Social, emotional and mental health difficulties

Sensory and/or physical needs

The SEND Code of Practice (2015) also states:

6.44 Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place.

This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes.

This is known as the Graduated Approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive

cycles in order to match interventions to the SEN of children and young people.

The Graduated Approach in Wirral is more than a document. It is the culture and ethos by which we respond to children and young people at the earliest stages of any presenting need. It is how we do things and why we do them.

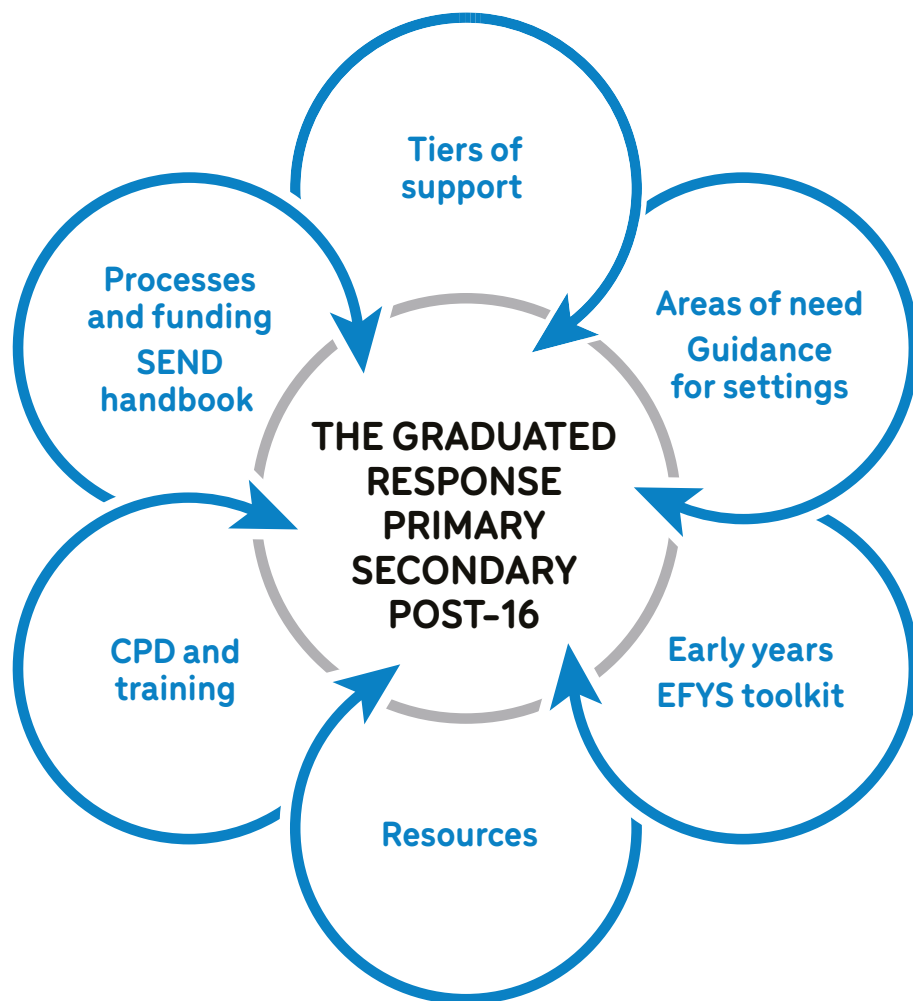
Whilst the graduated approach is a systematic reflective process, Wirral also understands the culture and ethos of this enables inclusive practice to thrive in schools for the children and young people who are at the centre of this process throughout.

It is imperative for our CYP that a graduated approach is in place and that we are ensuring the best possible outcomes for all children and young people by working together to achieve this – it is everyone's responsibility.

Education is not a process
of filling the mind with facts;
it is a process of lighting the
fire of curiosity

WILLIAM ARTHUR WARD

Areas of the graduated approach



Inclusive education seeks to address the learning needs of all children, with a specific focus on those who are vulnerable to marginalisation and exclusion. The goal is to promote opportunities for all children to participate and be treated equally

ANDIE FONG TOY

INTRODUCTION

The graduated approach, related theory and Wirral model

Through this model we can see the process of the Graduated Approach and how each tier supports the one before as they build towards a more specific, targeted approach.

Each piece of the pyramid has a part to play in the correct order of the graduated process.

Wrapped around this, are the three elements of provision and support.

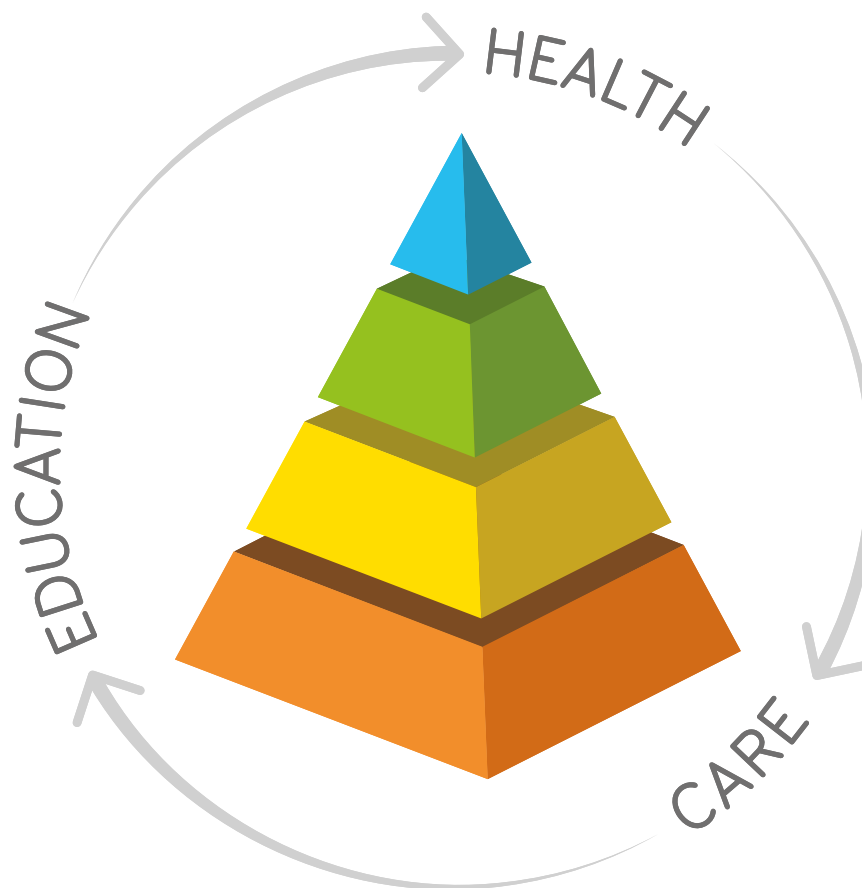
EDUCATION

HEALTH

CARE

Wirral's Graduated Approach has been outlined in chapters specific to are of need for clarity.

However, we know that children and young people may overlap various elements and it is understood that practitioners would use professional judgment to follow a response in the best way to suit the individual needs of the child or young person.



NEEDS ASSESSMENT

Intensive Targeted Support alongside application for full needs assessment when all reasonable adjustments have been made and CYP requires further support in order for needs to be met.

TARGETED SPECIFIC SEND

Support in place for CYP, including external agency and provision if needed. This is built upon the previous stages and continues to include Assess Plan Do Review Cycles and parent carer communication.

EARLY SEND SUPPORT

Early identification of SEND support needed with quick and adaptive response for reasonable adjustments using Assess Plan Do Review Cycles and parent carer discussions to inform support and provision needed to meet needs of CYP.

UNIVERSAL OFFER

For all CYP including the universal offer of support and quality first teaching strategies to support all CYP at every stage of their development

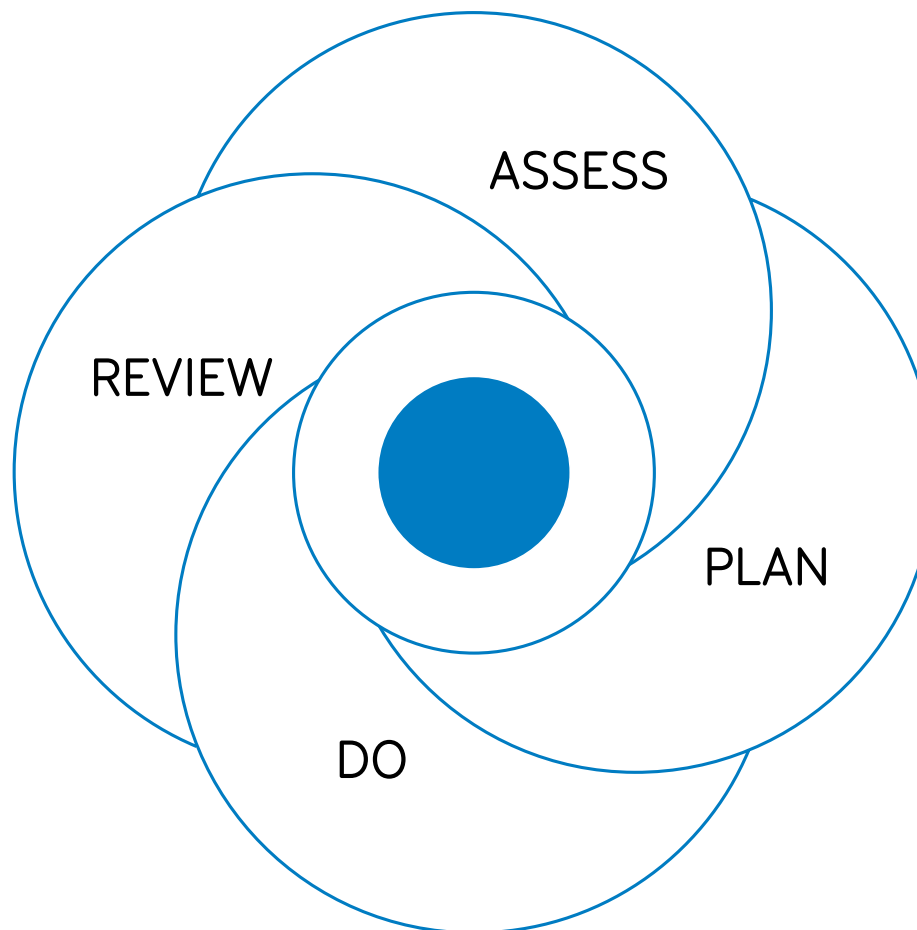
Assess Plan Do Review

The SEND code of practice (Gov 2015) states the following:

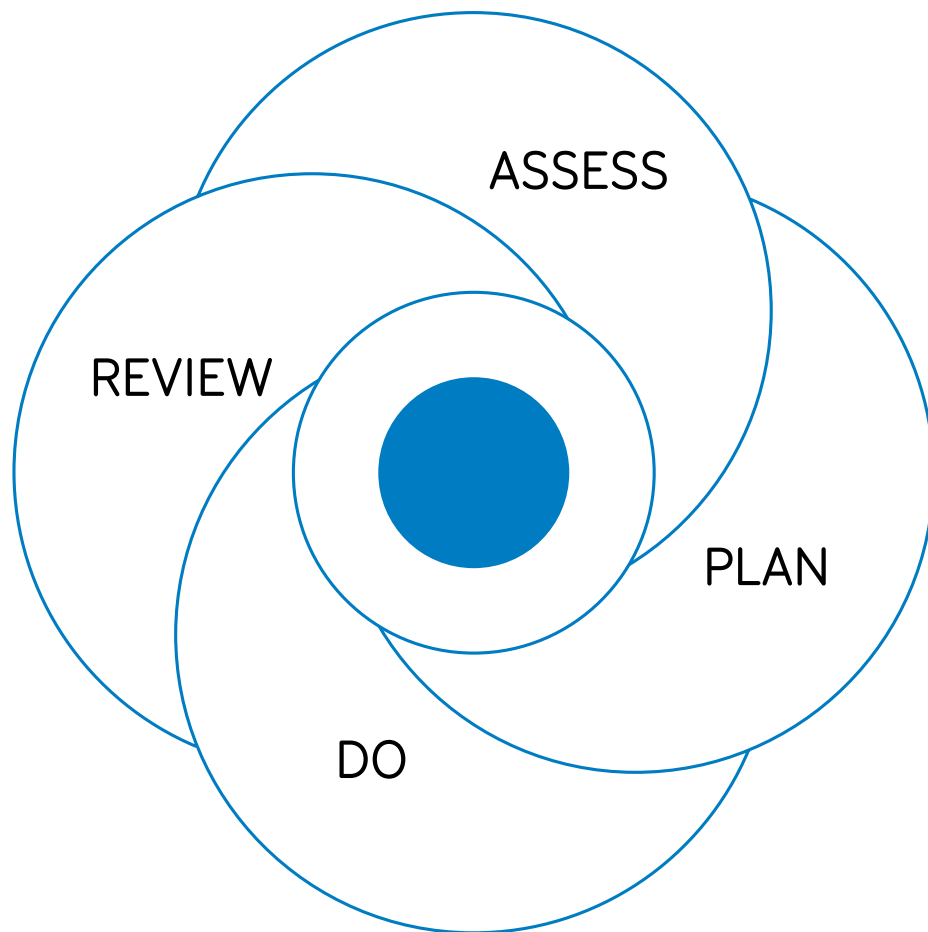
6.44 Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place.

This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes.

This is known as the graduated approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to the SEN of children and young people.



Assess Plan Do Review



ASSESS

Teachers have accurate information about a CYP's attainment and the progress that they make. Teachers identify CYPs who are making less than expected progress and are unlikely – on current performance – to attain at an expected or higher level. The assessment of CYP attainment levels and target setting is moderated rigorously.

PLAN

Following assessment, all agree on a plan of action to include time limited outcomes for the CYP; the adjustments, support and interventions to be put in place. All planning must be CYP centred, and outcomes focused and a date for review recorded.

DO

All support the plan and implement the adjustments, support and interventions. Teachers are responsible for: Differentiating and personalising the curriculum Delivery of 'additional and different' provision for a CYP with SEN linking interventions to classroom teaching.

REVIEW

The quality, effectiveness and impact of provision are evaluated by the review date. This is shared with CYP, and parent/carers and their views sought. The cycle recommences at Assess with the updated needs of the pupil being considered before planning a continuation of or change to provision.

INTRODUCTION

Universal offer and quality first teaching

As outlined in the Teaching Standards, the teacher is responsible for the learning and progress of the children and young people (CYP) in their class. This is the minimum duty of all teachers. It is a teacher's duty to always maintain the teaching standards and to adapt and present a broad and balanced curriculum in ways that are accessible, yet challenging, for all CYP. Delivering high quality teaching that goes further than the minimum outlined in the teaching standards is imperative to the learning and development of all CYP in empowering them to achieve their full potential and highest possible outcomes.

The SEND code of practice (2015) states that "high quality teaching that is differentiated and personalised will meet the individual needs of the majority of children and young people". Teachers will understand that adaptive teaching strategies may range from TA support to adjusting activities to suit the specific need of the child for that learning moment. High quality teaching ensures that in each learning opportunity presented to the child, the learning processes are personalised to ensure maximum impact and retention of knowledge and skills.

The code also states: "A pupil has SEN where their learning difficulty calls for special educational provision, that is provision that is different from or additional to that normally available to pupils of the same age.

Making higher quality teaching normally available to the whole class is likely to mean that fewer pupils will require such support. Such improvements in whole-class provision tend to more cost effective and sustainable."

We understand that this means broadening and widening the circle of the universal offer and Quality First Teaching to allow more children and young people to benefit from high quality provision.

Central to this is the relationship that the teacher creates with their students. A teacher must first create an environment that is safe, compassionate and supportive, and allows children to approach challenges that are achievable. This allows self-esteem, independence, and metacognitive skills to develop.

A teacher needs to also consider their own teaching style and adapt this to the needs of the child of young person. The teacher should consistently apply a Graduated Approach adhering to the

policies in place for their educational setting and seeking help/reflective discussion from other practitioners on a regular basis. By broadening the circle of our universal approach through quality first teaching, we empower more children and young people to thrive and be included.

The following list outlines some principles of Quality First Teaching (QFT), however in a CYP-centred approach there may be more adjustments suitable for the CYP that should be considered. Underneath this initial list, some more specific Quality First Teaching practical strategies have been organised by specific need. Quality First Teaching puts the CYP and their needs at the centre and is flexible to adapting to changing needs and the ever-developing CYP. Quality First Teaching is the highest quality provision for all children and young people all the time.

Quality first teaching meets the needs of all CYP and includes, but is not limited to:

- Flexible grouping arrangements allowing CYP to experience working with different CYP and collaborative learning approaches that are rich in language and experiences.
- Multiple opportunities for cognitive retrieval over varying amounts of time to improve short to long term memory.
- Some adaptive teaching strategies, a range of activities and material – adaptive/systematic questioning to deepen learning and build understanding.
- Use of visual and auditory and kinaesthetic approaches.
- Awareness that a CYP may need more time to complete tasks and that equality of access may mean they need to do some things differently starting sooner or adapting a task to time manage the expectations of completion.
- Awareness that a CYP may need more time to process language and complete tasks. Open ended tasks that may lead to further learning with less focus on a 'completed' piece of work but a process of discovery.
- The opportunity for pre-learning to expose a CYP to unfamiliar language in a safe setting with dual-coding techniques to enable cognitive retrieval.
- Resources and displays to support independence that CYP are supported to use and choose resources that support their own learning. This provides opportunities for metacognitive development. Teacher to give routine feedback and modelling of metacognitive strategies for CYP.
- Environmental considerations are made to meet the needs of all CYP e.g., seating positions, personal space, classroom layouts, displays, signage colour and sensory considerations.
- Consider learning style/characteristics of learning of CYP.
- An understanding that the CYP's additional needs may have a wider impact on a CYP's social and emotional well-being despite the apparent lack of obvious impairment. The CYP may also be vulnerable to bullying or have low self-esteem.
- A range of alternative equipment/assistive technology may be needed.
- The pace of work may need to be adapted and learning presented in smaller 'chunked' sections to allow CYP time to process.
- Clear and positively stated rules and expectations for behaviour are apparent through visual means and consistently applied and modelled.
- Visual and practical supports, e.g., visual timetables, visual instructions/cues.
- A teacher shows compassion and empathy towards a CYP and supports their emotional communication by listening and ensuring the CYP is heard and supported through identifying and processing their feelings in any given situation. A teacher may need to revisit, discuss this with a CYP's parent/carer to further support any emotional processing over time.
- Open communication with parent/carer relaying positive experiences that can be built on and support the CYP's self-esteem as well as links between home and school/setting life.

Below you will find a suggested list of practical strategies you can utilise to enhance your Quality First Teaching practice arranged by area of need. Again, a CYP centred approach means using your specific knowledge of the CYP to inform your practice and knowing what will work best for the specific need you are supporting. This list is not exhaustive but intended to support your planning stages.

INTRODUCTION

Cognition and learning: suggested strategies

Ask the CYP what works for them in class. When have they enjoyed being successful or felt confident in taking on a challenge?

Targets should be cumulative. Next steps for learning should be derived from what the CYP can already do, referring to earlier stages when necessary. Ensure links to prior learning and strategies are explicitly made as some CYP don't make the links automatically and may need support to see the connections in learning and build cognitive pathways to long-term memory.

Give additional time to complete tasks if necessary or reduce the amount the learner is expected to do.

Allow alternative ways to demonstrate understanding, e.g., diagrams, mind maps, use of voice recorders, role play, low stake quizzes, multiple choice questions.

Build in plenty of opportunities to develop speaking and listening skills. Research has clarified the role this has in the development of reading and writing.

Make sure CYP have 'buddies' to support them at appropriate times, e.g., when they are tackling a task in an area in which they are not confident.

Encourage CYP to use structured approaches such as mapping ideas out under different headings.

Explicitly teach modelling of written responses with access to learning scaffolds such as writing frames, closed procedure tasks and fragment sentences. Leave these where learners can see them in the lesson to reduce cognitive load.

Give opportunities for CYP to check solutions using a range of methods. Build metacognition by asking why they used that method/why something else couldn't be the answer.

Give opportunities for CYP to make up problems using skills learned for their talking partner to solve.

Break instructions down into manageable chunks and given in sequence, supported by visual guides and task plans.

Key learning points should be reviewed at appropriate times during and at the end of lessons to address misconceptions, reinforce main ideas and articulate next steps on a learning journey. Put review points on the task plan so it starts to become an independent strategy.

Key words and/or phoneme mats should be available on desks with accompanying pictures.

Key words/vocabulary emphasised when speaking and displayed clearly. Contextualise and give synonyms to build vocabulary.

Make close observations of CYP to fully understand the strategies being used to solve problems - get them to 'talk through' what they are doing.

Make sure you know the level of difficulty of any text you expect the CYP to read, giving opportunities for pre-learning.

Give live feedback as much as possible in writing for content - encourage CYP to highlight one or two words themselves that may be incorrect to be looked at later.

Minimise copying from the board - provide copies for CYP if necessary.

Occasional opportunities to work with a scribe - perhaps in a small group to produce writing for 'publication' e.g., displayed on the wall or read to others.

Provide opportunities for CYP to transfer and generalise learning across contexts and cross-curriculum moments.

Present tasks in a meaningful context. Give real reasons for writing, e.g., actually send letters or give speeches.

Pre-teach subject vocabulary and give opportunities to use. Ask learners to actively look for the vocab in other texts.

Provide – and explicitly teach use of - range of writing frames to aid organisation. Include additional scaffolding, sentence starters, word banks etc.

Provide a talking partner for CYP to share/explain their thinking.

CYP encouraged to explain what they have to do to check understanding. Give processing time if needed.

Range of coloured overlays/reading rulers available. Colour wash on the whiteboard to minimise contrast and visual stress. Avoid using black pen on white background.

Teach and model memory strategies (storage, retrieval, reducing working memory load) within specific tasks.

INTRODUCTION

Cognition and learning: suggested strategies

Teach keyboard skills if a CYP prefers this method of recording work/ideas.

Teach sequencing as a skill, e.g., sequencing stories, alphabet, re-ordering texts, timelines etc.

Text presented clearly - uncluttered, use bullet points or numbered lines and clear 'sans' type font. Double spacing between words and lines can help.

Any visual aids to an explanation need to be uncluttered, clear and concise and draw attention to key content of the lesson.

To support short term memory, have small whiteboards and pens available for notes, spellings, record ideas etc.

Use a range of alternative and assisted technologies as and when appropriate e.g., Clicker, Office365, Dragon Dictate etc.

Number lines in longer texts so learners can find the relevant part more easily.

Use IT programs and apps to reinforce and revise what has been taught.

Avoid visual 'clutter' around areas of teacher input such as the whiteboard.

Reduce the number of spellings to learn if a CYP is struggling. Better to learn five properly than attempt ten which won't go into the long-term memory and could result in loss of confidence and motivation.

Ensure other talents are nurtured as this is where learners will find the motivation, confidence and resilience to attempt tasks they find harder and could be where they find future success. Don't take time from creative/sporting lessons to deliver intervention.

Ensure models of working out are visible and clear.

Set high presentation expectations to support CYP in organising their own learning, e.g., use squared paper - one digit per square to support place value understanding.

Use learning scaffolds such as mind maps, including assistive technology, which reduces cognitive load and working memory demands until the learner has a good level of proficiency in a previous learnt skill.

INTRODUCTION

Communication and Interaction: Suggested Strategies

Adults' speech should be clear and unhurried with normal intonation - keep language choices precise, minimise use of abstract language, explaining any metaphors or idioms used for clarification.

CYP's name or agreed cue used to gain individual's attention – and before giving instructions.

Allow time for CYP to respond (processing time) and repeat the question if needed.

Working with TA to condense what is being said into bullet points/instructions.

Listening skills taught, modelled and reinforced through general communication but also specific learning such as drama games etc.

Be explicit re the different purposes/functions of language, give examples and model.

Classroom furniture and groupings considered so that CYP can see visual prompts and the teacher/board.

Emphasise keywords/vocabulary when speaking. Support with visuals and dual coding where possible.

Give instructions in manageable chunks and in order. Support with visuals where possible, i.e., whiteboard or images.

Lighting, noise levels and access to quiet spaces considered - overwhelming or overstimulating environments may reduce the processing and understanding of the CYP. Consider the use of quiet spaces and 'alone time', allowing for a break when needed.

Photographs of staff and other CYP (if appropriate) on display. Could be presented as a social story.

Pre-teach vocabulary that may be needed allowing for dual coding techniques and cognitive retrieval.

Regularly reinforce new vocabulary and concepts in a range of context to encourage generalisation.

Range of multi-sensory approaches used to support spoken language e.g., symbols, pictures, concrete apparatus, artefacts, role-play.

Systems of visual feedback in place to allow pupils to show they have understood, e.g., symbol cards, traffic light cards, smiley faces.

CYP are encouraged – and shown – how to seek clarification.

Explicitly teach phonological awareness skills (rhyming, alliteration, isolation, segmentation, blending, sound exchange).

Use of personalised visual timetables, choice boards, task organisers etc.

Use talking frames to provide a structure for reporting, telling stories and sequencing etc.

Ensure time for teacher to read aloud to the class modelling communication through effective storytelling.

Delivery of information 'input' chunked or slowed to allow processing time.

Expectations of listening displayed, taught, modelled and regularly reinforced with positive encouragement.

Prompt cards using a narrative framework (who, where, when, what happened etc.) used to support understanding of question words.

Ensure that preferred methods of communication (as well as level of eye-contact) known by all staff within the setting.

INTRODUCTION

Social Emotional Mental Health (SEMH): Suggested Strategies

Achievable, clear and visible outcomes/learning objectives - some children would benefit from seeing 'what a good one looks like' throughout the lesson for reference of expectation to reduce anxiety and build confidence.

Systems for observing, auditing and assessing a CYP's behaviour including the use of an ABC chart to isolate any concerns or triggers.

Positive praise for positive behaviours to build relationship and confidence where appropriate for the CYP. Give this feedback instantly in the moment if possible.

'Catch' the CYP being good and emphasise positives in front of other pupils and staff (where appropriate).

Consider classroom layout - quiet spaces and alone time to reflect and calm.

Safe space for storing special items such as toys for anxiety or fidget toys etc.

An inclusive and positive 'behaviour for learning policy' i.e., uses visuals, a clear process, rewards, consequences, language/scripts are clear and consistent throughout the setting.

Chunk instructions and support with visual cues and a clear learning journey and activity with defined 'end point' or outcome expectation.

Staff use a universal CALM (Calm manner, Ask questions, Listen and Manage) approach to all behaviours with the intention of being inclusive, deescalating situations and keeping everyone feeling safe.

Communicate positive achievements - no matter how small - with home and encourage home to do the same. Could be in the form of a 'Golden Moments' 'Wow Cards', phone calls home or 'Good News' book.

Differentiating setting behaviour system to be fully inclusive - i.e., to take into account acceptable activities, e.g., fidgeting, movement breaks, tapping.

Give breaks between tasks and give legitimate 'moving around' activities, e.g., class responsibilities, daily mile, multi-sensory activities etc.

Use interactive strategies e.g., CYP have cards/whiteboards to hold up answers, come to the front to take a role etc.

Give the CYP an appropriate classroom responsibility to raise self-esteem and profile with other CYP.

Ensure groupings provide positive role models and suitable learning partners.

Have a range of simple, accessible activities that the CYP enjoys using as 'calming' exercises - or a range of extension activities where appropriate.

Teach pupils how to use recording method e.g., post-it notes for questions and ideas rather than interruptions (when appropriate).

Use a visual timer to measure and extend time on task - start small and praise, praise, praise.

Make expectations for behaviour explicit by giving clear targets, explanations and consistent modelling.

Nurturing principles underlying all interactions in the setting to provide safe and compassionate environment.

Play calming music where appropriate.

Provide alternative seating at carpet time if required.

Provide lots of opportunities for kinaesthetic learning e.g., practical activities, experiential learning, multi-sensory resources.

Strategies in place to monitor attendance and punctuality which enhance communication between home and the setting and allow families to communicate their difficulties in a safe way to enhance support that can be offered.

Structured systems in place to support internal transitions between classes/activities, around the setting.

CYP are aware of who/when/where they can share any concerns with a trusted, named adult and what to do if that person is not available.

Give a set time for written work and do not extend into playtime to 'catch up' - the CYP will need these breaks.

INTRODUCTION

Social Emotional Mental Health (SEMH): Suggested Strategies

Systems in place which enable CYP to easily communicate difficulties, worries e.g., “bullying box”, “worry book” and daily talk time/de-brief that is protected and consistent.

Take time to find CYP’s strengths and praise these - ensure that the pupil has opportunities to demonstrate their skills to maintain self-confidence. Could they teach someone else a new skill that they are confident in?

Ensure timetabled, consistent and high quality PSHE curriculum to develop the SEMH of the whole class and to enhance personal development. Pastoral Lead to support.

Use ‘now & next’ with visual cues for the CYP so that they understand the timetable for the day.

Personalise teaching where possible to reflect CYP interests.

Communicate in a calm, clear manner.

Keep instructions, routines and rules short, precise and positive.

Listen to the pupil, giving them an opportunity to explain their behaviours. Use Restorative Practice approach. Training available through Wirral YOT/Wirral Inclusion Team.

INTRODUCTION

Physical, Sensory and Medical

The environment is planned to take into consideration the physical and sensory needs of all CYP e.g., playground and classroom layouts, displays, signage and lighting.

An understanding that a visual impairment may have a wider impact on a CYP's social and emotional wellbeing despite the apparent lack of obvious impairment.

White/interactive board displays should be clear for all CYP, a dark pen should be used when writing on the board.

Use of teaching strategies that develop the independent learning of the CYP.

A range of alternative equipment/assistive technology may be useful.

Pace of task and expectations in an activity may need to be considered.

Use of visual, auditory and kinaesthetic approaches.

Resources and displays that support independence.

Consideration to CYP's learning style.

Information about the CYP's difficulties is shared with relevant staff, in partnership with parents/carers.

Individual targets agreed and monitored, following discussion with CYP and parents, to share advice on successful strategies and set targets.

The quality of printed material should be appropriate for all CYP as regards clarity, layout, font size and colour contrast.

Adaptation of activities as needed for the CYP.

The setting should seek advice on inclusive practice (inc. exam advice) as appropriate for pupils with V.I. from the Vision Support Team and/or the Hearing Support team.

Provision of an inclusive PE curriculum, including arrangements for Sports Day where appropriate.

Opportunities for social interaction between peers and the wider community of the setting may need to be engineered to bolster self-esteem and confidence.

The curriculum includes examples of diversity.

Designated time is allocated to Teaching Assistants for planning and liaison with teachers.

Staff make use of a wide range of resources, including those produced within the LA, to inform their inclusive practice.

Anti-bullying is routinely addressed, and pupils are confident in reporting incidents.

Trips which are planned well in advance and take into consideration the needs of the CYP.

The setting can demonstrate an inclusive ethos that supports the learning and wellbeing of all CYP.

CPD has been taken by staff who are supporting children with a specific need. This includes any medical support that may need to be provided. This CPD is recorded and regularly updated as needed.

Assistance with access to specialised equipment e.g., laptops, cameras, speech/large print software or talking equipment.

The setting is to ensure that key information is passed on at times of transition and, where appropriate, and will consult with the specialist teaching team.

VI (Visual Impairment) and HI (Hearing Impairment) specific advice and support from the Vision Support Team and Hearing Support team on: - curriculum adaptations, equipment to access the curriculum, positioning in the classroom, risk assessment, mobility, individual health care and management plans, exam access arrangements, advice on use of ICT to access the curriculum.

Overview of the SEND Code of Practice related to graduated approach

For further breakdown and more information, please see the SEND handbook.

Overview The Children and Families Act (2014) reformed legislation relating to children and young people (CYP) with special educational needs and disabilities (SEND). The SEND Code of Practice (2015) provides statutory guidance for all organisations that work with CYP with SEND. It outlines the duties, policies and procedures that must be adhered to. The Code clearly outlines which organisations must have regard to the statutory guidance.

These are:

- Local Authorities
- School Governing Bodies
- College Governing Bodies
- Academy proprietors
- PRU management committees
- Independent schools and specialist providers
- Early years providers
- National Health Service Commissioning Board
- Clinical commissioning groups

- NHS Trusts
- NHS Foundation Trusts
- Local Health Boards
- Youth Offending Teams
- First-tier Tribunal

Chapter 1 of the SEND code of practice underpins the principles behind the legislation and guidance in the Code of Practice. The principles are reflected in the following statements.

Section 19 of the Children and Families Act 2014 makes it clear that LA's must:

- Have regard for the views, wishes and feelings of children, their parents and young people.
- Provide CYP and parents/carers with high quality information and support.
- Supporting CYP and parents/carers to ensure best possible outcomes.
- Involve CYP and parents/carers in planning, commissioning and reviewing services.
- Identify CYP needs early and offer effective early intervention.
- Give greater choice and control for CYP and parents/carers over their support.

- Ensure greater collaboration between education, health and social care services to provide support.
- Ensure there is high-quality provision to meet the needs of children and young people with SEND.
- Ensure there is a focus on inclusive practice and removing barriers to learning.
- Ensure young people are supported to make a successful transition to adulthood.

EHCP overview and pathway

Education, Health and Care, Assessments and Plans (Chapter 9 of SEND COP)

The majority of children and young people with SEN will have their needs met within Local mainstream early years' providers, schools or colleges.

A Local Authority must conduct an assessment of education, health and care needs and prepare an Education, Health and Care (EHC) Plan when it considers it may be necessary for special educational provision to be made for the child or young person through an EHC Plan.

EHC Plans must be forward looking and help to raise aspirations. They should specify how services will be delivered as part of a whole package and explain how together the services will deliver improved outcomes across education, health and social care for the CYP.

Requesting an Assessment

The following people have a specific right to ask a Local Authority to conduct an education, health and care needs assessment for a child or young person aged between 0 and 25:

- The child's parent/carer.
- A young person over the age of 16 but under the age of 25.

- A person acting on behalf of a school or post-16 institution (this should ideally be with the knowledge and agreement of the parent/carer or young person where possible).
- CYP aged 10 – 18 in youth custodial institutions also have the right to request an assessment for an EHC Plan.

Considering whether an EHC needs assessment is necessary to meet the needs of the CYP

The Local Authority should only receive a request for EHC Needs Assessments after the setting/ school/ college can demonstrate that extensive interventions consisting of a Graduated Approach (Assess, Plan, Do, Review) have been in place, and then only if adequate progress has not been made.

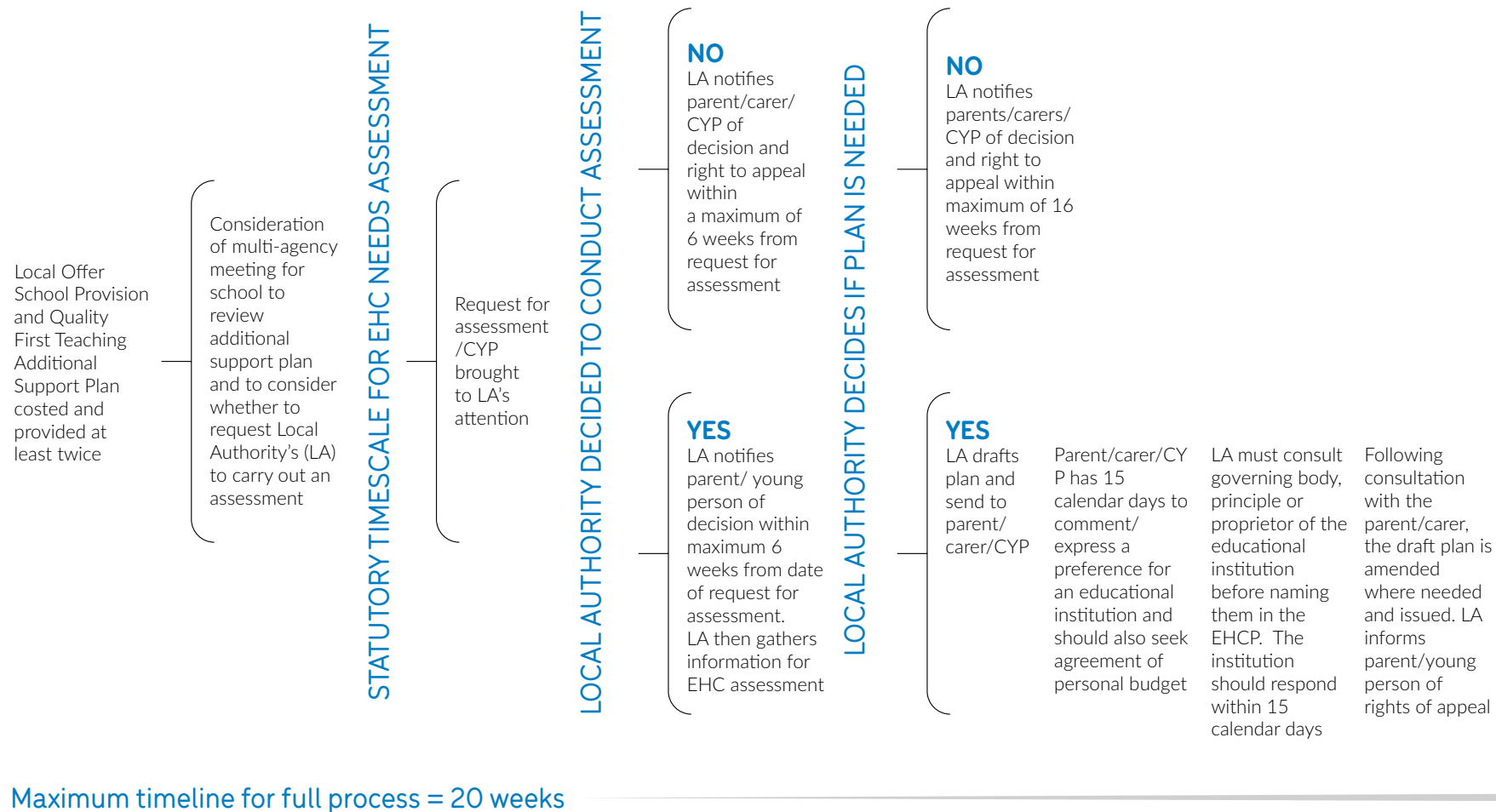
- Following a request for an EHC Needs Assessment (EHCNA) the Local Authority (LA) must determine whether a statutory education, health and care needs assessment is necessary, make a decision, and communicate its decision to the child's parent/carer or young person within 6 weeks of receiving the request. This decision will be based on the evidence/ information which has been sent.

- The setting/ school/ college/ parents/ CYP will be sent a letter advising of the decision to assess.
- Should the request for assessment be declined parents/carers/ CYP have the right to appeal the decision.
- Settings/ schools/ colleges cannot appeal the decision. However, they will be contacted by an EHCP co-ordinator and given advice on how the CYP can be supported within existing, mainstream resources. Additional resources through a Pupil Funding Agreement may be suggested.
- Settings/ schools/ colleges can collate further information and re-submit another request to the LA.
- Where they decide that special educational provision may need to be made through an EHC plan, the LA must notify the child's parents/carers or young person, the health service, LA officers responsible for social care, Early Years setting, school or post 16 institution.

INTRODUCTION

Wirral's EHCP Pathway

At every stage, CYP, parent/carer is fully involved. Their views and wishes are listened to and taken into account



Requirements for schools/post-16 settings

Every setting is required to identify and address the SEND of the CYP it supports by ensuring that they:

- Identify and respond effectively to SEND.
- Provide effective provision.
- Focus on high expectations and improved outcomes.
- Adopt a Graduated Approach to SEND provision with the four stages of action: Assess, Plan, Do, Review.
- Ensure CYP with SEND are given the best support through the Graduated Approach.
- Provide inclusive opportunities for development in all areas.
- Designate a teacher responsible for co-ordinating SEN provision.
- Ensure that there is sufficient expertise and experience to support CYP with SEND.
- Inform parents/carers when special education provision is being provided.

They must prepare a report on:

- The implementation of the SEN policy.
- Arrangements for admission of CYP with disabilities.

- Steps that are in place to ensure that there are equal opportunities and barriers to learning are removed.
- The facilities provided to enable access for CYP with disabilities.
- Their accessibility plan showing how access will be improved over time.
- There should be a member of the governing body or a sub-committee with specific oversight of the setting's arrangements for SEN and disability.
- Setting leaders should review how the resources used to address SEN can be used to build the quality of whole setting improvement.
- The quality of teaching for CYP with SEN and the progress should be central to the setting's performance management arrangements. Data should be closely analysed, and targets set to ensure the best possible outcome for the CYP.
- High quality teaching, differentiated for individual CYP, is the first step in responding to CYP who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching.
- The identification of SEN should be built into the overall approach to monitoring the progress and development of all CYP.
- Clear assessments guided by the class/ subject teacher should guide the level of support being offered.

Special education provision in settings

- Teachers are responsible and accountable for the progress and development of the CYP in their class, including where CYP access support from teaching assistants or specialist staff.

Role of the SENCO

The role of the SENCO

- Governing bodies and Proprietors must ensure that there is a qualified teacher designated as SENCO for the setting.
- The SENCO, in collaboration with the Headteacher and governing body determines the strategic development of the SEN policy and provision in the setting in order to raise the achievement of children with SEN.
- The SENCO has day-to-day responsibility for the operation of the SEN policy and co-ordination of the provision including those CYP with EHC Plans.
- The SENCO advises on the Graduated Approach for SEN.
- The SENCO advises on the deployment of Element 2 funding to ensure CYP's needs are met effectively.

The role of the SENCO in early years settings and schools

The key duties of the SENCO are to support the Early Years Setting/School in:

- Identifying CYP with SEN. It is crucial that the correct CYP are identified and that there is confidence that over identification is not a

feature of the early years setting/school.

- Overcoming barriers to learning through ensuring that thorough assessments are completed. Effective analysis of this result in high quality interventions being delivered.
- Setting SMART educational outcomes.
- Tracking and monitoring of progress.
- Monitoring the quality of teaching and advising on areas for development.
- Reporting progress for SEN to the Local Authority.
- The SENCO is the significant person in supporting CYP, their families and school staff. As such it is vitally important that CPD is relevant and up to date.
- The SENCO is pivotal in liaising with other agencies and support networks.
- For this role the SENCO needs to have sufficient time to carry out their duties. The Code of Practice states the SENCO should have 'sufficient time and resources to carry out these functions'. The amount of time will vary across provision. The time allocated should be based on the number of CYP with SEN, the expertise of the staff in providing inclusive provision and the complexity of need.

- The SENCO must ensure that the SEN Information Report is in line with expectations.

The Role of the SENCO in Colleges

Colleges should ensure there is a named person with oversight of SEN provision to co-ordinate support in the same way that the SENCO does in school.

The SENCO is a key figure in inspiring the school's ethos and supporting the vision of 'everyone's responsibility'. They are a source of knowledge, support and assurance for children and young people in their educational journey. They support teachers in enacting quality first teaching and also in early response to a developing SEND need- they are vital to the SEND provision of any school or setting.

Role of the SEND Governor

Governing bodies of maintained schools and academy trusts have legal duties in relation to pupils with SEN. However, this does not have to be the full Governing body and these duties can be delegated to a committee or an individual Governor. If the duties have been delegated, it is still the responsibility of the full Governing body to ensure that the functions are being carried out.

The SEN Governor should:

- Use best endeavours in exercising their functions to ensure that the necessary special education provision is made for any pupil who has SEN.
- Ensure that there is a qualified teacher designated as Special Educational Needs Co-ordinator (SENCO) for the school. A newly appointed SENCO must be a qualified teacher and, where they have not previously been the SENCO at that or any other relevant school for a total period of more than twelve months, they must achieve a National Award in Special Educational Needs Coordination within three years of appointment.
- Consult the Local Authority and the governing bodies of other settings when it seems necessary to co-ordinate special educational teaching in the area.
- Ensure that the pupils with SEN join in the everyday activities of the school together with children without SEN, as far as is compatible with them receiving the necessary special educational provision; the provision of efficient education for all other pupils; and the efficient use of resources.

- Take account of the SEN Code of Practice when administering their duties.
- In accordance with the Equality Act 2010, governing bodies and academy trusts are also under a duty to make reasonable adjustments to avoid substantial disadvantages experienced by CYP with disabilities. Governing bodies and academy trusts are required, where reasonable, to provide auxiliary aids and services as part of the 'reasonable adjustments' duty. Technical guidance on schools' reasonable adjustments duty is available from the Equality and Human Rights Commission.

Duties under the Children and Families Act 2014

Paragraph 38 of the Governance Handbook says that maintained schools and academy trusts must:

- Use best endeavours in exercising their functions to ensure that the necessary special education provision is made for any pupil who has SEN.
- Ensure that parents or young person are notified by the school when special educational provision is being made for their child, because it is considered that he or she has SEN.
- Make sure that the responsible person makes all staff likely to teach the pupil aware of the pupil's SEN.
- Make sure that the teachers in the school are aware of the importance of identifying pupils who have SEN and of providing appropriate teaching.

- Ensure that there is a qualified teacher designated as special educational needs co-ordinator (SENCO) for the school. A newly appointed SENCO must be a qualified teacher and, where they have not previously been the SENCO at that or any other relevant school for a total period of more than twelve months, they must achieve a National Award in Special Educational Needs Coordination within three years of appointment.
- Consult the Local Authority and the boards of other schools when it seems necessary to co-ordinate special educational teaching in the area.
- Ensure that pupils with SEN join in the everyday activities of the school together with children without SEN, as far as is compatible with them receiving the necessary special educational provision; the provision of efficient education for all other pupils; and the efficient use of resources.
- Take account of the 'SEN and Disability Code of Practice' when carrying out their duties towards all pupils with SEN.
- Co-operate with the Local Authority in developing the local offer.
- Ensure the school produce and publish online its School SEN Information Report in accordance with Section 69 of the Children and Families Act 2014.
- Ensure the school has arrangements in place to support children with medical conditions (Section 100 Children and Families Act 2014).

Identifying Special Educational Needs – Best Practice

- The Threshold Documents/SEND Handbook and Graduated Approach should be referenced when identifying support required by CYP.
- CYP achieving below age related expectations or making slower progress than their peers should not be assumed to have special educational needs or require specialist additional provision.

It would be wrong to assume that they may be requiring additional or different provision. It is at this point that teacher, together with the SENCO, should analyse classroom practice and the effectiveness of this for the pupil in question. The first question must always be 'what can we do differently to ensure better outcomes for this CYP'?

Ask whether provision can be improved to meet CYP needs, examine how effective differentiation is and refer to the Quality First Teaching chapter.

- Once a potential special educational need is identified the four actions outlined below will ensure that the right provision is in place before other alternatives are considered. The teacher must have accurate information and evidence that more than what is ordinarily available is required.

At this stage find out what the CYP's needs are and what support is required to ensure the CYP in making good progress and securing good outcomes.

The four actions required are:

1. More detailed assessment
 2. More specialised expertise
 3. More personalised programmes
 4. More frequent reviews
- Analysis of provision should ensure that teaching and support is at least good. This can only be achieved if assessment and teaching are regarded as intrinsically connected and not separate activities.
 - Good practice in the identification and assessment of CYP needs is a pre-requisite for developing and sustaining good quality SEN provision in settings. This practice underpins high aspirations for CYP achievement.

The educator must believe in the potential power of his pupil, and he must employ all his art in seeking to bring his pupil to experience this power

ALFRED ADLER

GRADUATED APPROACH THROUGH AREAS OF NEED

The following chapters are organised by area of need. As previously stated, the educational practitioner will use their professional judgment in the case of the CYP needing support across multiple areas of need.

The behaviours of the CYP or not limited to those stated but intended to provide a guide of what could be happening. The suggested strategies again are not limited and there may be further strategies that are helpful that are not mentioned. This breakdown of a Graduated Approach is designed to support the practitioner in providing help and support for the CYP in the earliest instance to allow for an inclusive educational environment.

SECTIONS

- (A) Cognition and learning
- (B) Communication and interaction
- (C) Physical, medical and sensory - including hearing and vision
- (D) Social, Emotional and Mental Health (SEMH)



SECTION A

COGNITION AND LEARNING

These Threshold Tiers were developed with reference to the Special Educational Needs and Disability Code of Practice 0 to 25 years: Statutory guidance for organisations who work with and support children and young people with special educational needs and disabilities (DfE and DoH, 2015).





Chapter 6 of the SEN Code of Practice outlines Cognition and learning as one of the 4 broad areas of need.

This section refers to Cognition and Learning.

6.30 Support for learning difficulties may be required when children and young people (CYP) learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including Moderate Learning Difficulties (MLD), Severe Learning Difficulties (SLD), where CYP are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to Profound and Multiple Learning Difficulties (PMLD), where CYP are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

6.31 Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.

Wirral's graduated approach to supporting children with cognition and learning needs

-  **TIER 1**
Universal Provision
-  **TIER 2**
Universal Provision and any extra support included in what is already available within reasonable adjustments
-  **TIER 3**
Time limited funding may be provided based on need and requirements
-  **TIER 4 AND ONWARDS**
EHCP and further support to be decided as needed as per the thresholds and EHCP pathway

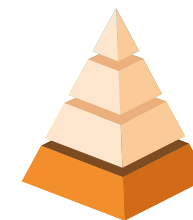


COGNITION AND LEARNING

Tier 1 – Universal Offer and Quality First Teaching

The CYP has difficulties with cognition and learning which have been identified by the class teacher (CT).

Needs can be met within settings' own resources.



Description of the CYP's needs

The CYP is working generally within or just below Age Related Expectations (ARE). Quality First Teaching is meeting the CYP needs with appropriate adaptive teaching strategies and reviews for specific learning needs.

Things to do to support the CYP in the setting and the evidence required to support decision making

CT (Class Teacher) has completed baseline assessment and re-assessment of CYP needs and has identified specific learning targets or gaps in knowledge or skill.

CT has planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum, e.g., scaffolding of learning and additional resources. This adaptive teaching strategy has continued for a reasonable period using the Assess, Plan, Do, Review cycle.

CT has planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been implemented for a reasonable period of time e.g., half a term.

CT has completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and the targeted interventions.

CT provides evidence that Quality First Teaching is not meeting the needs of the CYP.

If needed, CT describes within the context of their own class how they will promote the progress of the CYP. CT provides evidence of the involvement of CYP's parents/ carers at all stages through the documentation of meetings and conversations with them.

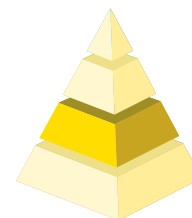
Quality first teaching and strategies

[Tier 1- Quality First Teaching \(link to docs\)](#)

COGNITION AND LEARNING

Tier 2 – Early support

The CYP has difficulties with cognition and learning which require:
Additional provision from within setting's resources.
Co-ordination of assessment, intervention and monitoring by the SENCO.
May also require some specialist advice from other services available to all CYP.



Description of the CYP's needs

The CYP is making less than expected progress and is operating at a level significantly below Age Related Expectations. There is evidence of an increasing gap in attainment between the CYP and their peers. The CYP is becoming increasingly frustrated by their difficulties and their families are raising concerns.

Things to do to support the CYP in the setting and the evidence required to support decision making

The SENCO has organised/undertaken more specialist assessment using tools (preferably standardised) relevant to the CYP's needs. The SENCO may have sought additional specialist advice relevant to the CYP's needs.

The SENCO may have attended a drop-in session with an EP or the Inclusion Team to discuss the CYP.

There are significant adaptive teaching strategies, relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., one term. There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs.

Both the adaptive teaching strategies and the interventions reflect the specialist advice received and both have been implemented for a reasonable period of time e.g., one term.

There have been regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.

Where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress. SENCO provides evidence of the involvement of CYP's parents/carers.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

The setting can demonstrate an inclusive ethos that supports the learning and well-being of all CYP.

A broad and balanced curriculum is planned for all CYP.

The setting is flexible in adapting the core offer to meet needs of all CYP.

Opportunities are provided for small group work based on identified need.

The wider curriculum promotes positive examples of diversity.

Well-planned and stimulating PHSE/Citizenship curriculum, differentiated to the needs of each cohort/class.

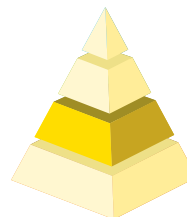
Anti-bullying is routinely addressed, and CYPs are confident in reporting incidents.

Pastoral arrangements are embedded in whole-setting practice to ensure the physical and emotional welfare of all CYP.

COGNITION AND LEARNING

Tier 2 – Early support (cont'd)

The CYP has difficulties with cognition and learning which require:
Additional provision from within setting's resources.
Co-ordination of assessment, intervention and monitoring by the SENCO.
May also require some specialist advice from other services available to all CYP.



Description of the CYP's needs

The CYP is making less than expected progress and is operating at a level significantly below Age Related Expectations. There is evidence of an increasing gap in attainment between the CYP and their peers. The CYP is becoming increasingly frustrated by their difficulties and their families are raising concerns.

Other setting pastoral interventions could include:

- Meet and Greet
- Circle Time based on class/cohort needs
- Peer mentoring/support
- Buddy systems
- Restorative Practice
- Access to clubs/safe spaces during unstructured times
- Well-being hubs
- Awareness training for all staff

An experienced teacher is employed as the accredited SENCO.

Governors ensure that the SENCO is allocated sufficient time to fulfil all statutory & other duties. A regularly updated SEN Information Report details the effectiveness of the arrangements for SEN in the setting published on the Local Offer website.

A regularly monitored, reviewed and updated inclusion policy underpins practice. The setting employs additional adults to support the needs of all CYP e.g., Teaching Assistants, Family Support Worker, Pastoral Lead.

All staff including TAs and Learning Mentors have up-to-date job descriptions and are included in whole-setting appraisal systems. Designated time is allocated to Teaching Assistants for planning and liaison with teachers regarding progress and next steps.

All staff have received training on SEN and understand how to support CYP with learning difficulties.

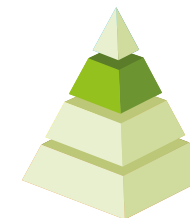
Whole-setting CPD has included use of the Inclusion Development programmes for Dyslexia and/or SLCN.

Setting staff access Local Authority (LA) training to keep informed on meeting the needs of CYP.

Staff make use of a wide range of resources, including those produced within the LA, to inform their inclusive practice. e.g., Person Centred Planning, Local Offer guidance.

Tier 3 – Targeted support

The CYP has difficulties with cognition and learning which require: Further provision which is in addition to that which is ordinarily available within the setting's resources. Settings may wish to make a request to the LA for additional TIME LIMITED FUNDING to enable the CYP to continue to be supported within setting. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP



Description of the CYP's needs

The CYP has significant and enduring difficulties with cognition and learning and with accessing a mainstream curriculum.

The CYP continues to make less than expected progress despite the use of appropriate modifications to the curriculum and the targeted interventions that have been tried and is operating at a level significantly below Age Related Expectations.

There is continuing evidence of an increasing gap between the CYP and their peers. The CYP is exhibiting behaviours such as withdrawal, reluctance to complete tasks etc. that is affecting their engagement with the curriculum and the interventions that have been offered.

Things to do to support the CYP in the setting and the evidence required to support decision making

There is a continuation of significant adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period e.g., two terms.

The SENCO has sought further specialist advice e.g. EP, SALT, Early Help, where concerns regarding the CYP's needs and progress have persisted.

Both the adaptive teaching strategies and intervention reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.

There have been regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

Recognised assessment, over a reasonable period of time and from a variety of sources, suggests that the CYP's difficulties with Cognition and Learning fall within the moderate or severe range and impact upon all areas of cognition and learning.

A review, including relevant agencies is completed and provides a description, how additional funding e.g., through a TIME LIMITED FUNDING, would support the CYP's learning. SENCO provides evidence of the involvement of CYP's parents/carers.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Some additional and/or Alternative Provision enhances the core offer.

Normal curriculum plans include individual/group targets.

TAs are used flexibly so that the teacher can focus on individuals and groups.

Time-limited proven interventions are matched to CYP's need and delivered by suitably trained staff.

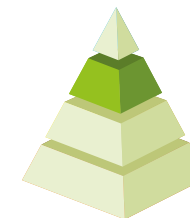
Some use of small group or 1:1 programmes planned by the teacher and delivered by a TA or teacher to address specific difficulties.

Progress in interventions is recorded and shared with teachers so that learning is transferred and focussed teaching can be planned to address any difficulties.

COGNITION AND LEARNING

Tier 3 – Targeted support (cont'd)

The CYP has difficulties with cognition and learning which require: Further provision which is in addition to that which is ordinarily available within the setting's resources. Settings may wish to make a request to the LA for additional TIME LIMITED FUNDING to enable the CYP to continue to be supported within setting. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP



Description of the CYP's needs

The CYP has significant and enduring difficulties with cognition and learning and with accessing a mainstream curriculum.

The CYP continues to make less than expected progress despite the use of appropriate modifications to the curriculum and the targeted interventions that have been tried and is operating at a level significantly below Age Related Expectations.

There is continuing evidence of an increasing gap between the CYP and their peers. The CYP is exhibiting behaviours such as withdrawal, reluctance to complete tasks etc. that is affecting their engagement with the curriculum and the interventions that have been offered.

Opportunities are provided for skill reinforcement/over learning/revision /transfer of skills/knowledge and generalisation.

Whole-setting systems evaluate the impact of interventions and monitor the quality of teaching and learning.

When deciding whether to make special educational provision, the teacher and SENCO consider all information gathered from within the setting about the CYP's progress, alongside national data and expectations of progress.

Main provision is by class/subject teacher with advice from SENCO.

All teachers and support staff who work with the CYP are made aware of their needs, the outcomes sought, the support provided and any teaching strategies or approaches that are required.

Additional adults including trained TAs are routinely used to support flexible groupings, differentiation, interventions and some 1:1 support, where appropriate.

Time is allocated for planning and feedback between teacher and TAs/Specialist support teachers.

Routine curriculum resources are made available including writing frames/prompts; word banks; writing mats; practical equipment; visual cues; cue cards; alphabet cards/strips appropriate to support both English and Maths.

Subject specific additional resources are routinely provided.

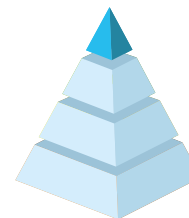
Use of additional adult (e.g., TA/Sports Lead/Pastoral Lead) for focused support during unstructured times e.g., lunchtime supervision/ targeted extra-curriculum activities/Adult-led safe space.

LA DECISION-MAKING PROCESS

The Assess, Plan, Do Review cycle highlights the CYP is not making expected progress and may require additional funding to support their learning in the setting.

Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for TIME LIMITED FUNDING. This must include evidence of the CYP developmental levels (e.g., setting specific individual progress tracker) and ALWAYS include a costed provision map to demonstrate the expected outcomes for the CYP that the funding would support.

Tier 4 – Specific targeted support (EHCNA) Specialist Provision- MLD Bases



Description of the CYP's needs

The CYP has significant and enduring difficulties with Cognition and Learning and with accessing a mainstream curriculum.

The CYP continues to make less than expected progress and is operating at a level significantly below Age Related Expectations. There is continuing evidence of an increasing gap between the CYP and their peers.

The CYP's difficulties with Cognition and Learning fall within the moderate/severe range and impact upon all areas of cognition and learning and their engagement with the curriculum.

CYP present with a range of issues and an accumulation of layered needs. The CYP will experience significant, complex persistent and enduring learning difficulties. These learning difficulties may co-exist with a medical condition and/or physical or sensory difficulties.

There may be associated behaviour difficulties including attention difficulties and/or self-esteem issues.

Things to do to support the CYP in the setting and the evidence required to support decision making

Specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.

Risk assessments identify dangers and needs for additional support.

Personalised timetable includes sessions for therapeutic interventions, where these are required as part of the CYP's daily/weekly plan.

Long term ongoing involvement of educational and non-educational professionals as part of EHC Plan.

Completion of assessments as part of Annual Review processes submitted to EHCP Panel.

The specialist teacher undertakes detailed diagnostic assessments in order to create individualised skill development programme for the CYP.

Progress in skill acquisition is tracked and monitored.

CYP's are supported to take ownership of their own learning.

There is close liaison and sharing of expertise and teaching strategies between the Base specialists and the mainstream staff to promote and support transference of learning.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Appropriate modification of the delivery of the curriculum in consultation with the SENCO and educational and non-educational professionals.

Learning style determines teaching methods.

Multi-sensory approaches are used.

The CYP has a level of need that has been assessed as requiring a highly specialist teaching and provision which may include small group work.

Specialist, highly skilled and trained staff take responsibility for devising, delivering & evaluating a personalised programme that accelerates learning.

CYP are taught strategies and provided with resources to assist with the development of independent learning.

Alternative ways of recording include electronic devices/ assistive technology.

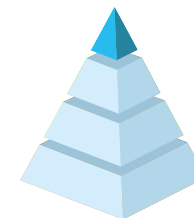
Individualised level/pace/amount of teacher talk.

Significant emphasis on consolidation and lateral progress before introducing new skills.

Small steps targets within group programmes and/or 1:1.

Development of automaticity should be facilitated through overlearning opportunities.

Tier 4 – Specific targeted support (EHCNA) Specialist Provision- MLD Bases (cont'd)



Description of the CYP's needs

The CYP has significant and enduring difficulties with Cognition and Learning and with accessing a mainstream curriculum.

The CYP continues to make less than expected progress and is operating at a level significantly below Age Related Expectations. There is continuing evidence of an increasing gap between the CYP and their peers.

The CYP's difficulties with Cognition and Learning fall within the moderate/severe range and impact upon all areas of cognition and learning and their engagement with the curriculum.

CYP present with a range of issues and an accumulation of layered needs. The CYP will experience significant, complex persistent and enduring learning difficulties. These learning difficulties may co-exist with a medical condition and/or physical or sensory difficulties.

There may be associated behaviour difficulties including attention difficulties and/or self-esteem issues.

Intensive and varied opportunities are provided to develop automaticity in reading and writing skills.

CYP are included in mainstream classes, when possible, with appropriately planned support that promotes independence.

Further increased levels of personalisation and differentiation according to learning need and any relevant medical characteristics.

Additional adult, under the direction of the teacher, supports CYP working on modified curriculum tasks; provides regular opportunities for small group work and daily 1:1 work/support. This is likely to include some therapy type activities which are condition led.

Highly specialist teaching and personalised provision.

CPD from specialist staff ensures that staff have an understanding of Specific Learning Difficulties (SpLD e.g., Dyslexia, dyscalculia) and are provided with appropriate strategies and advice in order to support CYP with those specific needs.

COGNITION AND LEARNING

Specialist Setting

Specialist class or package of provision

DESCRIPTOR LEARNING

The CYP will experience profound, complex life-long learning difficulties, and will require specialised provision, with personalised programmes of support delivered by staff with a high level of expertise.

ASSESSMENT AND PLANNING

Multi-agency assessments will need to be undertaken in a cohesive and non-intrusive manner, being sensitive to the communication preferences of the CYP.

CURRICULUM/ INTERVENTIONS

Requires additional staff support to access learning in a specialist setting/mainstream due to high level of vulnerability presented by the CYP.

Requires additional staff support in a specialist setting due to high level of vulnerability presented by the CYP.

Staff have access to regular consultations with support services e.g., SALT, OT, CAMHS, EP.

OUT OF AREA INDEPENDENT SPECIALIST PROVIDER

All of the above but the CYP has such complex needs that their needs cannot be met in a setting within Wirral, i.e., they attend a non-maintained educational or residential placement (Out of Area). This may also include support for health and social care issues.

COGNITION AND LEARNING

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1	EVIDENCED?	
We have ensured that QFT strategies are in place for all CYP.		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.
We have planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been embedded for a reasonable period of time.		We have involved the CYP, parents/carers and other stakeholders in this process.
We have completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and the targeted interventions (Assess, Plan, Do, Review cycle).		
We have involved the CYP, parents/carers in this process.		
TIER 2	EVIDENCED?	
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.
We have organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.		We can evidence a continuation of significant adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.
We have sought additional specialist advice relevant to the CYP's needs.		We can evidence a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period e.g., two terms.
We have attended a drop-in session with an EP or the Inclusion Team to discuss the CYP.		We have sought further specialist advice e.g. EP, SALT, Early Help, where concerns regarding the CYP's needs and progress have persisted.
We have planned and organised the implementation of significant adaptive teaching strategies, relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., one term.		We can show that the adaptive teaching strategies and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.
		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention.
TIER 3	EVIDENCED?	

COGNITION AND LEARNING

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	
We have organised/undertaken more specialised recognised assessments, over a reasonable period of time and from a variety of sources. These suggest that the CYP's difficulties with cognition and learning fall within the moderate or severe range and impact upon all areas of cognition and learning.	
We have involved the CYP, parents/carers and other stakeholders in this process.	
TIER 4	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding (IPFA), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	
We have involved the CYP, parents/carers and other stakeholders in this process.	
We have sufficient evidence to show that an EHCNA is required.	
TIER 4-5	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have organised/undertaken specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.	
We have ongoing involvement of educational and non-educational professionals as part of EHC Plan.	
We have organised/undertaken specialist assessments as part of Annual Review processes submitted to EHCP Panel.	
We have held an Annual Review, and this has been attended by an EHCP Review Officer.	
We have organised a specialist teacher to undertake detailed diagnostic assessments in order to create individualised skill development programme for the CYP. This personalised plan/timetable has been put in place.	
We have tracked and monitored progress in skill acquisition.	
We are liaising closely with a range of professionals/support services.	
We have involved the CYP, parents/carers and other stakeholders in this process.	
We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	

SECTION B

COMMUNICATION AND INTERACTION





These Thresholds Tiers were developed with reference to the Special Educational Needs and Disability Code of Practice 0 to 25 years: Statutory guidance for organisations who work with and support children and young people with special educational needs and disabilities (DfE and DoH, 2015).

Chapter 6 of the SEN Code of Practice outlines Autism/Social Communication & Interaction difficulties as one of 4 broad areas of need.

This section refers to Communication and interaction.

6.29 Children and young people with ASD, including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.

Wirral's graduated approach to supporting children with cognition and learning needs

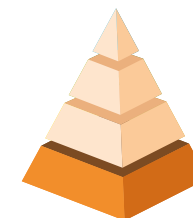
-  **TIER 1**
Universal Provision
-  **TIER 2**
Universal Provision and any extra support included in what is already available within reasonable adjustments
-  **TIER 3**
Time limited funding may be provided based on need and requirements
-  **TIER 4 AND ONWARDS**
EHCP and further support to be decided as needed as per the thresholds and EHCP pathway



COMMUNICATION AND INTERACTION

Tier 1 – Universal and Quality First Teaching

The CYP exhibits differences associated with social communication difficulties or a diagnosis of Autism. These have been identified by the class teacher (CT).



Description of the CYP's needs

The CYP exhibits differences associated with Social Communication Difficulties or a diagnosis of Autism.

These may have been identified by the class teacher (CT). Quality First Teaching is meeting the CYP needs.

The CYP finds social situations confusing; can be unclear about appropriate responses and how to form relationships with other CYP.

CYP may struggle to communicate their thoughts and feelings and may show some particular interests.

CYP may find change unsettling.

Things to do to support the CYP in the setting and the evidence required to support decision making

CT has completed baseline assessment and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.

CT has made and can evidence reasonable adjustments and planned and organised implementation of adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum, e.g., scaffolding of learning, additional resources. This adaptive teaching strategies has continued for a period of time e.g. one term.

CT has planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been implemented for a reasonable period of time e.g., one term.

CT has completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and targeted interventions.

CT describes in the context of their own class how Element 2 funding will promote the progress of the CYP.

CT provides evidence of the involvement of CYP's parents/carers.

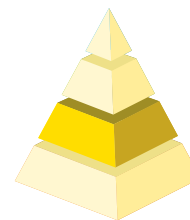
Quality first teaching and strategies

[Tier 1- Quality First Teaching \(link to docs\)](#)

COMMUNICATION AND INTERACTION

Tier 2 – Early support

The CYP exhibits differences associated with social/communication difficulties or a diagnosis of Autism which require: additional provision available from within setting's resources, co-ordination of assessment, intervention and monitoring by the SENCO. May also require specialist advice from services available to all CYP.



Description of the CYP's needs

The CYP exhibits differences associated with social/ communication difficulties or a diagnosis of Autism which require:

Additional provision available from within setting's resources.

Co-ordination of assessment, intervention and monitoring by the SENCO.

May also require specialist advice from services available to all CYP.

Things to do to support the CYP in the setting and the evidence required to support decision making

CT provides evidence that Quality First Teaching is not meeting the needs of the CYP. This may be in the form of an IEP/ASP.

The SENCO has organised/undertaken more specialist assessment to better understand the CYP's needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.

The SENCO/relevant staff have attended Level 1 Making Sense of Autism training as provided by the EP/ASC team and shared strategies with those working with CYP.

The SENCO has sought additional specialist advice relevant to the CYP's needs, likely involving the ASC Team and implemented and reviewed such advice.

The SENCO has prioritised the CYP as requiring Inclusion Team drop – in where appropriate (to avoid duplication).

There is a continuation of adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a period of time e.g., one term with evidence of reasonable adjustments.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs.

Both the adaptive teaching strategies and intervention reflect the specialist advice received and both have been implemented for a reasonable period e.g., one term.

There have been regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention.

Where progress has been made it has only been as the result of much additional intervention and support over and above that which is usually provided.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

The Element 2 funding has been fully utilised (costed provision map is provided to evidence this).

SENCO provides evidence of the involvement of CYP's parents/carers.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

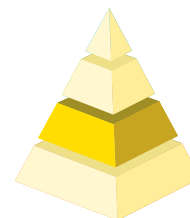
Manage access arrangements for internal and external examinations and assessments.

Awareness of the social and emotional aspects of the CYP's additional needs.

COMMUNICATION AND INTERACTION

Tier 2 – Early support (cont'd)

The CYP exhibits differences associated with social/communication difficulties or a diagnosis of Autism which require: additional provision available from within setting's resources, co-ordination of assessment, intervention and monitoring by the SENCO. May also require specialist advice from services available to all CYP.



Description of the CYP's needs

The CYP exhibits differences associated with social/ communication difficulties or a diagnosis of Autism which require:

Additional provision available from within setting's resources.

Co-ordination of assessment, intervention and monitoring by the SENCO.

May also require specialist advice from services available to all CYP.

Established communication strategies to facilitate communication and to assess learning and understanding.

Modified and adapted practical lessons as required.

Use of key working approaches to ensure the CYP has a trusted adult to offer support during vulnerable times.

Personalised reward systems known to all staff in the setting who have contact with the CYP, implemented across the whole curriculum.

Identified daily support to undertake.

Prepare and make relevant visual supports and structures.

Use of social stories where appropriate.

Adaptive learning which is broken down and 'chunked' into manageable parts.

Facilitate alternative recording strategies.

Regular/daily small group work around the teaching/ modelling/coaching of social skills.

Peer awareness training and support systems put in place.

Personalised timetable as needed which may include adaptation/temporary withdrawal from overwhelming activities such as full setting assemblies- should be discussed and agreed with parent/carer. The CYP should be included in as many whole-setting activities as possible.

Flexible approaches to the timetable to allow for support in lunch times and break times when time can be unstructured.

Teaching style is adapted to suit CYP's needs.

Time outlined with parent/carers on a regular basis to discuss progress.

Adult intervention targeted at specific curriculum areas to support progress – using SMART targets or precision teaching.

The setting will ensure that information is collected and passed on at times of transition and, where appropriate, will consult with the ASC Team.

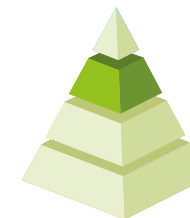
Access to a quiet area for times of anxiety.

Additional support from ASC Team, SALT.

COMMUNICATION AND INTERACTION

Tier 3 – Targeted support

The CYP exhibits differences associated with social communication difficulties or a diagnosis of Autism which require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP.



Description of the CYP's needs

The CYP may have a diagnosis of Autism and/or differences associated with Autism resulting in social/emotional/behavioural/learning and/or sensory needs, which make their learning in a mainstream setting environment, without additional support and environmental adaptation, challenging.

The CYP can participate in some aspects of the day but are likely to have difficulties in following instructions, classroom routines and maintaining attention to task and getting on with their peers.

There are more marked difficulties for the CYP with social situations. These are found to be increasingly confusing for the CYP. They can be very unclear about appropriate responses and have marked difficulties forming relationships with other CYP and adults show little interest in others.

With support, the CYP can usually make progress in learning but needs support for other aspects of the day (unstructured times).

Things to do to support the CYP in the setting and the evidence required to support decision making

There is a continuation of significant adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a period of time e.g., two terms.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs including their understanding of social situations. This has continued for a period of time e.g., two terms.

The SENCO has attended AET Level 2 training Good Autism Practice as provided by the EP/ASC team and shared strategies with those working with CYP.

The SENCO has sought further specialist advice such as the ASC team and/or EP drop in where concerns with regard to the CYP's needs and progress have persisted.

Both the adaptive teaching strategies and intervention reflect the specialist advice received and both have been implemented for a period of time e.g. Two terms.

There have been regular reviews of the CYP's progress in response to:

The above specialist advice, adaptive teaching strategies and intervention.

The further provision, which is in addition to, those which are ordinarily available within the setting's resources.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made and the further provision, which is in addition to that which is ordinarily available, within the setting's resources, or through TIME LIMITED FUNDING, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

The SENCO provides evidence of the involvement of CYP's parents/carers. Individual risk assessments are put in place, if required.

Introduction of positive handling plan – if needed and when appropriate.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Manage access arrangements for internal and external examinations and assessments.

Awareness of the social and emotional aspects of the CYP's additional needs.

Established communication strategies to facilitate communication and to assess learning and understanding.

Modified and adapted practical lessons as required.

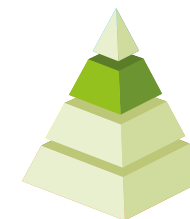
Use of key working approaches to ensure the CYP has a trusted adult to offer support during vulnerable times.

Personalised reward systems known to all staff in the setting who have contact with the CYP, implemented across the whole curriculum.

COMMUNICATION AND INTERACTION

Tier 3 – Targeted support (cont'd)

The CYP exhibits differences associated with social communication difficulties or a diagnosis of Autism which require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP.



Description of the CYP's needs

The CYP may have a diagnosis of Autism and/or differences associated with Autism resulting in social/emotional/behavioural/learning and/or sensory needs, which make their learning in a mainstream setting environment, without additional support and environmental adaptation, challenging.

The CYP can participate in some aspects of the day but are likely to have difficulties in following instructions, classroom routines and maintaining attention to task and getting on with their peers.

There are more marked difficulties for the CYP with social situations. These are found to be increasingly confusing for the CYP. They can be very unclear about appropriate responses and have marked difficulties forming relationships with other CYP and adults show little interest in others.

With support, the CYP can usually make progress in learning but needs support for other aspects of the day (unstructured times).

Identified daily support to undertake:

Prepare and make relevant visual supports and structures.

Use of social stories where appropriate.

Adaptive learning which is broken down and 'chunked' into manageable parts.

Facilitate alternative recording strategies.

Regular/daily small group work around the teaching/modelling/coaching of social skills.

Peer awareness training and support systems put in place.

Personalised timetable as needed which may include adaptation/temporary withdrawal from overwhelming activities such as full setting assemblies- should be discussed and agreed with parent/carer. The CYP should be included in as many whole-setting activities as possible.

Flexible approaches to the timetable to allow for support in lunch times and break times when time can be unstructured.

Teaching style is adapted to suit CYP's needs.

Time outlined with parent/carers on a regular basis to discuss progress.

Allocate appropriate space for visiting professionals to work with CYP when needed.

Adult intervention targeted at specific curriculum areas to support progress- using SMART targets or precision teaching.

The setting will ensure that information is collected and passed on at times of transition and, where appropriate, will consult with the ASC Team.

Access to a quiet area for times of anxiety.

Access to a low stimulus area for completion of independent tasks if needed.

Further advice from a specialist ASC Teacher.

Individual support for pre and post teaching- link to the resources for the lesson and encourage memory and retrieval when possible.

Recognise potential impact of sensory needs and intervene accordingly to support.

Progress in interventions is recorded and shared with teachers so that learning is transferred and focussed teaching can be planned to address any difficulties.

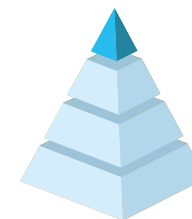
LA DECISION-MAKING PROCESS

The Plan, Do Review cycle highlights the CYP is not making expected progress and may require additional funding to support their learning.

A TIME LIMITED FUNDING should be applied for with the associated documentation including evidence of the support and strategies already implemented and including a costed provision map. The review process indicates that a higher/different level of support/provision is needed to meet the needs of the CYP and promote progress.

Tier 4 – Targeted Specific Support EHCNA/Resourced Provision

The CYP exhibits characteristics associated with social/ communication difficulties or a diagnosis of autism which require: Further provision which is in addition to that which is ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting.



Description of the CYP's needs

The CYP has a diagnosis of Autism and/or differences associated with Autism without a diagnosis resulting in significant social, emotional, behavioural, learning and/or sensory needs.

The CYP may present with a range of additional needs that often co-occur with ASC e.g., ADHD, anxiety, Sensory Processing Difficulties etc. In combination the CYP's access to learning is therefore made difficult and requires significant additional adaptation and accommodation. This is reflected in smaller group size.

The CYP will require ASC specific and person-centred approaches to teaching, learning and the classroom environment.

CYPs will however be expected to benefit from access to a mainstream environment over time. Behavioural challenge may be present but can usually be understood in the context of the CYP's ASC and is expected to reduce over time.

The CYP may experience significant anxiety.

Things to do to support the CYP in the setting and the evidence required to support decision making

The Assess, Plan, Do and Review cycle has been adhered to.

Despite the substantial adaptations made, the further provision, which is in addition to those which are ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting (EHCP), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

SENCO/Base Teacher provides evidence of the involvement of CYP's parents/carers. The Annual Review has been attended by a LA officer.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Facilitate the production of adapted materials in accordance with the advice from the involved professionals.

The use of specialist adapted equipment/software when appropriate to access the curriculum and for communication needs.

Programmes to develop social interaction and emotional well-being, as identified by the Social Communication Intensive Package (SCIP) /IEP/ASP/ Management plan.

Teaching focused on both learning curriculum and social skills throughout the day. Outcomes informed by the CYP's EHCP,

Annual Review and specialist recommendations.

Opportunities for staff CPD and support when needed to enhanced support for CYP. Opportunities for support staff to access specialist training regarding SEND and their impact on learning and social and emotional well-being.

Time to work with the ASC team for joint planning with the CYP, family and other professionals where need demands. Signpost families to a range of services (voluntary and statutory) for further support.

Opportunities for CYP to meet with a peer support group and adult role models where appropriate.

Independent life skills/travel training to support independence skills for the future- when appropriate and discussed with specialist and parent/carers.

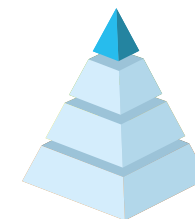
LA DECISION-MAKING PROCESS

The Plan, Do Review cycle highlights the CYP is not making expected progress despite the TIME LIMITED FUNDING and may require an EHCP assessment to identify needs.

CYP has not responded to systematic, structured intervention provided by the TIME LIMITED FUNDING. Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for EHCP funding. This must include evidence of the CYP developmental levels (e.g., setting specific individual progress tracker). Annual review process indicates that a higher/different level of support/provision is needed to meet the needs of the CYP and promote progress.

Tier 4/5 – Targeted Specific Support EHCP/resourced provision base

The CYP exhibits differences associated with social communication difficulties or a diagnosis of Autism which require: Further provision, which is in addition to that, which is ordinarily available within a resourced base within a mainstream setting. Provision which offers highly personalised and specialist intervention programmes.



Description of the CYP's needs

The CYP experiences complex, frequent and enduring difficulties associated with Autism, with or without a diagnosis.

The impact of Autism on the CYP is so pervasive that learning is unlikely to take place without specialist provision.

The CYP has complexities associated with their Autism and/or other additional needs resulting in a degree of social, emotional, behavioural/learning/sensory needs which require significant adaptation by the setting.

The CYP requires an ASC specific setting to assist in addressing and minimising the challenges which may be present as a result of the CYP's Autism.

Things to do to support the CYP in the setting and the evidence required to support decision making

The main provision is made by Base Teacher with support from SENCO.

Risk assessment to be considered in all areas including risk to others and risk to self.

The Assess, Plan, Do and Review cycle has been adhered to.

Despite the substantial adaptations made, the further provision which is in addition to those which are ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting (EHCP), it is evidenced that a higher level of support / provision is needed to meet the needs of the CYP and promote progress.

SENCO/Base Teacher provides evidence of the involvement of CYP's parents/carers.

The Annual Review has been attended by a LA officer.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Specialist teaching focusing on both learning curriculum and social skills throughout the day- targets informed by EHCP and Annual review.

Curriculum to include life skills and highly adapted PSHE aspects.

Opportunities to explore identity and find enjoyable activities.

High levels of specialist support in mainstream or Base Provision.

Skilled staff who have knowledge, experience and understanding of implications of need.

Additional individual support in line with risk assessment/ EHCP if needed.

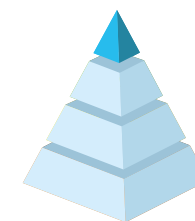
Personalised timetable as needed and in line with EHCP.

Small group teaching including 1:1 when needed.

Therapeutic intervention e.g., Family Therapy.

Further staff CPD as needed to support the CYP.

Specialist Provision 10K top up funding for ASC provision



Description of the CYP's needs

The CYP exhibits characteristics associated with social communication difficulties or diagnosis of Autism which require:

Further provision which is in addition to that which is ordinarily available within a resourced base within a mainstream setting.

CYP requires provision which offers highly personalised and specialist intervention of programmes.

The CYP experiences complex, frequent and enduring difficulties associated with Autism. the impact of this on the CYP is so pervasive that learning is unlikely to take place without specialist provision.

The CYP has complexities associated with their Autism and/or other additional needs resulting in a degree of social, emotional (including severe anxiety) behaviour, learning and/ or sensory needs which require significant adaptation by the setting.

The CYP requires and ASC specific setting to assist in addressing and minimising the challenges which may be present as a result of the CYP's Autism.

Things to do to support the CYP in the setting and the evidence required to support decision making

Long- term involvement of educational and non- educational professionals as part of the EHC Plan and Annual Review process.

Regular risk assessments to consider risks to self and to others.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Requires a range of support from the specialist setting due to high level of need and vulnerability presented by the CYP.

Staff have regular access to consultations with support services e.g., Educational Psychologists, OT, CAMHS, ASC Team.

COMMUNICATION AND INTERACTION

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1		EVIDENCED?
We have ensured that QFT strategies are in place for all CYP.		
We have completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.		
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		
We have planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been embedded for a reasonable period of time.		
We have completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and the targeted interventions (Assess, Plan, Do, Review cycle).		
We have involved the CYP, parents/carers in this process.		
TIER 2		EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		
We have organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.		
We have sought additional specialist advice relevant to the CYP's needs e.g. The ASC Team.		
We have attended a drop-in session with an EP or Inclusion Team to discuss the CYP.		
We have attended Level 1 Making Sense of Autism training as provided by the EP/ASC Team and shared strategies with those working with CYP.		
TIER 3		EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		
We can evidence a continuation of significant adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.		
We can evidence a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period e.g., two terms.		

COMMUNICATION AND INTERACTION

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We have sought further specialist advice e.g. EP, SALT, ASC Team, where concerns regarding the CYP's needs and progress have persisted.		We have involved the CYP, parents/carers and other stakeholders in this process.	
We have attended AET Level 2 training Good Autism Practice as provided by the EP/ASC team and shared strategies with those working with CYP.		We have sufficient evidence to show that an EHCNA is required.	
We can show that the adaptive teaching strategies/reasonable adjustments and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.			
We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention.			
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.			
We have organised/undertaken more specialised recognised assessments, over a reasonable period of time and from a variety of sources.			
We have involved the CYP, parents/carers and other stakeholders in this process.			
TIER 4	EVIDENCED?	TIER 4-5	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding (IPFA), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.		We have organised/undertaken specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.	
		We have ongoing involvement of educational and non-educational professionals as part of EHC Plan.	
		We have organised/undertaken specialist assessments as part of Annual Review processes submitted to EHCP Panel.	
		We have organised a specialist teacher to undertake detailed diagnostic assessments in order to create individualised skill development programme for the CYP. This personalised plan/timetable has been put in place.	
		A risk assessment has been put into place, if required.	
		We have tracked and monitored progress in skill acquisition.	
		We are liaising closely with a range of professionals/support services.	
		We have involved parents/carers and other stakeholders in this process.	
		We have held an Annual Review, and this has been attended by an EHCP Review Officer.	
		We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	

SECTION C

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

The Special Educational Needs and Disability Code of Practice 0 to 25 years: Statutory guidance for organisations who work with and support children and young people with special educational needs and disabilities (DfE and DoH, 2015).

Chapter 6 of the SEN Code of Practice outlines 4 broad areas of need:

- Communication and interaction
- Cognition and learning
- Social, emotional and mental health difficulties
- Sensory and/or physical needs

This section refers to medical and/or physical needs.

6.35 Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers.

Wirral's Graduated Approach to Supporting Children with Medical and/or Physical Needs

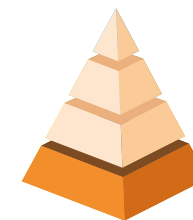
- TIER 1**
Universal Provision
- TIER 2**
Universal Provision and any extra support included in what is already available within reasonable adjustments
- TIER 3**
Time limited funding may be provided based on need and requirements
- TIER 4 AND ONWARDS**
EHCP and further support to be decided as needed as per the thresholds and EHCP pathway



SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 1 – Universal Support

The CYP has a physical and/or medical need, which: Has a minimal impact on day-to-day activities in the setting. The CYP may be independent in managing the need.



Description of the CYP's needs

The CYP's needs are being met by:

Quality First Teaching: planning for participation, differentiated and personalised learning, reasonable adjustments etc. The provision of appropriate facilities e.g., accessible bathroom. Implementation of the school's policy on supporting pupils at school with medical conditions.

Fine and/or gross motor skills may be developing at a slower pace than CYP's peer group. CYP may have reduced co-ordination and strength.

Motor activities, such as walking, may be mildly affected by tiredness. CYP may have poor posture when sitting, standing or walking.

CYP may have minor difficulties with some daily living skills such as toileting and requires occasional assistance e.g., for wetting/soiling accidents.

Speech production may be mildly affected by physical difficulties. CYP may have a long-term medical condition that is self-managed.

CYP may have a long-term medical condition that requires minimal intervention from school staff. CYP may be visually different to peers, and vulnerable to bullying, or low self-esteem.

Things to do to support the CYP in the setting and the evidence required to support decision making

Individual Health Care Plan (IHCP) detailing the CYP's medical /physical needs, including an assessment of potential risks to the CYP's education, health, and social wellbeing, and how risks have been mitigated/managed. The Individual Healthcare Plan will reflect the school's policy on supporting pupils at school with medical conditions.

CT has completed baseline assessment and re-assessment of CYP needs.

CT has considered and made reasonable adjustments for CYP, including the provision of equipment.

CT has planned and implemented appropriate adaptive teaching strategies, relevant to the CYP's individual needs, to promote access to, and progress within, the curriculum.

CT has planned and organised implementation of targeted, evidence-based interventions, relevant to the CYP's needs. These have been implemented for a reasonable period, tracked and evidenced.

CT has completed regular reviews of the CYP's progress in response to both adaptive teaching strategies and targeted interventions.

CT provides evidence of the involvement of CYP's parents/ carers by documenting meetings and conversations and ensuring that the voice of the parent/carer has been heard.

CT provides evidence that Quality First Teaching is not meeting the needs of the CYP (if appropriate).

CT describes in the context of their own class how any further support or funding would benefit the CYP (if appropriate).

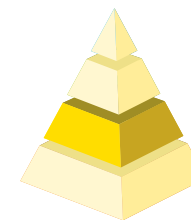
Quality first teaching and strategies

Tier 1- Quality First Teaching (link to docs)

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 2 – Early support

The CYP has a physical and/or medical need which requires: Additional provision from within setting's resources (Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice may be required from services including health professionals. Mainstream Element 1 (AWPU)+ Element 2 (up to £6k)



Description of the CYP's needs

The CYP may have a disability and/or special educational needs. Fine and/or gross motor difficulties may be evident and affected by reduced stamina and fatigue.

Mobility may be moderately impaired making CYP at increased risk of trips and falls and vulnerable in crowded areas and/or on uneven ground; posture and balance may be adversely affected when sitting, standing, and walking; CYP may experience limited difficulty on stairs.

CYP may be known to allied health professionals such as paediatric occupational therapy and paediatric physiotherapy.

Specialist equipment may be needed in school for table-top activities e.g., supportive seating.

CYP may have a school-based physiotherapy programme that contributes to improved readiness for learning.

CYP may have moderate difficulties with some daily living skills such as toileting and requires regular assistance e.g., to access a toilet facility safely; to clean after a bowel movement.

Things to do to support the CYP in the setting and the evidence required to support decision making

The CYP will have an Individual Health Care Plan (IHCP) detailing the CYP's medical and/or physical needs, including an assessment of potential risks to the CYP's education, health, and social wellbeing, and how risks have been mitigated/managed. The IHCP will have been written in partnership with parents/carers and relevant health care professionals. It will reflect the school's policy on supporting pupils at school with medical conditions.

Evidence that:

The SENCO has sought additional specialist advice relevant to the CYP's needs. This will include health professionals such as paediatric occupational therapy, paediatric physiotherapy, specialist paediatric nurses e.g., continence nurse. Advice should also have been sought from the Specialist Support Team for Pupils with Medical and/or Physical Needs.

The SENCO has considered and made reasonable adjustments for CYP. Where appropriate, specialist equipment has been provided as part of the reasonable adjustment's duty, via the Specialist Support Team for Pupils with Medical and/or Physical Needs and on the prescription of a therapist from either a paediatric occupational therapist or paediatric physiotherapist within local statutory health services.

There are significant adaptive teaching strategies, relevant to the CYP's need, to promote progress and access to school facilities and the full curriculum.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs.

Both adaptive teaching strategies and intervention reflect any specialist advice received and both have been implemented for a sufficient period of time to assess effectiveness.

There have been regular reviews of the CYP's Individual Health Care Plan (IHCP) and progress in response to specialist advice, reasonable adjustments, adaptive teaching strategies and intervention.

The SENCO has organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.

Where appropriate, the SENCO has prioritised the CYP as requiring EP consultation time.

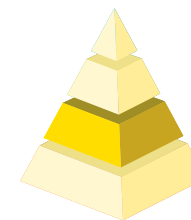
Where progress has been made it has only been as the result of much additional intervention and support over and above that which is usually provided.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 2 – Early support

The CYP has a physical and/or medical need which requires: Additional provision from within setting's resources (Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice may be required from services including health professionals. Mainstream Element 1 (AWPU)+ Element 2 (up to £6k)



CYP may require medication/therapy to be administered in school prior to eating e.g., Insulin Therapy.

CYP may have difficulty accessing discrete curriculum areas e.g., PE/swimming, practical science, art and design, design and technology.

CYP may require specialist equipment and/or support at key times to access school facilities e.g., toilet, playground, science labs.

Speech production may be affected by breath control or other physical difficulties.

CYP has a chronic medical condition, which may be unpredictable, and which requires adult intervention/supervision.

CYP may lack confidence in class and in social situations and need encouragement to join in with peers.

CYP may experience frustration in certain situations.

Element 2 funding has been fully utilised and has been evidenced on a costed provision map.

The SENCO in consultation with the CT, provides a description, in the context of their own school, how a time limited Individual Pupil Funding Agreement (IPFA) will promote the progress for the CYP.

SENCO provides evidence of the involvement of CYP's parents/carers and ensures the voice of the parent/carer has been heard.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Personal Emergency Evacuation Plan (PEEP), where appropriate.

Modified and adapted PE/practical sessions as required.

Supervision in PE/practical sessions to monitor safety and interpretation of instructions. Aspects of Physiotherapy programme incorporated into PE lessons.

Information about the CYP's difficulties is shared with relevant staff, in partnership with parents/carers.

Access to assistive technology. Alternative means of recording considered.

Use of equipment to access the curriculum. Adapted/ modified equipment and teaching materials deployed e.g., adaptive scissors.

Provide a range of communication methods (digital camera, voice recorder, visual symbol cards).

Establish communication strategies to facilitate communication and assess learning.

Classroom support e.g., Teaching Assistant, is targeted towards support for access for specific tasks/settings and is not necessarily needed for learning.

Manage access arrangements for internal and external examinations and assessments.

Awareness of any related social and emotional needs that could occur.

Supervision at unstructured times e.g., in the playground/ free space, moving between classrooms.

Advice and training from specialist nursing teams and regional specialist medical teams, including equipment/ medical interventions and management regimes.

Safer Moving and Handling training.

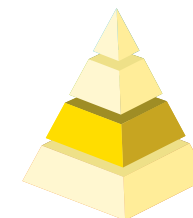
A regularly updated SEND policy detailing the effectiveness of the arrangements for SEND in the school.

Dedicated time for multi-agency review meetings with the child, family and other professionals.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 2 – Early support (cont'd)

The CYP has a physical and/or medical need which requires: Additional provision from within setting's resources (Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice may be required from services including health professionals. Mainstream Element 1 (AWPU)+ Element 2 (up to £6k)



Important Documents

DFE Statutory Guidance, 'Supporting Pupils at School with Medical Conditions'. School policy for supporting pupils at school with medical conditions.

Equality Act 2010: Reasonable Adjustments Duty, Planning Duty and Public Sector Equality Duty.

Settings may consult the Specialist Support Team for CYP with Medical/Physical Needs:

Individual Health Care Planning – supporting settings to produce robust, clear, and effective Individual Health Care Plans (IHCP) for CYP including developing an understanding of the educational and emotional impact of a child's medical/physical needs, and appropriate strategies to support learning and emotional wellbeing.

Enhanced Transition Planning – helping settings to prepare to meet the individual needs of new CYP. This includes planning for equipment, staffing, training, physical access, and reasonable adjustments.

Learning Assessment – for CYP with medical/physical needs who are making less than expected progress, despite evidence-based interventions matched to a pupil's area of need. The Team provides assessment reports including advice and recommendations as appropriate.

ICT Assessment – coordinating assessments for CYP, who because of significant physical difficulties, are struggling with both curriculum access, and with written and spoken

communication. Assessments are multi-disciplinary and must include advice from a CYP paediatric occupational therapist. The need for specialist equipment provision (ICT) is considered as part of the assessment process.

Specialist Equipment Provision (non-ICT) – supporting settings to make reasonable adjustments for CYP with physical needs. The Team coordinates specialist equipment provision to settings and monitors it through the IHCP process. Specialist equipment is provided on the recommendation of either Wirral's Paediatric Occupational Therapy Service or Wirral's Paediatric Physiotherapy Service, following clinical assessment. Examples of specialist equipment include a mobile hoist, potty chair, complex seating.

Access to the Setting Environment – the Team works in partnership with settings and appropriate health professionals to identify building adaptations that are required for individual CYP who have a physical disability. Building adaptation work is needs led and is reviewed regularly through the Individual Health Care Planning process.

Accessibility Strategy – the Team informs the Local Authority's Accessibility Strategy.

LA DECISION-MAKING PROCESS

The level of support that a CYP with physical and/or medical needs requires is often clear on transition into the setting but can change over time, for example, as a CYP becomes more mature and increasingly independent in meeting their own needs. The type of support that is required is frequently of a practical nature e.g., support for feeding or administration/management of therapy.

A CYP's access to a setting, both in terms of facilities and curricula, can be dependent on support. As such, the need for Element 3 funding via TIME LIMITED FUNDING is often self-evident and immediate. The need for a TIME LIMITED FUNDING request is frequently identified as part of enhanced transition planning implemented by the Specialist Support Team for Pupils with Medical and/or Physical Needs.

The Assess, Plan, Do, Review Cycle highlights the CYP is not making expected progress despite the Element 2 provision and has not responded to systematic, structured intervention provided by Element 2 funding.

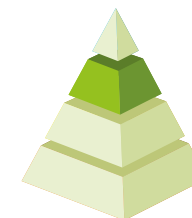
Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for TIME LIMITED FUNDING. This must include evidence of the CYP pupil developmental levels (e.g., setting specific progress tracker).

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 3 – Targeted specific support

The CYP has a physical and/or medical primary need, which requires: Support in addition to that which is ordinarily available within the setting's resources (Element 1 plus Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice and/or training from services including health professionals.

Time limited additional units of funding Individual Health Care Plan Funding Requests: IHCP funding requests should be made to inclusion and Equality Group (IEG). If funding is allocated an Individual Health Care Plan Funding Agreement will be drawn up between the Local Authority and the relevant school. Individual Health Care Plan Funding Agreements will be monitored and regularly reviewed by the Specialist Support Team for Pupils with MPN. Mainstream: Element 1 (AWPU)+ Element 2 (up to £6k) + Element 3 (pupil funding agreements/ EHCP)



Description of the CYP's needs

The CYP is a high-needs learner; they may, or may not, have special educational needs.

The CYP has a medical and/or physical need/disability, which requires frequent adult intervention and support throughout the school day.

Fine and gross motor difficulties/delays may be evident. These may be affected by reduced voluntary muscle control, muscle tone and strength, and compounded by fatigue.

CYP may have some limitation of hand function and need assistance with manipulation tasks.

CYP may be unable to, or may have difficulty with, mobilising independently and require close supervision, assistance, and/or aids. CYP may not be able to mobilise over distance or ascend/descend stairs.

CYP may be known to allied health professionals such as paediatric occupational therapy and paediatric physiotherapy. Specialist equipment may be needed in school e.g., mobile hoist. CYP may require setting-based physiotherapy to reduce discomfort and improve readiness for learning.

Things to do to support the CYP in the setting and the evidence required to support decision making

The CYP has special educational needs that may require special educational provision to be made in accordance with an Education, Health, and Care Plan.

There is a continuation of significant adaptive teaching strategies, relevant to the CYP's areas of need, to promote access to the curriculum facilitating progress.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period of time e.g., two terms.

The SENCO has sought further specialist advice e.g. EP consultation, where concerns regarding the CYP's needs and progress have persisted. Both the adaptive teaching strategies and intervention reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.

The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made and the further provision which is in addition to that which is ordinarily available within the school's resources or through a (TIME LIMITED FUNDING), it is evidenced that a higher level of support / provision is needed to meet the needs of the CYP and promote progress.

Recognised assessment, over a reasonable period and from a variety of sources, suggests that the CYP's difficulties with cognition and learning fall within the moderate or severe range and impact upon all areas of cognition and learning.

A review, including relevant agencies is completed and provides a description, how an Education and Health Care Plan (EHCP) will promote the progress of the CYP.

SENCO provides evidence of the involvement of CYP's parents/carers.

Example of physical and medical needs at EHC assessment

CYP may have a physical impairment that restricts voluntary control of movement.

CYP may be impaired in all areas of motor function.

CYP may not be able to sit or stand independently.

CYP may not be able to independently walk but may be able to use powered mobility.

CYP may have limited voluntary movement and is dependent on specialist equipment and assistance to support all daily living skills including intimate and personal care.

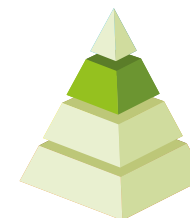
CYP may have a progressive condition that significantly impacts motor movement and control.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 3 – Targeted specific support (cont'd)

The CYP has a physical and/or medical primary need, which requires: Support in addition to that which is ordinarily available within the setting's resources (Element 1 plus Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice and/or training from services including health professionals.

Time limited additional units of funding Individual Health Care Plan Funding Requests: IHCP funding requests should be made to inclusion and Equality Group (IEG). If funding is allocated an Individual Health Care Plan Funding Agreement will be drawn up between the Local Authority and the relevant school. Individual Health Care Plan Funding Agreements will be monitored and regularly reviewed by the Specialist Support Team for Pupils with MPN. Mainstream: Element 1 (AWPU)+ Element 2 (up to £6k) + Element 3 (pupil funding agreements/ EHCP)



CYP may have delayed daily-living skills or reduced physical function that prevents or hinders independence; CYP may be nil by mouth due to motor impairment or difficulty swallowing.

Frequent adult intervention and support are needed throughout the school day.

For example, CYP may have frequent wetting/soiling accidents throughout the day; CYP may have difficulty with bowel/bladder control; CYP may use an aid to toilet e.g., catheter; CYP may be dependent on adults to support toileting needs; toileting programme may be required.

CYP may have difficulty accessing the setting's facilities, the physical environment, and curricula generally. Multiple pieces of specialist equipment may be necessary across the setting's environment e.g., seating, hoist, changing table, sling.

Communication – CYP may require support to communicate effectively.

CYP may have a chronic medical condition, which is unpredictable, and which requires frequent adult intervention/supervision, and can affect the CYP's ability to access particular activities.

Assistive technology may be required for curricula access.

CYP may have complex communication needs and may be non-verbal. Augmentative and alternative technology may be required to support communication.

CYP may have a progressive health condition that significantly impacts motor movement and control, preventing or hindering the CYP from making use of educational facilities available to their peers e.g., muscular dystrophy.

CYP may be experiencing stress related to their physical/ medical needs, access to the physical environment and curriculum, and ability to engage in social activities, which impacts on their emotional wellbeing. CYP may be experiencing anxiety, which affects their emotional resilience and behaviour.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Personal Emergency Evacuation Plan (PEEP), where appropriate.

Identified individual support across the curriculum, in an inclusive mainstream setting.

Curriculum differentiation, and use of differentiated materials.

The use of specialist or adapted equipment / software where appropriate to access the curriculum.

Careful timetabling to ensure a balance between educational and therapeutic needs.

Manage access arrangements for internal and external examinations and assessments.

Life within the setting may need to be modified to balance medical/educational needs.

Support to manage their medical condition.

May require regular nursing/medical intervention.

Individualised support to implement recommendations from support services e.g., OT, Physiotherapy etc.

Deliver regular therapeutic programmes.

Advice and assessment of the use of specialist or adapted ICT to access the curriculum.

Support for social and emotional aspects of disability and/or serious medical conditions.

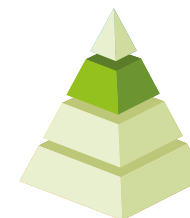
Adult support to facilitate social interaction, functional skills, support independence develop/maintain attention skills, supervision in free space areas to set up equipment, support CYP's management of it, and establish working routines.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 3 – Targeted specific support (cont'd)

The CYP has a physical and/or medical primary need, which requires: Support in addition to that which is ordinarily available within the setting's resources (Element 1 plus Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice and/or training from services including health professionals.

Time limited additional units of funding Individual Health Care Plan Funding Requests: IHCP funding requests should be made to inclusion and Equality Group (IEG). If funding is allocated an Individual Health Care Plan Funding Agreement will be drawn up between the Local Authority and the relevant school. Individual Health Care Plan Funding Agreements will be monitored and regularly reviewed by the Specialist Support Team for Pupils with MPN. Mainstream: Element 1 (AWPU)+ Element 2 (up to £6k) + Element 3 (pupil funding agreements/ EHCP)



CYP's physical condition may vary from day to day.

CYP may experience fluctuating levels of pain/discomfort, affecting attention and concentration in class and reducing attendance.

CYP may be experiencing stress related to their physical/medical needs, access to the physical environment and curriculum, and ability to engage in social activities, which impact on their emotional wellbeing.

SENCOs provide support to teacher and TAs and take responsibility for arranging appropriate specialist CPD and quality assuring the learning experience of the CYP.

Staff training in the use of specialist resources and medical procedures.

Time to work with the Specialist Teacher for joint planning with the CYP, family and other professionals, through the Individual Health Care Plan process.

Opportunities for support staff to access specialist training regarding medical/physical needs, and their impact on learning and social and emotional well-being.

Staff who understand how to provide a stable physical environment and support for practical activities.

Provision of specialist equipment. Provide storage and facilitate maintenance for specialist equipment.

LA DECISION-MAKING PROCESS

The Assess, Plan, Do, Review cycle highlights the CYP is not making expected progress and may require an EHCP assessment to identify needs. CYP has not responded to systematic, structured intervention.

Annual review process indicates that a higher/different level of support/provision is needed to meet the needs of the CYP and promote progress.

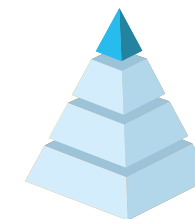
Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for EHCP funding. This must include evidence of the CYP pupil developmental levels (e.g., setting specific progress tracker).

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Tier 4 – Targeted Specific Support (Additional units of support time limited support)

The CYP has a physical and/or medical primary need, which requires: Support in addition to that which is ordinarily available within the setting's resources (Element 1 plus Element 2). Co-ordination of an Individual Health Care Plan, reasonable adjustments, assessment, intervention, and monitoring by the SENCO. Specialist advice and/or training from services including health professionals.

Individual Health Care Plan Funding Requests IHCP funding requests should be made to The Specialist Support Team for Pupils with Medical/Physical Needs (MPN). If funding is allocated an Individual Health Care Plan Funding Agreement will be drawn up between the Local Authority and the relevant school. Individual Health Care Plan Funding Agreements will be monitored and regularly reviewed by the Specialist Support Team for Pupils with MPN. Mainstream Element 1 (AWPU)+ Element 2 (up to £6k) + Element 3 (pupil funding agreements/ Plus a higher needs EHCP).



Description of the CYP's needs

CYP's primary presenting need is medical and/or physical and is compounded by a combination of other needs e.g., communication, sensory.

The CYP may not have a learning disability but will require the long-term involvement of educational and non-educational professionals as part of a statutory needs assessment/EHC Plan. The CYP has overlapping physical needs or a physical disability, which requires frequent adult intervention and support throughout the day:

Manipulation – CYP is largely unable to use hands in a functional way, needs assistance with most manipulation tasks. **Toileting** – CYP is unable to toilet independently and requires toileting aids and adult intervention. **Nutritional Support** – CYP is unable to feed independently. **Mobility** – CYP is unable to mobilise independently without aids and adult supervision/intervention. Therapy and/or Medical Interventions.

Access to the Environment/Curriculum – CYP is unable to access the environment/curriculum without additional aids, adaptations and close adult support.

Communication CYP has difficulty communicating and is reliant on augmentative and alternative communication methods.

Things to do to support the CYP in the setting and the evidence required to support decision making

Individual Health Care Plan. Reviewed at least annually.

Manual Handling Plan, where appropriate.

Liaison with the School Nursing Service, and other health professionals.

Environmental audit. Some site adaptation may be needed.

Risk assessment to identify dangers and need for additional support.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Targets informed by Annual Review/EHC plan.

Staff training in the use of specialist resources and medical procedures. High level of multi-agency involvement.

Co-ordination of the involvement of a range of agencies, one of whom may fulfil the key worker role.

Skilled TA who has understanding of the implications of disability and has a working knowledge of specialist access equipment.

Assistance with all daily living skills. Support for invasive medical procedures.

Communication aids to support curriculum access and social interaction.

Adult support to access an individualised curriculum.

Adult support to set up equipment and establish working routines in most lessons.

Provision/storage/maintenance of specialist equipment.

Out of area independent specialist provider

All of the above, but the child has such complex needs in addition to their medical/physical needs, that they cannot be met in a school within Wirral, i.e., they attend a non-maintained educational or residential placement (out of area). This may also include support for health and social care issues.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1		EVIDENCED?
We have ensured that QFT strategies are in place for all CYP.		We have planned and organised the implementation of significant adaptive teaching strategies and reasonable adjustments relevant to the CYP's need, to promote progress and access to the curriculum.
We have completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.		Where appropriate, we have provided specialist equipment as part of the reasonable adjustment's duty, via the Specialist Support Team for Pupils with Medical and/or Physical Needs and on the prescription of a therapist from either a paediatric occupational therapist or paediatric physiotherapist within local statutory health services.
We have put an Individual Health Care Plan (IHCP) in place detailing the CYP's medical /physical needs, including an assessment of potential risks to the CYP's education, health, and social wellbeing, and how risks have been mitigated/ managed.		We have planned and organised the continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period of time e.g., one term.
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments and specialist equipment relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.
We have planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been embedded for a reasonable period of time.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.
We have completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and the targeted interventions (Assess, Plan, Do, Review cycle).		We have held regular reviews of the CYP's Individual Health Care Plan (IHCP) and progress in response to specialist advice, reasonable adjustments, adaptive teaching strategies and intervention.
We have involved the CYP and parents/carers in this process.		We can show that Element 2 funding has been fully utilised through a costed provision map.
TIER 2		EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have involved the CYP, parents/carers and other stakeholders in this process.
We have put an Individual Health Care Plan (IHCP) in place detailing the CYP's medical /physical needs, including an assessment of potential risks to the CYP's education, health, and social wellbeing, and how risks have been mitigated/ managed.		
We have sought additional specialist advice relevant to the CYP's needs. This will include health professionals such as paediatric occupational therapy, paediatric physiotherapy, specialist paediatric nurses e.g., continence nurse. Advice should also have been sought from the Specialist Support Team for Pupils with Medical and/or Physical Needs.		
TIER 3		EVIDENCED?
		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.
		We can evidence a continuation of significant adaptive teaching strategies and reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.

SENSORY AND/OR PHYSICAL AND/OR MEDICAL NEEDS

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We can evidence a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period e.g., two terms.		TIER 4	EVIDENCED?
Where appropriate, we have provided specialist equipment as part of the reasonable adjustment's duty, via the Specialist Support Team for Pupils with Medical and/or Physical Needs and on the prescription of a therapist from either a paediatric occupational therapist or paediatric physiotherapist within local statutory health services.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have sought additional specialist advice relevant to the CYP's needs. This will include health professionals such as paediatric occupational therapy, paediatric physiotherapy, specialist paediatric nurses e.g., continence nurse. Advice should also have been sought from the Specialist Support Team for Pupils with Medical and/or Physical Needs.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding (IPFA), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	
We can show that the adaptive teaching strategies, reasonable adjustments, specialist equipment and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.		We have sought additional specialist advice relevant to the CYP's needs. This will include health professionals such as paediatric occupational therapy, paediatric physiotherapy, specialist paediatric nurses e.g., continence nurse. Advice should also have been sought from the Specialist Support Team for Pupils with Medical and/or Physical Needs.	
We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies, reasonable adjustments, specialist equipment and intervention.		We have carried out an environmental audit ensuring that all adaptations needed have been made, where possible.	
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.		We have ensured that individualised risk assessments are in place including Personal Emergency Evacuation Plan (PEEP) and/or manual handling plan, where appropriate.	
We have put an Individual Health Care Plan (IHCP) in place detailing the CYP's medical /physical needs, including an assessment of potential risks to the CYP's education, health, and social wellbeing, and how risks have been mitigated/ managed.		We have involved the CYP, parents/carers and other stakeholders in this process.	
We have ensured that individualised risk assessments are in place including Personal Emergency Evacuation Plan (PEEP) and/or manual handling plan, where appropriate.		We have sufficient evidence to show that an EHCNA is required.	
We have involved the CYP, parents/carers and other stakeholders in this process.		Where an EHCP is in place, we have held an Annual Review, and this has been attended by an EHCP Review Officer.	
		We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	

HEARING SUPPORT, BANDING AND GRADUATED APPROACH

There is no requirement at this time for a CYP to have a statement or EHCP to access the Sensory Service as the Service receives delegated funding from settings. The Service uses the National Sensory Impairment Partnership (NatSIP) Eligibility Framework to guide the allocation of provision. CYP with more complex needs, who may have a statement/ EHCP, will also receive provision from the Service, guided by the same Framework.

The British Society of Audiology descriptors have been adopted for hearing loss. These descriptors are based on the average hearing threshold levels at 250, 500, 1000, 2000 and 4000Hz in the better ear. No response is taken to have a value of 130 dBHL.

Mild hearing loss

Unaided threshold 20-40 dBHL

Moderate hearing loss

loss unaided threshold 41-70 dBHL

Severe hearing loss

Loss unaided threshold 71-95 dBHL

Profound hearing loss

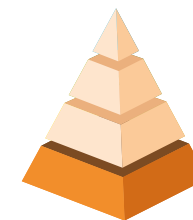
Unaided threshold in excess of 95 dBHL

From the NatSIP Eligibility Framework 2015.
SEND Code of Practice 0 to 25 years,
Jan 2015: xvii, 6.34, 6.35, 6.61

SENSORY HEARING SUPPORT

Tier 1 – Universal and Quality First Teaching

CYP has identified needs which are highlighted to all staff with advice on support strategies provided and monitored by the SENCO/SLT.



Description of the CYP's needs

The CYP experiences needs which are managed well in a mainstream class.

A CYP who has a reoccurring conductive deafness. This may be associated with middle ear infections, glue ear, temporary perforated eardrums.

A CYP with hearing device compliance.

CYP may have loss of focus, be disruptive or distracted.

May find it difficult to listen and attend to speech.

May be withdrawn and wait for cues from others in the class. CYP may find it difficult to listen when there is background noise.

CYP may not hear clearly in a group situation.

CYP may have unclear speech.

CYP may give the impression of being able to listen when the CYP wants to.

CYP may have a vocabulary deficit or delayed language presentation.

CYP may be experiencing difficulties acquiring phonic knowledge.

CYP may perform within age expectations overall.

Things to do to support the CYP in the setting and the evidence required to support decision making

The setting has completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.

The setting has planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.

The setting has completed regular reviews of the CYP's progress in response to the adaptive teaching strategies/reasonable adjustments (Assess, Plan, Do, Review cycle).

Advice and support from the parents/carers.

Information from the CYP regarding their opinions and preferred strategies using person-centred approaches.

The setting is proactive in identifying individual needs and monitors that action is taken.

Risk assessment where appropriate.

Quality first teaching and strategies

[Tier 1- Quality First Teaching \(link to docs\)](#)

Sensory Service (Vision and Hearing Support Teams)

Wirral Council's Sensory Service aims to ensure that deaf and visually impaired children and young people (0-19 years) receive an appropriate inclusive education that enables them to fulfil their potential and develop into independent adults. The teachers of the Visually Impaired, Teachers of the Deaf and specialist teaching assistants will work with you and your child throughout their education: from early years until they leave school or school 6th form.

Find out more information about the Sensory Service on the Local Offer <https://localofferwirral.org/listing/sensory-service/>

Contacts

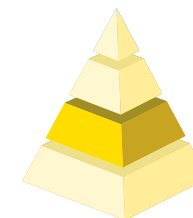
HEAD OF SERVICE
07787261001 pjdavies@wirral.gov.uk

HEARING IMPAIRMENT
07919290794 helenmida@wirral.gov.uk

SENSORY HEARING SUPPORT

Tier 2 – Early support

CYP has identified needs which are highlighted to all staff with advice on support strategies provided and monitored by the SENCO/SLT. A CYP who has a long-term conductive loss, sensory neural deafness or unilateral deafness and is making expected progress but may require: Additional provision from within setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. May also require specialist advice from services available to all CYP for outside agencies. Tier 2- £6k



Description of the CYP's needs

The CYP has identified needs.

The CYP has a long-term conductive loss, mild sensory neural deafness or unilateral deafness.

They may or may not have hearing aids.

Difficulty acquiring knowledge is impacting on other areas of learning development.

Hearing loss is impacting on attention and concentration in whole-class/group settings.

May be difficult to understand speech.

Can be frustrated/give up when not understood.

Hearing difficulty may be impacting upon social skill development.

Regular high-quality teaching and differentiation at Tier 1 is not supporting catch-up.

Performance in some areas drops just below Age Related Expectations.

Things to do to support the CYP in the setting and the evidence required to support decision making

The setting has organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.

Use of a structured observation profile to target differentiation including IEPs/ASPs with SMART targets that are reviewed and updated regularly.

CYP involved in setting and monitoring their own targets.

Parents/carers involved regularly and know how to support targets at home.

An Individual Management Plan may be written (in consultation with parents/carers) to share advice on successful strategies e.g., seating arrangements, position in classroom, preferred learning style.

Use of speech audiometry and other specialist assessments to determine access to spoken language in the classroom.

Setting trips are planned well in advance and take into consideration the needs of the CYP.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Access to small group support. Group work to be planned and tailored to meet identified need and includes good role models.

A consideration made to the sound dynamics/noise levels within the room. Staff support the CYP to access the curriculum using reasonable adjustments.

A multi-sensory approach to teaching e.g., language supported through visuals.

Support/advice from SENCO needs are highlighted to all staff with advice on support strategies provided and monitored by the SENCO/SLT.

Time for scheduled meetings with parents/carers on a regular basis.

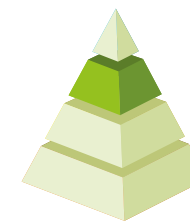
Additional adult (e.g., TA) for focused support during unstructured times e.g., lunchtime supervision/ targeted extra-curriculum activities.

Gain advice/support from Hearing Support Team/external agencies

SENSORY HEARING SUPPORT

Tier 3 – Targeted specific support

The CYP has identified needs which require additional specific provision or specialist advice. They require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP from outside agencies



Description of the CYP's needs

A CYP who is not making expected progress in some areas as a result of their deafness. This could be due to a persistent conductive loss, unilateral deafness or mixed loss.

This CYP may be affected by issues of 'being different' which may have an impact on their social and emotional wellbeing.

A CYP who may have auditory processing problems.

The CYPs deafness could co-exist with other secondary needs.

Things to do to support the CYP in the setting and the evidence required to support decision making

Environmental audit using Access/Equality Strategy.

Specialist assessments e.g., Specialist Teacher of the Deaf, Educational Psychologist, SALT, OT. Individual targets are agreed and monitored following discussion with CYP and parents/carers. There is a commitment to developing independence with steps planned and agreed by all stakeholders. Careful reviewing of needs before transition at key stages e.g., starting pre-school, primary, secondary, post 16, adult life.

Assessment of expressive and receptive language (English/BSL) in conjunction with SALT to inform target setting. TAs/Support staff are routinely included in planning and or/are provided with lesson plans and learning objectives in advance of the lesson to ensure their input is effective.

Risk assessments to inform of adaptations including educational visits. Individual Management Plan including: Individual Health Care Plan. Emergency Evacuation Plan, Close scrutiny of tracking.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Regular/daily small group teaching/modelling/coaching of social skills. Short term small group and/or individual intervention, to develop specific areas of curriculum access as identified by the subject teacher or educational specialist teacher, following a programme designed or recommended by that professional.

Adult intervention targeted at specific curriculum areas or specific social times.

Short-term small group intervention to develop listening skills, language and phonic skills. A detailed time limited programme, intervention, personalised timetable and/or resources.

Seek advice and guidance from a Hearing Specialist Teacher/Sensory Service. Consult with the specialist teacher/Sensory Service when recruiting staff to work with a named CYP.

Setting will ensure that key information is passed on at times of transition and, where appropriate, will consult with the Hearing Support Team/Sensory Service.

Awareness raising for staff about the educational implications of a temporary deafness and strategies to facilitate access in the classroom. Provision of radio aid/SoundField devices where appropriate.

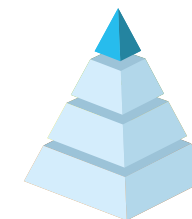
Use of programmes/resources e.g., Time to Talk, National Deaf Children's Society (NDCS) language programme, NDCS phonics guidance. Advice on use of ICT/Assistive Technology to access the curriculum from the Hearing Support Team/Sensory Service.

An ASP/IEP may be in place. A Sensory Support programme may be in place. Specialist Assessment e.g., NDCS assessments. H.I./Deaf peer group activities/supportive network offered Signposting to families for supporting their CYP at home, if required.

SENSORY HEARING SUPPORT

Tier 4 – Targeted Support (EHCP)

The CYP has significant primary needs which impact on progress requiring long-term involvement of educational and non-educational professionals as part of statutory assessment/EHC Plan. They may require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP through outside agencies



Description of the CYP's needs

The CYP may be displaying some complexity of other needs.

A CYP whose deafness impacts on their ability to access the curriculum independently.

Thee CYP may use sign language to support their learning.

This CYP may be affected by issues of 'being different' which may have an impact on their social and emotional well-being.

Things to do to support the CYP in the setting and the evidence required to support decision making

Specialist assessments e.g., by Specialist Teacher, Educational Psychologist, SALT, OT, CAMHS etc as part of statutory assessment/EHC Plan. Risk assessment to identify dangers and need for additional support.

Regular multi-agency assessment and/or review of strategies and progress. Review the statement annually when all agencies are involved in reflection and joint planning in partnership with CYPs and their parents/carers.

Individual risk assessments for practical subjects. Involvement of educational and non-educational professionals as part of Annual Review/EHCP

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Teaching style and tasks are adapted to suit CYP's needs.

Individualised support to implement recommendations from support services e.g. Hearing Support Team/Sensory Service/National Deaf Children's Society (NDCS).

Structured individual programmes focusing on listening, speech and language development, auditory memory, phonic awareness, social interaction and emotional well-being, as identified by the ASP/IEP/management plan.

Advice and assessment of the use of specialist or adapted ICT/

Assistive Technology to access the curriculum.

SENCOs provide support to teacher and TAs and take responsibility for arranging appropriate specialist CPD and quality assuring the learning experience of the CYP including the use of specialist resources.

Opportunities for support staff to access specialist training regarding hearing impairment and its impact on learning and social and emotional well-being from the Hearing Support team/Sensory Service. High level of multi-agency involvement: 'Team around CYP'.

Co-ordinate the involvement of a range of agencies, one of whom may fulfil the key worker role. Time to work with the Specialist Teacher for joint planning with the CYP, family and other professionals. Facilitate participation in activities organised by voluntary organisations. Peer awareness including sign language classes. Access to mentor systems/supportive network.

Independent life skills/travel training to develop independence skills in preparation for adulthood.

Liaison with CYPs, parents and other professionals when determining priorities for individual CYP.

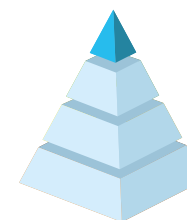
Work together with the CYP, parents and staff to identify priorities for the CYP's individual programme of work.

Signpost families to a range of voluntary and statutory services regarding benefits, access to additional funding for non-educational activities.

SENSORY HEARING SUPPORT

Tier 4 - Specific targeted support EHCP plus Alternative Provision

The CYP will experience significant, complex persistent and enduring difficulties. They may require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP through outside agencies. £4K + tier 3- £6k + Tier 4 (top up funding or ERP) +Specialist Provision



Description of the CYP's needs

The CYP presents with a range of issues and an accumulation of layered needs, which could include mental health, relationships, behavioural, physical, medical, sensory, communication & cognitive needs.

A CYP with a deafness who requires high levels of additional support to access the curriculum.

A CYP who because of their permanent deafness cannot fully access spoken language.

The CYP may be a BSL first language user. The CYP's speech clarity is significantly affected.

The CYP may have auditory neuropathy

Things to do to support the CYP in the setting and the evidence required to support decision making

Long term involvement of educational and non- regular risk assessments to consider risks to self and others.

Completion of assessments for consideration at SENAP and/ or Joint Panel. All professionals agree that the CYPs needs can only be met with additional resources.

Specialist Provision

Long term involvement of educational and non- regular risk assessments to consider risks to self and others.

Completion of assessments for consideration at SENAP and/ or Joint Panel. All professionals agree that the CYPs needs can only be met with additional resources.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Main provision by class/subject teacher with support from SENCO and advice from education and non-educational professionals as appropriate.

Provide a personalised, multi-sensory learning experience, taking into account the advice within the EHCP, Annual Review and advice from external agencies.

Specialist teaching where significant delayed language development and significantly delayed literacy skills focusing on both learning curriculum and social skills throughout the day.

Access to support from highly skilled and experienced staff with appropriate qualifications within small classes with a high adult ratio or 1:1 specialist support in mainstream.

Adult support may be required to access an individualised curriculum, facilitate social interaction and/or to develop/ maintain attention skill.

Additional individual support in line with risk assessments.

Pre- and post-teaching of vocabulary and concepts to allow the CYPs to fully access the curriculum.

Individual intervention to develop communication skills, spoken language or BSL.

Provide an appropriate, enabling listening environment.

Constant monitoring of H.I. function on learning.

Opportunities to explore their identity.

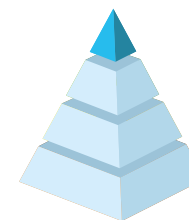
Specialised modification of all teaching and learning styles and resources. Advice sought from the Hearing Support Team/ Sensory Service regarding this.

The use of specialist or adapted equipment/software/Assistive Technology in all lessons to access the curriculum.

SENSORY HEARING SUPPORT

Tier 4 - Specific targeted support EHCP plus Alternative Provision (cont'd)

The CYP will experience significant, complex persistent and enduring difficulties. They may require: Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP through outside agencies. £4K + tier 3- £6k + Tier 4 (top up funding or ERP) +Specialist Provision



Description of the CYP's needs

The CYP presents with a range of issues and an accumulation of layered needs, which could include mental health, relationships, behavioural, physical, medical, sensory, communication & cognitive needs.

A CYP with a deafness who requires high levels of additional support to access the curriculum.

A CYP who because of their permanent deafness cannot fully access spoken language.

The CYP may be a BSL first language user. The CYP's speech clarity is significantly affected.

The CYP may have auditory neuropathy

Use of direct input leads to improve quality of sound input from audio equipment.

Access to subtitles where available or access to transcripts.

BSL communicators (Signature Level 2 minimum) to provide access to the curriculum and social interaction.

BSL sign language tuition.

Intensive rehabilitation programme after cochlear implantation

Use a hearing aid/cochlear implant and radio aid.

Specialist support, alongside a multi-agency approach is essential. Agencies to meet termly to assess progress and plan future targets and the involvement of a range of agencies one of which may fulfil the Key worker role.

Advice from other professionals as needed.

Access to qualified Teacher of the Deaf (ToD) on a regular basis. Training on Hearing loss strategies, conditions, BSL and equipment by Hearing Support Team/Sensory Service.

Specialist Support Programmes in place.

Training/support for parents/carers.

Manage access arrangements for internal and external examinations and assessments.

Disapplication from certain subjects if appropriate and only as a last resort. Adaptation/use of assistive technology is to be used to avoid any exclusion from curriculum subjects/activities.

Specialist Provision, specialist class, or package £10K & element

Band 4 plus. Additional staffing, resources or Alternative Provision are needed to ensure continuation of placement.

Out of area independent specialist provider

All of the above but the CYP has such complex needs in addition to their hearing loss that their needs cannot be met in a setting within Wirral, i.e., they attend a non-maintained educational or residential placement (Out of Area). This may also include support for health and social care issues. This also includes CYP with British Sign Language as their sole mode of communication.

SENSORY HEARING SUPPORT

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1	EVIDENCED?		
We have ensured that QFT strategies are in place for all CYP.		We have held regular reviews of the CYP's progress in response to the above specialist advice and adaptive teaching strategies/reasonable adjustments. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.	
We have completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		We have put a risk assessment in place, where required.	
We have completed regular reviews of the CYP's progress in response to the adaptive teaching strategies/reasonable adjustments (Assess, Plan, Do, Review cycle).		We can show that Element 2 funding has been fully utilised through a costed provision map.	
We have put a risk assessment in place, where required.		We have involved the CYP, parents/carers and other stakeholders in this process.	
We have involved the CYP and parents/carers in this process.			
TIER 2	EVIDENCED?	TIER 3	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.		We can evidence a continuation of significant adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.	
We have used a structured observation profile to target differentiation including IEPs/ASPs with SMART targets that are reviewed and updated regularly.		We have sought further specialist advice e.g. Hearing Support Team, where concerns regarding the CYP's needs and progress have persisted.	
We have sought additional specialist advice relevant to the CYP's needs e.g. The Hearing Support Team.		We can show that the adaptive teaching strategies and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.	
We have planned and organised the implementation of significant adaptive teaching strategies/reasonable adjustments, relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., one term.		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies/reasonable adjustments.	
		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	

SENSORY HEARING SUPPORT

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We have put a specific programme of support/specialist devices in place to support the CYP.		TIER 4-5	EVIDENCED?
We have organised/undertaken more specialised recognised assessments, over a reasonable period of time and from a variety of sources e.g., Specialist Teacher of the Deaf, Educational Psychologist, SALT, OT. This could be an assessment of expressive and receptive language (English/BSL) in conjunction with SALT to inform target setting.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.		We have organised/undertaken specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.	
We have involved the CYP, parents/carers and other stakeholders in this process.		We have ongoing involvement of educational and non-educational professionals as part of EHC Plan.	
		We have organised/undertaken specialist assessments as part of Annual Review processes submitted to EHCP Panel.	
		We have organised a specialist teacher to undertake detailed diagnostic assessments in order to create individualised skill development programme for the CYP. This personalised plan/timetable has been put in place.	
		We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.	
		We have tracked and monitored progress in skill acquisition.	
		We are liaising closely with a range of professionals/support services.	
		We have involved the CYP, parents/carers and other stakeholders in this process.	
		We have held an Annual Review, and this has been attended by an EHCP Review Officer.	
		We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	
TIER 4	EVIDENCED?		
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.			
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding (IPFA), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.			
We have held regular multi-agency meetings to review strategies in place and adapted where necessary.			
We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.			
We have involved the CYP, parents/carers and other stakeholders in this process.			

VISION SUPPORT, BANDING AND GRADUATED APPROACH

There is no requirement at this time for a CYP to have a statement or EHCP to access the Sensory Service as the Service receives delegated funding from settings. The Service uses the National Sensory Impairment Partnership (NatSIP) Eligibility Framework to guide the allocation of provision. CYP with more complex needs, who may have a statement/EHCP, will also receive provision from the Service, guided by the same Framework.

Vision loss (VI)

From a functional standpoint, a CYP can be considered to have VI if this interferes with optimal development, learning and achievements, unless adaptations are made in the methods of presenting learning experiences, the nature of the materials used and/or the learning environment (ref. Barragan's definition cited in Flanagan et al, 2003, p 497). The following classification applies to corrected vision with both eyes open.

Acuity criteria are for guidance purposes only. The professional judgement of a Qualified Teacher of the Visually Impaired (QTVI) should be applied as necessary to decide on the classification. For example, a CYP may have a mild reduction in visual acuity but be functioning within a different visual category due to an additional ophthalmic condition, e.g., an oculomotor disorder such as nystagmus, visual field reduction, cerebral vision impairment, and/or additional learning difficulties).

DISTANCE VISION

Mild vision loss – within the range 6/12 - 6/18 Snellen/Kay (LogMAR 0.3 – 0.48)

Moderate vision loss – less than 6/19 - 6/36 Snellen/Kay (LogMAR 0.5 – 0.78)

Severe vision loss – less than 6/36 - 6/120 Snellen/Kay (LogMAR 0.8 – 1.3)

Profound vision loss – less than 6/120 Snellen/Kay (LogMAR 1.32+)

NEAR VISION

Mild vision loss – loss N14-18

Moderate vision loss – loss N18-24

Severe vision loss – N24-36

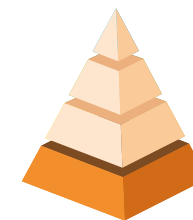
Profound vision loss – Educationally blind/Braille user/can access small quantities of print larger than N36

From the NatSIP Eligibility Framework 2015 SEND Code of Practice 0 to 25 years, Jan 2015: xvii, 6.34, 6.35, 6.61

SENSORY VISION SUPPORT

Tier 1 – Universal and Quality First Teaching

CYP has identified needs which are highlighted to all staff with advice on support strategies provided and monitored by the SENCO/SLT



Description of the CYP's needs

A CYP who should wear glasses, without which their vision is impaired.

The CYP may have fluctuating/ deteriorating conditions.

The CYP may have glasses compliance.

The CYP may require Occlusion therapy (patching).

A CYP with monocular vision.

The CYP is working generally within or just below Age Related Expectations.

Quality first teaching (link to QFT doc) is meeting the CYP needs with appropriate adaptations and reviews for specific learning needs.

Things to do to support the CYP in the setting and the evidence required to support decision making

The setting has completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.

The setting has planned and organised the implementation of adaptive teaching strategies/reasonable adjustments/specialist resources, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.

The setting has completed regular reviews of the CYP's progress in response to the adaptive teaching strategies/reasonable adjustments/specialist resources (Assess, Plan, Do, Review cycle).

Advice and support from the parents/carers.

Information from the CYP regarding their opinions and preferred strategies using person-centred approaches.

The setting is proactive in identifying individual needs and monitors that action is taken.

Risk assessment where appropriate.

Quality first teaching and strategies

[Tier 1- Quality First Teaching \(link to docs\)](#)

Sensory Service (Vision and Hearing Support Teams)

Sensory Service (Vision and Hearing Support Teams)

Wirral Council's Sensory Service aims to ensure that deaf and visually impaired children and young people (0-19 years) receive an appropriate inclusive education that enables them to fulfil their potential and develop into independent adults. The teachers of the Visually Impaired, Teachers of the Deaf and specialist teaching assistants will work with settings, families and CYP throughout their education: from early years until they leave post-16 education.

Find the Sensory Service on the Local Offer:

<https://localofferwirral.org/listing/sensory-service>

Contacts

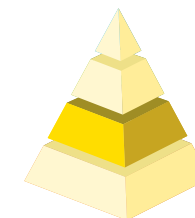
HEAD OF SERVICE
07787261001 pjdavies@wirral.gov.uk

VISUAL IMPAIRMENT
07919290989 vanessaikin@wirral.gov.uk

SENSORY VISION SUPPORT

Tier 2 – Early support

CYP has identified needs which are highlighted to all staff with advice on support strategies provided and monitored by the SENCO/SLT. Additional provision from within setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. May also require specialist advice from services available to all CYP for outside agencies.



Description of the CYP's needs

A CYP with a diagnosis of a visual impairment can find the setting's environment difficult or stressful at times.

Outside agencies are involved.

A CYP with reduced vision who has difficulty accessing some parts of the curriculum or specific social times.

A CYP whose vision means that they require changes to their environment.

The CYP may have fluctuating/ deteriorating conditions.

The CYP may have glasses compliance.

The CYP may require Occlusion therapy (patching).

Things to do to support the CYP in the setting and the evidence required to support decision making

The setting has organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs. Use of a structured observation profile to target differentiation including IEPs/ASPs with SMART targets that are reviewed and updated regularly. CYP involved in setting and monitoring their own targets.

Parents/carers involved regularly and know how to support targets at home. An Individual Management Plan may be written (in consultation with parents/carers) to share advice on successful strategies e.g., seating arrangements, position in classroom, preferred learning style.

Setting trips are planned well in advance and take into consideration the needs of the CYP.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

CYP can learn through whole class teaching and generally copes well. Access to small group support, group work to be planned and tailored to meet identified need.

Teaching assistance is targeted towards visual access and is not necessarily needed for learning. Oversight for PE, to monitor safety, interpretation of instructions and use of equipment. Oversight in the playground/free spaces. Oversight when moving around the setting and in emergency situations.

Requires adult intervention to access parts of the curriculum.

Requires classroom seating arrangements, slightly enlarged text and/or white/interactive board access. Support/advice from SENCO.

Additional adults routinely used to support flexible groupings.

Access to targeted small group work with additional adult/ support staff. Access to intervention group work with TA/ Learning Mentor/Support staff.

Additional adult for focused support during unstructured times e.g., lunchtime supervision/ targeted extra-curriculum activities, supervision in the playground, adult-led safe space.

Time for scheduled meetings with parents on a regular basis.

Awareness raising for staff about the educational implications of specific visual conditions from a QTVI.

Educational visits guidance/risk assessments. Settings should seek advice on inclusive practice (inc. exam advice) as appropriate for pupils with V.I. from Vision Support Team.

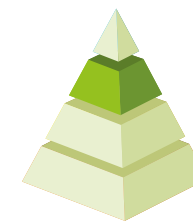
CYP to be regularly monitored by the Vision Support team and an annual functional assessment carried out. Support/ advice for transition from the Vision Support Team.

The Vision Support Team may deliver short, targeted interventions.

SENSORY VISION SUPPORT

Tier 3 – Targeted specific support Time limited additional funding

The CYP has identified needs which require additional specific provision or specialist advice. Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP from outside agencies.



Description of the CYP's needs

A CYP who has a significant visual impairment which impacts on his/her ability to access the curriculum independently.

Outside agencies are involved.

A CYP who may have difficulties accessing all practical subjects.

Things to do to support the CYP in the setting and the evidence required to support decision making

Environmental audit Setting Access/Equality Strategy.

Risk assessments of tricky situations to inform adaptations incl. educational visits.

Specialist assessments e.g., Specialist Teacher for VI, Educational Psychologist, SALT, OT.

There is a commitment to developing independence with steps planned and agreed.

Careful reviewing of needs before transition at key stages e.g., starting pre-school, primary, secondary, post 16, adult life.

TAs are routinely included in planning and or/are provided with lesson plans and learning objectives in advance of the lesson to ensure their input is effective.

Individual Management Plan to share advice on successful strategies, written in consultation with parents, including:

- Risk assessments.
- Moving and handling.
- Health care.
- Visit risk assessment.
- Swimming risk assessment.
- Emergency evacuation.
- Mobility.
- Close scrutiny of tracking.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Regular/daily small group teaching of social skills.

Peer awareness.

Needs a detailed time-limited programme, intervention personalised timetable and/or resource.

Short term small group and/or individual intervention, to develop specific areas of curriculum access as identified by the subject teacher or educational specialist teaching, following a programme designed or recommended by that professional.

Preparation of modified print materials as directed by the specialist teacher.

Assistance with access to specialised equipment and assistive technology software e.g., laptops, cameras, speech/large print software or talking equipment.

Customised resources.

Teaching assistance is targeted towards the supply of teaching and learning resources e.g., the preparation/resourcing of suitable visual materials.

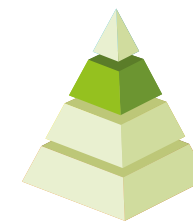
Co-ordinating the adaptation of the PC screen appearance as directed by the teacher of the VI.

Assistance with use of equipment across the curriculum.

SENSORY VISION SUPPORT

Tier 3 – Targeted specific support (cont'd) Time limited additional funding

The CYP has identified needs which require additional specific provision or specialist advice. Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP from outside agencies.



Description of the CYP's needs

A CYP who has a significant visual impairment which impacts on his/her ability to access the curriculum independently.

Outside agencies are involved.

A CYP who may have difficulties accessing all practical subjects.

Ensuring advised seating arrangements and suitable positioning to facilitate the viewing of screens/IWB.

Supervision at breaks and lunch time as required.

Independence skills—under guidance of the teacher of the VI, trained setting staff or outside agency.

Specialist/accessible ICT access.

Adapted PE/practical activities.

Time for formal meetings with parents on a regular basis.

Time for meetings with the Specialist Teacher.

Allocate appropriate space for visiting professionals to work with individual CYPs, taking into account safeguarding issues.

Adult intervention targeted at specific curriculum areas or specific social times.

Setting to ensure that key information is passed on at times of transition and, where appropriate, and will consult with the specialist teaching team.

VI specific advice and support from the Vision Support Team on:

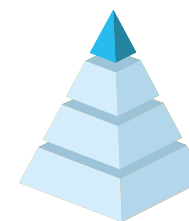
- Curriculum differentiation.
- Equipment/software to access the curriculum.
- Positioning in the classroom.
- Risk assessments.

- Mobility.
- Individual health care and management plans.
- Exam access arrangements.
- Advice on use of ICT to access the curriculum.
- May require specialist equipment and low vision aids.
- Advice on use of ICT to access the curriculum from the STT. Equipment and software loans may be available.
- Additional Support plan may be in place.
- Sensory Support Programme may be in place.
- VI peer group activities offered.

SENSORY VISION SUPPORT

Tier 4 - Targeted support (EHCP)

The CYP has significant primary needs which impact on progress requiring long-term involvement of educational and non-educational professionals as part of statutory assessment/ EHC Plan. Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP through external agencies.



Description of the CYP's needs

A CYP who has a visual impairment which greatly impacts on his/her ability to access the curriculum without additional resources.

A CYP may also have some complexity of other needs.

Things to do to support the CYP in the setting and the evidence required to support decision making

Specialist assessments e.g., by Specialist Teacher for VI, Educational Psychologist, SALT, OT, CAMHS etc. as part of statutory assessment/EHC Plan. Risk assessment to identify dangers and need for additional support.

Individual risk assessments for practical subjects. Regular multi-agency assessment and/or review of strategies and progress. Review the statement annually when all agencies are involved in reflection and joint planning in partnership with CYPs and their parents/carers.

Involvement of educational and non-educational professionals as part of the Annual Review process.

Assessment and advice from Child and Youth Care specialist teachers that is updated regularly. Evacuation plan.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

SENCOs provide support to the teacher/TAs and take responsibility for arranging appropriate specialist CPD and quality assuring the learning experience of the CYP.

Staff training in the use of specialist resources.

High level of multi-agency involvement: 'team around CYP. Co-ordinate the involvement of a range of agencies, one of

whom may fulfil the key worker role. Time to work with the Specialist Teacher for joint planning with the CYP, family and other professionals. Opportunities for support staff to access specialist training regarding VI and its impact on learning and social and emotional well-being.

Staff to work with a small group and/or individual intervention to develop specific areas of the curriculum following a programme designed or recommended by an external agency.

Liaison with CYPs, parents and other professionals when determining priorities for individual children. Work together with the child, parents and staff to identify priorities for the child's individual programme of work. Signpost families and settings to a range of voluntary and statutory services regarding benefits, access to additional funding for non-educational purposes.

Opportunities for the CYP to meet a peer group with similar needs and specific adult role models where appropriate. Encourage participation in activities led by external agencies/ support groups. Access to mentoring systems.

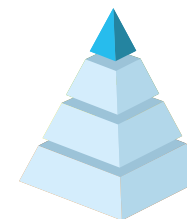
Adult support to facilitate social interaction, supervision in the playground/free-time spaces, support to develop/ maintain attention skills, to set up equipment, support CYP's management of it, and establish working routines.

On and off-site mobility to develop or enhance independence skills. Develop their personal mobility, navigation and independent living skills through habituation training. Provision, storage and maintenance of specialist equipment.

SENSORY VISION SUPPORT

Tier 4 - Specific targeted support EHCP plus Alternative Provision

The CYP will experience significant, complex persistent and enduring difficulties. Further provision, which is in addition to, that which is ordinarily available within the setting's resources. Co-ordination of assessment, intervention and monitoring by the SENCO. Specialist advice from services available to all CYP through outside agencies.



Description of the CYP's needs

The CYP presents with a range of issues and an accumulation of layered needs, which could include mental health, relationships, behavioural, physical, medical, sensory, communication & cognitive.

A CYP who is a tactile learner (moon/Braille). The CYP experiences complex, frequent and persistent difficulties associated with visual impairment.

The visual difficulties may co-exist with a medical condition, physical, sensory, language and or/ communication needs, behaviour difficulties including self-esteem and attention issues.

The CYP experiences significant life-long learning difficulties for which specialist provision is appropriate. These may be compounded by other co-existing needs.

The CYP could be extremely vulnerable and there may be safeguarding issues to consider due to acute levels of mental health concerns.

Things to do to support the CYP in the setting and the evidence required to support decision making

Long term involvement of educational and non-educational professionals as part of Annual review/EHC Plan. Regular risk assessments to consider risks to self and others.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Constant monitoring of visual functioning and impact on learning. Specialist teaching focusing on both learning curriculum and social skills throughout the day. Targets informed by Annual Review/EHC Plan.

Skilled staff who understand the implications of visual impairment and have in depth knowledge of specialist access equipment. Requires additional staff support to access learning in a specialist setting due to high level of vulnerability presented by the CYP.

Adult support to set up equipment and establish working routines in most lessons. Assistance/supervision when moving between lessons and during unstructured times.

Support in and out of class to access the wider life of the setting. Opportunities for 1:1 teaching/modelling/coaching outside the classroom in an enabling environment. Additional individual support in line with risk assessments.

An additional specialist curriculum to develop independence skills e.g., listening skills, mobility Braille, use of specialist equipment and software.

Curriculum to include highly differentiated PHSE aspects e.g., SRE (Sex and Relationship Education).

Facilitate production of differentiated materials in accordance with the advice from a specialist teacher. Preparation of Braille/moon/tactile diagrams.

Assistance with visual access to subject specific equipment e.g., science, technology, maths and ICT.

May provide visual stimulation programme. Promotion of social interaction with peer group. Transcription time.

Multi-disciplinary planning for complex needs. Setting co-ordinates, the involvement of a range of agencies one of which may fulfil the Key worker role. Specialist support, alongside a multi-agency approach is essential.

Staff have access to regular consultations with support services e.g., SALT, OT, CAMHS., SLT, Sensory Service. Time for external agencies to meet termly to assess progress and plan future targets. Allocate appropriate accommodation for visiting professionals to work with individual CYPs, taking into account safeguarding issues. Promote positive engagement with VI peers and role models.

Opportunities to explore their identity. Training on VI strategies and conditions. Training for parents/carers. Training on Braille and specialist equipment to staff and parents.

SENSORY VISION SUPPORT

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1	EVIDENCED?		
We have ensured that QFT strategies are in place for all CYP.		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies/reasonable adjustments, specialist equipment and resources. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.	
We have completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.	
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, specialist equipment and resources relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		We have put a risk assessment and/or Individual Health Care Plan (IHCP) in place, where required.	
We have completed regular reviews of the CYP's progress in response to the adaptive teaching strategies/reasonable adjustments, specialist equipment and resources (Assess, Plan, Do, Review cycle).		We can show that Element 2 funding has been fully utilised through a costed provision map.	
We have put a risk assessment in place, where required.		We have involved the CYP, parents/carers and other stakeholders in this process	
We have involved the CYP and parents/carers in this process.			
TIER 2	EVIDENCED?	TIER 3	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have organised/undertaken more specialist assessments using tools (preferably standardised) relevant to the CYP's needs.		We can evidence a continuation of significant adaptive teaching strategies/reasonable adjustments and specialist equipment/resources, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.	
We have used a structured observation profile to target differentiation including IEPs/ASPs with SMART targets that are reviewed and updated regularly.		We have sought further specialist advice e.g. Vision Support Team, where concerns regarding the CYP's needs and progress have persisted.	
We have sought additional specialist advice relevant to the CYP's needs e.g. The Vision Support Team.		We can show that the adaptive teaching strategies, reasonable adjustments and specialist equipment, resources and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g. two terms.	
We have planned and organised the implementation of significant adaptive teaching strategies/reasonable adjustments, specialist equipment and resources relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., one term.			

SENSORY VISION SUPPORT

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies/reasonable adjustments, specialist equipment and resources.		We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.	
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.		We have involved parents/carers and other stakeholders in this process.	
TIER 4		EVIDENCED?	
We have put a specific programme of support recommended by The Vision Support Team in place to support the CYP.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We have organised/undertaken more specialised recognised assessments, over a reasonable period of time and from a variety of sources e.g., Specialist Teacher for VI, Educational Psychologist, OT.		We have organised/undertaken specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.	
We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.		We have ongoing involvement of educational and non-educational professionals as part of EHC Plan.	
We have involved parents/carers and other stakeholders in this process.		We have organised/undertaken specialist assessments as part of Annual Review processes submitted to EHCP Panel.	
		We have organised a VI specialist teacher to undertake detailed diagnostic assessments in order to create individualised skill development programme for the CYP. This personalised plan/timetable has been put in place.	
		We have put in place specific risk assessments to inform of adaptations including educational visits and Individual Management Plan e.g., Individual Health Care Plan and/or Emergency Evacuation Plan.	
		We have tracked and monitored progress in skill acquisition.	
		We are liaising closely with a range of professionals/support services.	
		We have involved the CYP, parents/carers and other stakeholders in this process.	
		We have held an Annual Review, and this has been attended by an EHCP Review Officer.	
		We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	

SECTION D

SOCIAL, EMOTIONAL, AND MENTAL HEALTH DIFFICULTIES

These Threshold Tiers were developed with reference to the Special educational needs and disability code of practice: 0 to 25 years Statutory guidance for organisations who work with and support children and young people with special educational needs and disabilities (DfE and DoH, 2015).





Chapter 6 of the SEN Code of Practice outlines Social, emotional and mental health difficulties as one of 4 broad areas of need. This Threshold section refers to Social, Emotional, and Mental Health difficulties.

6.32 Children and young people may experience a wide range of social and emotional difficulties which manifest them-selves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.

6.33 Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviours, so it does not adversely affect other CYPs. These may be outlined in the setting's behaviour plan.

The Department for Education publishes guidance on managing pupils' mental health and behaviour difficulties in settings (see weblinks for Chapter 6 in the Code of Practice and additional guidance for schools produced by the DfE).

Wirral's Graduated Approach to Supporting Children

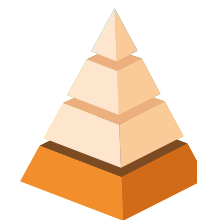
-  **TIER 1**
Universal Provision
-  **TIER 2**
Universal Provision and any extra support included in what is already available within reasonable adjustments
-  **TIER 3**
Time limited funding may be provided based on need and requirements
-  **TIER 4 AND ONWARDS**
EHCP and further support to be decided as needed as per the thresholds and EHCP pathway



SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 1 – Universal and Quality First Teaching

The CYP has difficulties with their social and emotional mental health and well-being which have been identified by the class teacher (CT). The CYP will have SEMH difficulties identified by setting. They will not usually have had an assessment for SEMH.



Description of the CYP's needs

Quality First Teaching is meeting the CYP needs – Quality Assurance evidence to support this.

The CYP experiences SEMH difficulties which can be managed in a mainstream class within an inclusive setting, with appropriate differentiation of task and teaching style.

They include low level /low frequency difficulties with: following classroom routines, complying with adult direction, responding to social situations, forming relationships with peers, immature social/emotional skills e.g., difficulties with turn-taking, sharing etc., social isolation e.g., tends to play/socialise alone, low level anxiety or frustration.

In all settings, it is important to identify if this is particular to a subject/s, teacher/s to identify accurately the CYP's barriers and level/type of intervention – SENCO can provide, following observation/CYP contribution, the CYPs daily lived experience.

Things to do to support the CYP in the setting and the evidence required to support decision making

CT has completed baseline assessment and re-assessment of CYP needs – SALT LUCID etc.

CT has planned and organised implementation of significant differentiation, relevant to the CYP's areas of need, to promote progress and access to the curriculum, e.g., scaffolding of learning, additional resources. This differentiation has continued for a reasonable period of time e.g., one term.

CT has planned and organised implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been implemented for a reasonable period of time e.g., one term.

CT has completed regular reviews of the CYP's progress in response to both the differentiation and targeted interventions. CT provides evidence that Quality First Teaching is not meeting the needs of the CYP. CT describes in the context of their own class how element 2 funding will promote the progress of the CYP.

CT provides evidence of the involvement of CYP's parents/carers. CYP voice is part of regular review periods. This is paramount in ensuring best outcomes.

Regular review periods essential that small success/progress etc can be acknowledge/praised and built upon.

Quality first teaching and strategies

Tier 1- Quality First Teaching ([link to docs](#))

Wirral CAMHS is a specialist mental health service that works with CYP (0-18 years) with moderate to severe mental health problems. CAMHS offers support to CYP who are experiencing difficulties with the way they are thinking or feeling which are impacting on their mental health.

my mind.org.uk is an NHS website, run by CWP CAMHS. This site has been developed for everyone interested in the mental health and well-being of children and young people across Wirral.

Wirral CAMHS CYP Advice Line

Tel: 0151 488 8453

Mon-Fri 9am-10pm | Weekends 12pm-8pm

Team Email: cwp.telephonemessagesld@nhs.net

24 hour all age Crisis line – 0800 145 6485

Families can get in touch with CAMHS if their CYP's condition worsens on 0300 3033157

Early Help Resource Information Pack

<https://localofferwirral.org/updated-camhs-early-help-resource-information-pack>

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 2 – Early support

The CYP has identified needs which may require additional specific provision available from within setting's resources and/or specialist advice from services available to all children (EP and Outreach Teams).

Description of the CYP's needs

The CYP experiences some SEMH difficulties and is struggling to cope with aspects of the day, despite intervention. There are some incidences of non-compliant and uncooperative behaviour e.g., refusal to work, disrupting the learning of others. It is important to identify if this is particular to a subject/s, teacher/s to inform/identify accurately the CYP's needs and level/type of intervention.

CYP is having some difficulties with self-regulating behaviour.

Behaviour causing a barrier to learning e.g., CYP disengaging, use work avoidance strategies, concentration can be limited.

Lack of socialisation with peers and adults e.g., lack of empathy.

Risk of isolation or becoming socially vulnerable. Failing to follow instructions.

Things to do to support the CYP in the setting and the evidence required to support decision making

The SENCO has organised/undertaken more specialist assessment using tools (preferably standardised) relevant to the CYP's needs.

The SENCO has sought additional advice relevant to the CYP's needs e.g., Inclusion Team drop-in service, SALT, Outreach services (Inclusion Team, Kilgarth/Gilbrook Outreach Team).

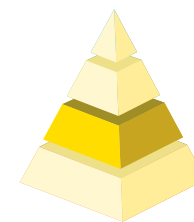
There is significant differentiation, relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a period of time. e.g., two terms. There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs.

Both the differentiation and intervention reflect the specialist advice received and both have been implemented for a reasonable period of time e.g., two terms.

There have been regular reviews of the CYP's progress in response to the above specialist advice, differentiation and intervention.

Pupil voice is part of regular review periods. This is paramount in ensuring best outcomes. Regular review periods essential that small success/progress etc can be acknowledge/praised and built upon.

Where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided.



The Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

SENCO provides evidence of the involvement of CYP's parents/carers.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Access LA SEMH resource bank.

Outreach services can be consulted with for further advice, support, coaching and training - Inclusion Team, Kilgarth Outreach Team, Gilbrook Outreach Team.

Information about CYP's needs/difficulties is shared with relevant staff.

Sharing of advice on successful strategies and setting targets e.g., use of visual supports, developing organisational skills.

Any additional assessments have been carried out to identify any unmet SEN needs.

All staff are using the same de-escalation language/script/techniques to ensure that everything possible is done to stop a CYP reaching crisis point.

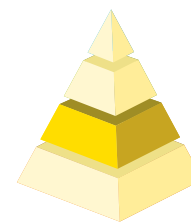
De-escalation plan in place.

Teaching assistance is targeted towards support for access for specific tasks/settings, based on individual targets.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 2 – Early support (cont'd)

The CYP has identified needs which may require additional specific provision available from within setting's resources and/or specialist advice from services available to all children (EP and Outreach Teams).



Description of the CYP's needs

The CYP experiences some SEMH difficulties and is struggling to cope with aspects of the day, despite intervention. There are some incidences of non-compliant and uncooperative behaviour e.g., refusal to work, disrupting the learning of others. It is important to identify if this is particular to a subject/s, teacher/s to inform/identify accurately the CYP's needs and level/type of intervention.

CYP is having some difficulties with self-regulating behaviour.

Behaviour causing a barrier to learning e.g., CYP disengaging, use work avoidance strategies, concentration can be limited.

Lack of socialisation with peers and adults e.g., lack of empathy.

Risk of isolation or becoming socially vulnerable. Failing to follow instructions.

Personalised reward systems covering targeted lessons/activities.

Careful consideration to group dynamics within class/group.

Careful consideration to preferred learning style and motivational levers for the CYP 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, self-esteem group. Group work to be planned and tailored to meet identified need and includes good role models.

Teaching/modelling problem solving skills.

Learning tasks differentiated by task and outcome to meet individual needs.

CYP to be prepared for changes to activities/routines/staffing, where possible.

Access to quiet withdrawal area/safe space when needed.

Strong pastoral support for all CYPs from all staff.

Support/advice from SENCO/Pastoral Lead for CT.

Opportunities for participation in activities that highlight strengths and interests.

Provision of opportunities for meaningful participation e.g., Responsibilities, volunteering.

Individual Education Plan (IEP)/ Individual Behaviour Plan (IBP) with SMART targets, reviewed and updated regularly.

It is vital to allow both the CYP and their parents/carers an input into their individual plan.

Additional adults routinely used to support flexible groupings/targeted small group work.

Additional adults for focused support during unstructured times e.g., lunchtime supervision/ targeted extra- curriculum activities.

Access to visual cues/cards/ timetable if needed.

Access to in-house support base (e.g., Learning Support/ Nurture Base/Group).

Staff access targeted LA training/programmes e.g., Team Teach (Focusing on De-escalation), Restorative Justice training, Youth Justice programmes etc.

Consultation with support services i.e., Inclusion Team, attendance Team (If SEMH needs are impacting upon attendance), Safer Schools Police Officers.

Effective partnership working with parents/carers to support CYP.

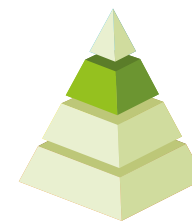
LA DECISION-MAKING PROCESS

The Assess, Plan, Do Review cycle highlights the CYP is not making expected progress despite the provision and has not responded to systematic, structured intervention.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 3 – Targeted specific support Time Limited Additional Units of Funding

The CYP has SEMH identified by appropriately qualified specialist, teachers and other professional. Their SEMH impacts on progress. These support the IPFA application



Description of the CYP's needs

The CYP experiences considerable SEMH difficulties and is struggling to cope with aspects of school, despite intervention.

Increased incidences of non-compliant and uncooperative behaviour e.g., refusal to work, disrupting the learning of others. It is important to identify if this is particular to a subject/s, teacher/s to inform/identify accurately the CYP's needs and level/type of intervention.

CYP is having some difficulties with self-regulating behaviour e.g., aggressive outbursts, high levels of anxiety, mood swings, unpredictable behaviour, which affects relationships. Behaviour causing a barrier to learning e.g., CYP disengaging, may destroy own and others' work, use work avoidance strategies. Concentration or engagement is limited.

Lack of socialisation with peers and adults e.g., lack of empathy, may refuse to communicate for long periods of time, inappropriate social skills.

Risk of isolation or becoming socially vulnerable.

CYP is moving from a specialist base into mainstream and requires short term additional funding, e.g., unstable family circumstances (reviewed termly).

Things to do to support the CYP in the setting and the evidence required to support decision making

There is a continuation of significant differentiation, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., two terms.

There is a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period of time e.g., two terms.

The SENCO has sought further specialist advice e.g. EP drop-in service, SALT, Inclusion Team, Outreach services, where concerns with regard to the CYP's needs and progress have persisted.

Despite the substantial adaptations made, the further provision which is in addition to those which are ordinarily available within the setting's resources, and is not ordinarily available within a mainstream setting, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

The SENCO in consultation with the CT, provides a description, in the context of their own school, how TIME LIMITED FUNDING will promote the progress for the CYP.

SENCO/Base Teacher provides evidence of the involvement of CYP's parents/carers. Risk assessments to identify dangers and need for additional support.

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.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Identified daily support to:

Teach SEMH skills and address behavioural targets on IEP/IBP.

Use of key-working approaches to ensure the CYP has a trusted adult to offer support during vulnerable times.

Personalised reward systems known to all staff in school who have contact with the CYP, implemented consistently across the curriculum.

Time-limited intervention programmes with staff who have knowledge and skills to address specific needs, may include withdrawal.

Nurturing approaches and 'soft' therapeutic approaches.

Use of positive psychological approaches to develop skills.

Regular/daily small group teaching of SEMH skills.

Teaching style adapted to suit CYP's learning style e.g., level/pace/amount of teacher talk reduced, access to practical activities. Personalised timetable introduced in negotiation with the CYP, parents/carers and staff. This may include temporary withdrawal from some activities e.g., assemblies, specific non-core lessons. Withdrawal from the full-setting life should only

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 3 – Targeted specific support (cont'd) Time Limited Additional Units of Funding

The CYP has SEMH identified by appropriately qualified specialist, teachers and other professional. Their SEMH impacts on progress. These support the IPFA application



Description of the CYP's needs

The CYP experiences considerable SEMH difficulties and is struggling to cope with aspects of school, despite intervention.

Increased incidences of non-compliant and uncooperative behaviour e.g., refusal to work, disrupting the learning of others. It is important to identify if this is particular to a subject/s, teacher/s to inform/identify accurately the CYP's needs and level/type of intervention.

CYP is having some difficulties with self-regulating behaviour e.g., aggressive outbursts, high levels of anxiety, mood swings, unpredictable behaviour, which affects relationships. Behaviour causing a barrier to learning e.g., CYP disengaging, may destroy own and others' work, use work avoidance strategies. Concentration or engagement is limited.

Lack of socialisation with peers and adults e.g., lack of empathy, may refuse to communicate for long periods of time, inappropriate social skills.

Risk of isolation or becoming socially vulnerable.

CYP is moving from a specialist base into mainstream and requires short term additional funding, e.g., unstable family circumstances (reviewed termly).

happen as a last resort and only if it is in the best interests of the CYP. Sensory/rest breaks provided to the CYP, if needed Opportunities at KS4 e.g., vocational/college/work placements.

Individualised support to implement recommendations from support services. More formal meetings/ conferences using Restorative Practices, to include parents/carers if appropriate.

Access to alternative support networks e.g., Youth and Play services. Clears plans and pathways for help and referral using and coherent teamwork approach.

All staff are using the same de-escalation language/script/ techniques to ensure that everything possible is done to stop a CYP reaching crisis point.

Access to 1-1 support for re-tracking, mentoring/coaching, motivational approaches, understanding anger etc.

Additional individual support for certain situations in line with risk assessments.

Access to small group support outside mainstream classes e.g., Social Skills, Circle of Friends.

Personalised timetable.

Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies.

Time to discuss, develop and review individualised reward systems and report cards.

Safe space area/facilities to allow for safe regulation of a CYP.

Staff access targeted LA training/programmes e.g., Team Teach (Focusing on De-escalation), Restorative Justice training, Youth Justice programmes etc.

Advice from support services e.g., EP, Primary Mental Health Worker (PMHW), Attendance Team (if attendance is impacted), Inclusion Team, CAMHS.

Support for parents/carers through access to targeted parenting programmes through Early Help.

LA DECISION-MAKING PROCESS

The Assess, Plan, Do Review cycle highlights the CYP is not making expected progress despite the interventions and strategies that have been deployed.

CYP has not responded to systematic, structured interventions already provided.

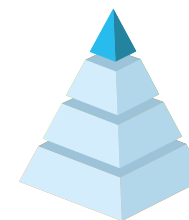
The CYP may need additional funding through an application for a TIME LIMITED FUNDING and may require further assessment to identify needs.

Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for TIME LIMITED FUNDING. This must include evidence of the CYP pupil developmental levels (e.g., setting specific individual progress tracker) and include a costed provision map.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 4 - Targeted specific support EHCNA

The CYP has difficulties with their Social Emotional and Mental Health which: Require further provision, which is in addition to, that which is ordinarily available within the setting's resources and may not be ordinarily available within a mainstream setting. Mainstream Element 1 AWPU + higher% element 2- (formula funding) up to £6,000.



Description of the CYP's needs

The CYP has significant and enduring difficulties with cognition and learning and with accessing a mainstream curriculum.

The CYP continues to make less than expected progress and is operating at a level significantly below age related expectations. There is continuing evidence of an increasing gap between the CYP and their peers in regards to their SEMH needs.

The CYP's difficulties with cognition and learning fall within the moderate range and impact upon all areas of cognition and learning.

The CYP experiences considerable SEMH difficulties and is struggling to cope with their day, despite intervention. The setting is offering provision that is additional to/different from that of their peers and feel direct involvement of support services would be beneficial.

Includes frequent and persistent difficulties with:

- Increased incidences of non-compliant and uncooperative behaviour e.g., refusal to work, disrupting the learning of others.
- self-regulating e.g., aggressive outbursts, sexualized language, high levels of anxiety, mood swings, unpredictable behaviour, which affects relationships.

Things to do to support the CYP in the setting and the evidence required to support decision making

The Assess, Plan, Do and Review cycle has been adhered to (as in Tier 3). Despite the substantial adaptations made and the further provision, which is in addition to those which are ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting (TIME LIMITED FUNDING), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.

SENCO/Base Teacher provides evidence of the involvement of CYP's parents/carers.

The Annual Review has been attended by a LA officer.

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

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Identified individual support across the curriculum in an inclusive mainstream setting.

Daily teaching/modelling of SEMH skills to address behavioural targets on IEP/IBP. Use of key-working approaches to ensure the CYP 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 CYP; implemented consistently across the

curriculum. Time-limited intervention programmes with familiar staff who have knowledge, skills and experience to address CYP's specific needs, may include withdrawal. Opportunities for individual 'checking in' and 'checking out' at beginning and end of session/day to encourage self-monitoring.

Teaching style and tasks are adapted to suit the CYP's learning style e.g., level/pace/amount of teacher talk reduced, access to practical activities.

Personalised timetable introduced in negotiation with CYP, parents/carers and staff. This may include temporary withdrawal from some activities or alternative placement for short periods. Withdrawal from the full-setting life should only happen as a last resort and only if it is in the best interests of the CYP. Alternative curriculum opportunities relevant to the CYP's age e.g., vocational/college/work placements.

Individualised support to implement recommendations from relevant professionals. Support through solution-focused approaches, re-tracking and motivational interviewing.

Where CYP is working below age-related expectations, personalised Maths and English programmes will be required to address gaps in learning associated with SEMH difficulties.

Consideration to access arrangements for internal and external examinations. More formal meetings/ conferences using Restorative Practices, to include parents/carers if appropriate.

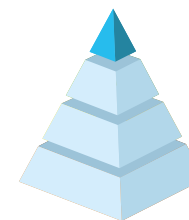
Pastoral Leader and/or SENCO provides support to all staff and takes responsibility for arranging appropriate CPD and quality assuring the learning experience.

Access to 1-1 support within school for tracking, mentoring/coaching, motivational approaches, understanding anger etc.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 4 - Targeted specific support EHCNA (cont'd)

The CYP has difficulties with their Social Emotional and Mental Health which: Require further provision, which is in addition to, that which is ordinarily available within the setting's resources and may not be ordinarily available within a mainstream setting. Mainstream Element 1 AWPU + higher% element 2- (formula funding) up to £6,000.



- behaviour causing a barrier to learning e.g., CYP disengaging, may destroy own and others' work, use work avoidance strategies, concentration very limited.
- lack of socialisation with peers and adults e.g., lack of empathy, victim or perpetrator of bullying may refuse to communicate for long periods of time risk of isolation or becoming socially vulnerable.

The CYP's EMS needs may co-exist with other secondary needs.

Additional individual support in line with risk assessments, including unstructured times.

Access to small group support outside mainstream classes e.g., Circle of Friends. 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.

Safe space area/facilities to allow for safe regulation of a CYP.

Support and advice from specialist teams; EP, Inclusion Team, Youth Offending Team, Outreach Teams (Kilgarth/Gilbrook), Early Help. Staff access targeted LA training/programmes e.g., Team Teach (Focusing on De-escalation), Restorative Justice training, Youth Justice programmes etc.

Advice from support services e.g., EP, Primary Mental Health Worker (PMHW), Safer Schools Police Officers, Inclusion Team, CAMHS. Support for parents/carers through access to targeted parenting programmes through Early Help.

Therapeutic intervention e.g., family therapy/play therapy/art therapy. Multi-agency support to plan and review interventions. Time and appropriate space for joint planning with CYP, parents/carers, staff and other agencies to facilitate 'Team Around the Family' approach.

Access to time-limited Alternative Provision.

If an Alternative Provision is considered, it must:

- Be time limited (12 weeks maximum).
- Evidence that the setting and AP have continued to work together for this duration.

- Be part of a blended package whereby the CYP is accessing the AP beneath the guidance threshold of 18 hours per week (un-registered APs). The setting is responsible for ensuring a CYP has a full 25 hours of education provided to them and be responsible for all safeguarding/welfare responsibilities throughout those times.
- Have a clear intention of support and expected outcomes that will be achieved during the CYPs time at AP.
- Have a clear exit plan in place focusing on a clear re-integration back into their mainstream setting.
- Have regular review points (including CYP and parent/carer contributions) to ensure that the CYP is on track to successfully re-integrate back into their mainstream setting.
- Meet the needs of the CYP e.g., therapeutic.

Consideration to facilitate a 'managed move'.

LA DECISION-MAKING PROCESS

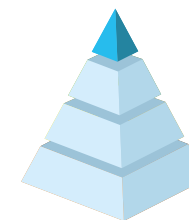
The Assess, Plan, Do Review cycle highlights the CYP is not making expected progress despite the TIME LIMITED FUNDING and may require further/EHCP assessment to identify needs. CYP has not responded to systematic, structured intervention provided by the TIME LIMITED FUNDING. The review process indicates that a higher/different level of support/provision is needed to meet the needs of the CYP and promote progress.

Please refer to the list of evidence that is required at this stage before making an application to LA DECISION-MAKING PROCESS for EHCP funding. This must include evidence of the CYP pupil developmental levels (e.g., setting specific individual progress tracker).

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Tier 4-5 - EHCP specialist Resourced Provision

The CYP has difficulties with cognition and learning which: Require further provision, which is in addition, to that which is ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting. CYP has SEMH and a range of other associated and complex difficulties- behaviour may be challenging.



Description of the CYP's needs

The CYP experiences complex, frequent and persistent SEMH needs.

The CYP's behaviour is unpredictable and dangerous, with intense episodes of emotional and/or challenging behaviour, severely disrupting the learning of self and others.

Extreme risk-taking behaviours e.g., arson, sexualised behaviour, criminal activity, use of weapons, substance misuse.

SEMH needs may be compounded by co-existing difficulties.

The CYP is extremely vulnerable and there are safeguarding issues to consider due to acute levels of mental health concerns and increased risk-taking behaviours.

The CYP has been at risk of exclusion. A multi-agency approach, including educational and non-educational professionals, is essential.

The CYP's behaviour is unpredictable, severely disrupting the learning of others, and is challenging to highly skilled staff.

Specialist support, alongside a multi-agency approach is essential.

Things to do to support the CYP in the setting and the evidence required to support decision making

The Assess, Plan, Do and Review cycle has been adhered to (as in Tier 3). Despite the substantial adaptations made and the further, highly personalised and specialist provision (EHCP), it is evidenced that a higher level of support/provision is needed, than is available within their current placement in order to meet the needs of the CYP and promote progress.

There is evidence of CYP's parents/carers involvement. The Annual Review has been attended by a LA officer.

Specialist assessments e.g., Crisis Response, Educational Psychologist, CAMHS, YOT, Inclusion Team (At Risk of Permanent Exclusion) etc Long term involvement of educational and non- educational professionals possibly as part of statutory assessment/EHC plan.

Multi-agency assessments indicate that needs are highly complex and require a very high level of support.

Risk assessment to consider risks to self and others.

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. Planning for re-integration back into mainstream where possible.

Quality first teaching and strategies

[Link to QFT doc and resources](#)

Identified individual support across the curriculum in an inclusive mainstream setting.

Daily teaching/modelling of SEMH skills to address behavioural targets on IEP/IBP.

Use of key-working approaches to ensure the CYP 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 CYP, implemented consistently across the curriculum.

Time-limited intervention programmes with familiar staff who have knowledge, skills and experience to address CYP's specific needs, may include withdrawal.

Opportunities for individual 'checking in' and 'checking out' at beginning and end of session/day to encourage self-monitoring.

Teaching style and tasks are adapted to suit the CYP's learning style e.g., level/pace/amount of teacher talk reduced, access to practical activities.

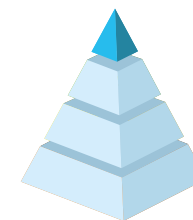
Personalised timetable introduced in negotiation with CYP, parents/carers and staff. This may include temporary withdrawal from some activities or alternative placement for short periods. Withdrawal from the full-setting life should only happen as a last resort and only if it is in the best interests of the CYP.

Alternative curriculum opportunities relevant to the CYP's age e.g., vocational/college/work placements.

Individualised support to implement recommendations from relevant professionals. Support through solution-focused approaches, re-tracking and motivational interviewing.

Where CYP is working below age-related expectations, personalised Maths and English programmes will be required to address gaps in learning associated with SEMH difficulties.

Tier 4-5 - EHCP specialist Resourced Provision (cont'd)



The CYP has difficulties with cognition and learning which: Require further provision, which is in addition, to that which is ordinarily available within the setting's resources and is not ordinarily available within a mainstream setting. CYP has SEMH and a range of other associated and complex difficulties- behaviour may be challenging.

Includes frequent and persistent difficulties, within an SEMH provision, including:

- incidences of non-compliant and uncooperative behaviour which are long-lasting and frequent e.g., refusals to work, defiance, leaving classroom/site.
- self-regulating e.g., aggressive/uninhibited outbursts, high levels of anxiety, mood swings, deteriorating/anti- social relationships.
- behaviour causing significant barrier to learning e.g. destroying own and others' work,
- socialising with peers and adults e.g., lack of empathy.
- victim or perpetrator of bullying.
- at risk of permanent exclusion, isolation or becoming socially vulnerable.
- increasing concerns around mental health e.g., self-harm, irrational fears.
- extreme risk-taking behaviours e.g., arson, sexualised behaviour, criminal activity, use of weapons, substance misuse.

Consideration to access arrangements for internal and external examinations. More formal meetings/ conferences using Restorative Practices, to include parents/carers if appropriate.

Pastoral Leader and/or SENCO provides support to all staff and takes responsibility for arranging appropriate CPD and quality assuring the learning experience. Access to 1-1 support within school for - tracking, mentoring/coaching, motivational approaches, understanding anger etc.

Additional individual support in line with risk assessments, including unstructured times. Access to small group support outside mainstream classes e.g., Circle of Friends.

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. Safe space area/facilities to allow for safe regulation of a CYP. Support and advice from specialist teams; EP, Inclusion Team, Youth Offending Team, Outreach Teams (Kilgarth/ Gilbrook), Early Help

Involvement from Youth Offending Team/ Safer Schools Police Officers /voluntary sector to address needs re: substance misuse, self-harm, sexual exploitation, helping the CYP to plan for the future. Staff access targeted LA training/programmes e.g., Team Teach (Focusing on De-escalation), Restorative Justice training, Youth Justice programmes etc.

Advice from support services e.g., EP, Primary Mental Health Worker (PMHW), Inclusion Team, CAMHS. Support for parents/ carers through access to targeted parenting programmes through Early Help. Therapeutic intervention e.g., counselling/CBT/family therapy/ play therapy/art therapy if appropriate.

Multi-agency support to plan and review interventions. Time and appropriate space for joint planning with CYP, parents/carers, staff and other agencies to facilitate 'Team Around the Family' approach. Access to time-limited Alternative Provision.

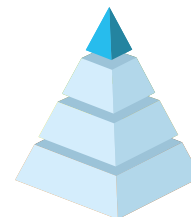
If an Alternative Provision is considered, it must:

- Be time limited (12 weeks maximum).
- Evidence that the setting and AP have continued to work together for this duration.
- Be part of a blended package whereby the CYP is accessing the AP beneath the guidance threshold of 18 hours per week (un-registered APs). The setting is responsible for ensuring a CYP has a full 25 hours of education provided to them and be responsible for all safeguarding/welfare responsibilities throughout those times.
- Have a clear intention of support and expected outcomes that will be achieved during the CYPs time at AP.
- Have a clear exit plan in place focusing on a clear re-integration back into their mainstream setting.
- Have regular review points (including CYP and parent/ carer contributions) to ensure that the CYP is on track to successfully re-integrate back into their mainstream setting.
- Meet the needs of the CYP e.g., therapeutic.

Consideration to facilitate a 'managed move'.

High level of multi-agency involvement.

EHCP Specialist setting, specialist alternative package



Description of the CYP's needs

The CYP experiences complex, frequent and persistent SEMH needs.

The CYP's behaviour is unpredictable and dangerous, with intense episodes of emotional and/or challenging behaviour, severely disrupting the learning of self and others.

SEMH needs may be compounded by co-existing difficulties.

The CYP is extremely vulnerable and there are safeguarding issues to consider due to acute levels of mental health concerns and increased risk-taking behaviours.

The CYP is at risk of exclusion.

A multi-agency approach, including educational and non-educational professionals, is essential.

Things to do to support the CYP in the setting and the evidence required to support decision making

Specialist assessments e.g., by Educational Psychologist, CAMHS, Forensic Psychologists, YOT etc.

Long term involvement of educational and non-educational professionals as part of statutory assessment / Annual Review/ EHC plan. Regular risk assessments to consider risks to self and others. Completion of assessments and/or Annual review for consideration at SENAP and/or Joint Panel. All professionals agree that the CYP 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.

Quality first teaching and strategies

All of the above requires additional /enhanced levels of highly skilled staff to re-engage and motivate the CYP.

The CYP is struggling to cope in Wirral's specialist provision, despite specialist support and high staffing ratios.

The CYP requires a higher ratio of staff support within specialist provision due to high level of risk and vulnerability presented by the CYP.

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.

NB This CYP may be returning from an Out of Area specialist placement.

Out of area independent specialist provider

All of the above but the CYP has such complex needs that their needs cannot be met in a school within Wirral, i.e., they attend a non-maintained educational or residential placement (Out of Area). This may also include support for health and social care issues.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Checklist

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

TIER 1		EVIDENCED?
We have ensured that QFT strategies are in place for all CYP.		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention. The outcomes of the reviews have been shared with the CYP/families/carers and staff working with the CYP.
We have completed baseline assessments and re-assessment of CYP needs using the Assess, Plan, Do, Review cycle identifying strengths and interests as well as needs.		We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.
We have planned and organised the implementation of adaptive teaching strategies/reasonable adjustments, relevant to the CYP's areas of need, to promote progress and access to the curriculum. These have been embedded for a reasonable period of time.		We have ensured that there is a high- level of pastoral support in place to support the CYP.
We have planned and organised the implementation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. These have been embedded for a reasonable period of time.		We can show that Element 2 funding has been fully utilised through a costed provision map.
We have completed regular reviews of the CYP's progress in response to both the adaptive teaching strategies and the targeted interventions (Assess, Plan, Do, Review cycle).		We have involved the CYP, parents/carers and other stakeholders in this process.
We have involved the CYP and parents/carers in this process.		
TIER 2		EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.
We have organised/undertaken additional assessments out to identify any unmet SEN needs and taken appropriate action to address these needs.		We can evidence a continuation of significant adaptive teaching strategies, relevant to the CYP's areas of need, to promote progress and access to the curriculum. This has continued for a reasonable period e.g., two terms.
We have attended a drop-in session with an EP or Inclusion Team to discuss the CYP or sought advice from an Outreach service through a referral e.g., Inclusion Team, Kilgarth, Gilbrook.		We can evidence a continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period e.g., two terms.
We have planned and organised the implementation of significant adaptive teaching strategies, relevant to the CYP's need, to promote progress and access to the curriculum. This has continued for a reasonable period of time e.g., one term.		We have sought further specialist advice e.g. EP, Inclusion Team, Outreach services e.g., Kilgarth/Gilbrook.
We have planned and organised the continuation of targeted, evidence based and well-founded interventions, relevant to the CYP's needs. This has continued for a reasonable period of time e.g., one term.		We can show that the adaptive teaching strategies and interventions reflect the specialist advice received and both have been implemented for a reasonable period e.g., two terms.
		We have held regular reviews of the CYP's progress in response to the above specialist advice, adaptive teaching strategies and intervention.

SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS

Checklist (cont'd)

The following checklist has been designed to support you through the tiers of the Graduated Approach. You can use it as a guide to evidence the steps you have taken to support the CYP and direct towards any evidence you may wish to reference.

We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding, it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.		We have created additional risk assessments/plans e.g., IBP/De-escalation to aid regulation.	
We have organised/undertaken more specialised recognised assessments, over a reasonable period of time and from a variety of sources.		We have involved the CYP, parents/carers and other stakeholders in this process.	
We have created additional risk assessments/plans e.g., IBP/De-escalation to aid regulation.		We have sufficient evidence to show that an EHCNA is required.	
We have ensured that there is a high- level of pastoral support in place to support the CYP.			
We have involved the CYP, parents/carers and other stakeholders in this process.			
TIER 4	EVIDENCED?	TIER 4-5	EVIDENCED?
We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.		We have ensured that QFT and additional strategies, relevant to the needs of the CYP, have been implemented.	
We can show that the Assess, Plan, Do and Review cycle has been adhered to and despite the substantial adaptations made, the further provision, which is in addition to that which is ordinarily available within the setting's resources, or through any time limited funding (IPFA), it is evidenced that a higher level of support/provision is needed to meet the needs of the CYP and promote progress.		We have organised/undertaken specialised assessments relevant to characteristics of medical condition, physical difficulties and/or sensory needs.	
We have sought advice from support services e.g., EP, Primary Mental Health Worker (PMHW), Safer Schools Police Officers, Inclusion Team, CAMHS.		We have ongoing involvement of educational and non-educational professionals as part of EHC Plan.	
We have ensured that there is a high- level of pastoral support in place to support the CYP.		We have organised/undertaken specialist assessments as part of Annual Review processes submitted to EHCP Panel.	
		We have organised a specialist teacher to undertake detailed diagnostic assessments in order to create individualised skill development programme for the CYP. This personalised plan/timetable has been put in place.	
		We have created additional risk assessments/plans e.g., IBP/De-escalation to aid regulation.	
		We have tracked and monitored progress in skill acquisition.	
		We are liaising closely with a range of professionals/support services.	
		We have involved the CYP, parents/carers and other stakeholders	
		We have held an Annual Review, and this has been attended by an EHCP Review Officer.	
		We have sufficient evidence to show that a more specialist provision is required to promote the CYP's progress.	

GRADUATED APPROACH RESOURCES AND TRAINING

This bank of resources and training has been put together in order to provide a quick, accessible reference to support and help that is available. It is by no means exhaustive in terms of provision that is available as we know many brilliant SEND resources and best practice is being developed all the time.

However, it may serve as a 'go to' in the first instance of assessment and planning interventions and extra support for a child or young person. As the educational professional, you will know this CYP and their specific needs and will be able to select resources based on the need you are trying to meet or the target you are helping the CYP to reach.

The resources are organised into the 4 areas of need. However, we know there is likely to be crossover of resources that can be used for more than one need and the CYP may have a variety of needs presented in different ways.

Using your own professional judgment, use this resource to help you support the CYP in the best way for them.

This bank of resources will be reviewed yearly to allow for changes to be made and other resources to be added. If you know of an excellent resource that has worked in your practice, please email (email) for it to be reviewed and added to the bank.

Anyone who does anything
to help a child in his life is a
hero to me

FRED ROGERS



GRADUATED APPROACH RESOURCES AND TRAINING

Cognition and Learning Resources

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Accelerated Reader	no	yes	Reading	no	yes	yes	All	Various costing models depending on product- school and teacher use.	A daily reading programme for all levels with teacher assessment tool built in. Endorsed and researched by the EEF, evidence and research based.
Access Reading Test (ART)	no	yes	Reading	no	yes	yes	Upper KS2 Secondary	Various costing around £22.50 for 10 tests. Suitable for education practitioners.	Base line data tool for planning interventions - start in year 7 to assess after transition- Evidence based and part of the Hodder Education range of products.
Boostingreading@primary (BR@P) and boostingreading@secondary (BR@S)	no	yes	Reading	no	yes	no	Primary Secondary	Various costing depending on product from full kits to individual resources. Training for practitioners is available for various programs.	Boostingreading@primary and boostingreading@secondary are proven good practice interventions. Each year pupils consistently make gains of over four times the expected rate of progress. On average pupils make Reading Age gains of over 12 months during the 10-week period of intervention. We have a growing body of evidence that highlights the efficacy of Boosting Reading.
British Picture Vocabulary Scale (BPVS)	no	yes	Reading	no	yes	yes	All	Various costing for range of assessment products. Suitable for education practitioners.	Assessment of vocabulary using images for the CYP to select the correct one and demonstrate level of understanding. Designed with ages 3-16 in mind. Part of the GL assessment product range.
Cognitive Abilities Test (CAT4)	no	yes	Cognitive	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	Reasoning assessment - measuring verbal, non-verbal quotative and special reasoning against key indicators for assessment. Part of the GL assessment product range.
Comprehensive Test of Phonological Processing - Second Edition (CTOPP-2)	no	yes	Phonological awareness	no	yes	yes	Primary - 25 and 11 months	Various costing for range of assessment products and formats including full kits in print and digital format. Suitable for education practitioners.	Phonological awareness and recall- reading fluency and phoneme rapid recognition - designed for ages 4- 24 and 11 months. From the Pearson range of assessment products.
Dyslexia Portfolio	no	yes	Dyslexia Screening	yes	yes	yes	Primary Secondary	At time of writing, Full set of resources was approx. £ 280- Guidance included for educational practitioner.	Follow up assessment broken down into specific skills -Online report created gives overview for teachers and parents - part of the GL assessment range of products.
Dyslexia Screener	no	yes	Dyslexia Screening	no	yes	yes	Primary Secondary	At time of writing, Full set of resources was approx. £ 280- Guidance included for educational practitioner.	Initial dyslexia screening tool for first concerns - also includes dyslexia handbook and further guidance on interventions and planning. Part of the GL Assessment range of products.

GRADUATED APPROACH RESOURCES AND TRAINING

Cognition and Learning Resources

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Indirect Dyslexia Learning (IDL)	no	yes	Dyslexia	no	yes	no	Primary Secondary	Subscription options available with reductions on prices for schools less than 100. Programmes start from £249.	Cloud based intervention allowing children to independently work through a program to increase reading age in accelerated time frame. Based on research and evidence-based practice.
Kerboodle	no	yes	Curriculum	yes	yes	no	EYFS Primary Secondary	Various resources across a range of educational subjects. A local educational consultant is available to support setting up.	Differentiated resources for use alongside various curriculum subjects. Resources include videos and animations to support learning in a specific curriculum context. Learning can be tracked and assessed, homework can be set and there is a wide range of resources.
LADS Plus	no	yes	Dyslexia Screening for 15+	yes	yes	yes	Ages 15+	Costing from £300 for a year licence- Carried out by educational practitioner	A digital assessment to screen for dyslexia for 15+
Lexia reading core 5	no	yes	Dyslexia	no	yes	no	Primary Secondary	Various Costing across a range of models depending on product or group size.	Primary and secondary program available research and evidence based. An online resource with printable offline resources designed to target the specific reading skills.
Lucid - Rapid (part of the 'Lucid' suite of assessments for specific learning difficulties)	no	yes	Dyslexia Screening	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	Rapid full class assessment for dyslexia- identify pupils in a cohort who may need further investigation and support - rapid test taking 15 x 3 short assessments- phonological processing, working memory and verbal-visual integration memory (4-7) or phonic decoding (8+).
Lucid - Recall	no	no	cognitive	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	Evaluate the speed and efficiency of working memory and processing- aged 7-16.
Maths Watch	no	no	Maths	yes	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	Supports cognitive retrieval a practice of mathematical skills. Online program that can be used in school or logged into at home. Includes GSCE practice skills.
Method Maths	no	yes	Maths	yes	yes	yes	Primary Secondary	Subscription service that also has individual subscriptions available for parent carers and home-schooling options. No training needed.	This online resource provides exam practice for Key stage 2 as well as Secondary exams through the use of online examination style questions. It can provide feedback which teachers would use to determine next steps and any support or interventions needed.

GRADUATED APPROACH RESOURCES AND TRAINING

Cognition and Learning Resources

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
My Maths	no	yes	Maths	yes	yes	yes	EYFS Primary Secondary	Subscription service reviewed annually- at the time of writing Primary costing £392 and secondary £695 both +VAT. Used by educational practitioner.	Online learning platform that supports cognitive retrieval and practice of mathematical concepts. Can be used across school and home and has full curriculum coverage. Has been evaluated by Oxford Impact and research proves the time saving element for classroom practice allowing teachers to focus more on teaching.
Nessy	no	yes	Dyslexia Reading	yes	yes	yes	All	Various costing depending on subscription and some individual products - Used by educational practitioner.	Nessy uses 'the science of reading' to assess specific gaps in reading knowledge and address them in bitesize chunks and activities tailored to the learning. Nessy can track progress of a learner and can be accessed at home to support fluid learning and parental engagement.
Nessy - Dyslexia Quest screening	no	yes	Dyslexia	yes	yes	yes	Primary Secondary	Various costing depending on subscription and some individual products - Used by educational practitioner.	Dyslexia screening and accompanying programme to support the development of reading - can be used for none dyslexia support in working memory and recall.
New Group Reading Test (NGRT)	no	yes	Reading	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	A termly assessment which has standardised scores that can be used to measure up against key indicators and identify needs and interventions.
New Group Spelling Test (NGST)	no	yes	Spelling	no	yes	yes	Ages 7-14+	Various costing for range of assessment products. Suitable for education practitioners.	A termly assessment which has standardised scores that can be used to measure up against key indicators and identify needs and interventions.
New Salford Sentence Reading Test	no	yes	Reading Assessment	no	yes	yes	Primary Secondary	At time of writing, full kit £110.	Reading assessment - baseline data to be recorded and monitored for progress for children who present with reading difficulties - to inform interventions and future planning - suitable for ages 6+.
Number Shark	no	yes	Maths	no	yes	no	EYFS Primary Secondary	Various subscription costing based on number of students. At time of writing, up to 20 primary students £340. Can be done by teachers and there is a parent support section as well.	Games designed for learning and cognitive retrieval to enhance memory and skills in number and vocabulary.

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Cognition and Learning Resources

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Phonological Assessment Battery (PHAB)	no	yes	Reading Assessment	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	This comprehensive battery of tests accurately identifies children who have significant phonological difficulties and need additional help to process sounds in spoken language. Age range 5- 14 - part of the GL Assessment range of products.
PM Benchmark Reading Assessment	no	yes	Reading	no	yes	yes	Primary	Various costing for range of assessment products. Suitable for education practitioners. Training needed and can be purchased in sessions.	Packs of fiction and non-fiction texts of different levels to assess baseline data in reading levels and comprehension.
Raven Coloured Progressive Matrices	no	yes	Cognitive	no	yes	yes	Primary	Various costing for range of assessment products. Suitable for education practitioners.	Puzzles which increase in difficulty to assess non-verbal reasoning skills. Part of the Pearson range of products.
Read Write Inc by Ruth Miskin and associated CPD	no	yes	Reading	yes	yes	yes	All	Breakdown of costing for resources can be found - https://www.ruthmiskin.com/programmes/phonics/cost-of-resources/	Phonics learning specifically designed to systematically work through the gaps on knowledge with stories that are engaging. CPD alongside this on the use of the programme to support students in learning phonics, blending, irregular sounds and reading.
Toe by Toe	no	yes	Reading	no	yes	yes	Primary	No training needed. At time of writing, books for £20-£30.	Systematic reading program for identified CYP who are struggling with reading skills - age 7+ - can be used by parents at home alongside schoolwork.
Verbal Reasoning and Non-Verbal Reasoning	no	yes	Cognitive	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	Verbal reasoning assessment covering logical reasoning. Can be done individual assessment or in groups- ages 8-13.
White Rose Maths	no	yes	Maths	no	yes	yes	EYFS Primary Secondary	CPD can be helpful for this program - suitable for educational practitioners. Wide range of costing from individual resources at £2-5 to full packages £70+.	White Rose Maths offers a wide range of resources including full curriculum coverage and long-term overviews, as well as individual lesson structures that can also be adapted. White Rose also offers CPD in maths teaching methodology and is a very popular resource to break down concepts and provide learning that can be structured in a way to suite all children.

GRADUATED APPROACH RESOURCES AND TRAINING

Cognition and Learning Resources

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Wide Range Achievement Test 4 (WRAT4)	no	yes	Cognitive	no	yes	yes	Primary Secondary	Suitable for educational practitioners. Costing from £88 for full testing and reporting package. Separate items also available.	Comprehensive academic baseline data including, word reading, reading comprehension, Spelling, Math computation, reading composite and a sentence comprehension subtest
York Assessment of Reading for Comprehension (YARC)	no	yes	Reading	no	yes	yes	Primary Secondary	Various costing for range of assessment products. Suitable for education practitioners.	A detailed reading assessment providing a deep analysis of a range of reading skills. Parallel assessments available to measure impacts of intervention from the data analysis.
Teach starter	no	yes	Working Memory	yes	yes	no	EYFS Primary	Suitable for educational practitioners. Individual sign can be free for basic use and then £3.25 for the essential package or £4.92 for plus package of resources. School sign up pricing also available.	Explanation, advice and resources based around developing working memory in children. Other blogs and advice available through this site for teachers.
Black sheep press- developing auditory and verbal memory skills	no	yes	Working Memory	yes	yes	no	EYFS Primary	No training needed. At time of writing, this product £44.10.	This resource is one of many that Black Sheep press have developed to assist with memory training for auditory and verbal memory skills.

GRADUATED APPROACH RESOURCES AND TRAINING

Communication and Interaction

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Widget Online Creator	no	yes	Speech and Language	no	yes	no	All	A 21-day free trial is available with various costing plans after.	A creator tool that allows specific tailored creation of symbols that children may need to enhance communication and learning in an environment. The design element means you can create symbols and visual guides specific to the need of the child i.e., bedtime routine or classroom routine
Deaf-Friendly education and training	no	yes	Hearing Impairment	yes	yes	no	All	No costing- Charity donations welcome.	Resources to support educational professionals with advice and learning on deaf-friendly teaching and learning.
Mr. Goodguess	no	yes	Inference	no	yes	no	EYFS Primary Secondary	£40 for 5 downloads on different PC's and laptops. No training needed.	A series of pictures and narratives that are designed to support the development of using inference skills to decode situations.
Universally Speaking - The Communication Trust	no	yes	Communication and Interaction	no	yes	yes	Primary Secondary	This resource is free, some others have a charge – this resource may suggest others that are needed based on any assessments. No training needed.	A series of booklets detailing the appropriate skills based on age development.
Welcome screening	no	yes	Communication and Interaction	no	yes	yes	Primary Secondary	Various costings for the different resources and online-print publications- info can be found on the site. No training needed.	Toolkit assessment which enables users to identify speech and language difficulties. Both toolkits come with a Big Book Ideas to provide intervention support.
Black Sheep Resources - Concepts in Pictures, Language in Pictures etc.	no	yes	Language and Reading	yes	yes	no	EYFS Primary Secondary	Various costings for the products available depending on need and type of resource. No Training needed.	Online and printable resources for specific language and communication targets- language development, grammar and vocab as well as sentence construction and sound production. Can be used by teachers, parents and speech and language therapists.
Talk Boost (KS1 and KS2) and Early Talk Boost	no	yes	Communication and Interaction	no	yes	yes	EYFS Primary Secondary	Prices range depending on the interventions. Resources available are categorised and can be used by practitioners and parent/carers.	From Speech and Language UK, a bank of resources for a wide age range. Including the Talk boost interventions, Early Talkers kit and the progression kits.

GRADUATED APPROACH RESOURCES AND TRAINING

Communication and Interaction

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Talkingpartners@primary and Talkingpartners@secondary	no	yes	Communication and Interaction	yes	yes	no	EYFS Primary Secondary	No training required. Range of resources for purchase ranging from £15 to £40+ for full kits.	Program designed by Clare Reed for Education works which included various sub programmes including one for family talking and support. In programme research on the effect and impact has been done in published reports such as the Oracy APPG report.
The Girl With The Curly Hair	no	yes	Communication and Interaction	yes	yes	no	all	Various costing depending on product and resources used including CPD.	The Curly Hair Project was founded by Alis Rowe who was diagnosed with Aspergers syndrome in later life. It is an organisation filled with resources to support those with ASD and their families to understand life on the spectrum. Resources include podcasts, books and comic strips. There is also CPD for healthcare and educational professionals as well as support and advice for families. recommended by the Healthy London Partnership, Alis has used her own lived experience to educate and support others.

GRADUATED APPROACH RESOURCES AND TRAINING

Physical and Sensory

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Clearvision	no	yes	Visual Impairment	yes	yes	no	All	Free for families, schools and small organisations. Libraries and Sensory support services pay a subscription.	A library lending postal service for books for children and adults that are sensory or braille.
CustomEyes	no	yes	Visual Impairment	yes	yes	no	All	Membership is free with some books ordered at various price ranges.	Custom made large print books that can be tailored to need. Meaning children can still enjoy a book alongside their peers with adjustments to suit their need.
Deaf-Friendly education and training	no	yes	Hearing Impairment	yes	yes	no	All	No costing- Charity donations welcome	Resources to support educational professionals with advice and learning on deaf-friendly teaching and learning.
Detailed Assessment of Speed of Handwriting	no	yes	Fine Motor/ Handwriting	no	yes	yes	Ages 17-25	Complete Kit- £172.17. Carried out by educational practitioners	Assessment of handwriting speed for ages 17-25 in further education.
How to create good listening conditions	no	yes	Hearing Impairment	yes	yes	no	All	No costing- Charity donations welcome.	The National Deaf Children's society advice pages- further information outlined across this website for schools and families.
Positive Eye – Resources	no	yes	Visual Impairment	no	yes	no	All	Resources are free.	Practical resources offering advice and tips on how to deliver and develop the curriculum. The resources include reflection documents for practitioners to think about their classroom setting and develop their current offer.
Motor skills United	no	yes	Fine and Gross Motor Skills	no	yes	no	All	At time of writing, £ 65.99 for the complete set of activities and instructions.	Occupational therapy program with activities designed for specific fine and gross motor interventions and targets. Created by Stockport Children's Occupational Therapy Service.
Seeing Ear	no	yes	Visual Impairment	yes	yes	no	All	Free service to access books.	A free online library with books available in different formats and Braille.
Write Dance	no	yes	Handwriting	no	yes	no	Primary	At time of writing- paperback version of the book resource £37.99.	A handwriting program that utilises music alongside fine motor handwriting practice and development.

GRADUATED APPROACH RESOURCES AND TRAINING

Physical and Sensory

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Well-At-School	no	yes	Help and Advice	yes	yes	no	All	Free website resources and training with some paid training.	An online resource providing support around health and mental health support in schools. Support for parents around provision as well as teachers to enact that provision. CPD links available to around key topics such as trauma and depression in CYP.
PDNET Standards-Children and young people with Physical Disability in Schools	no	yes	To support Children and young people with a physical disability in schools - advice and standards for schools and settings	yes	yes	no	All	None	PDNET is a long-established national organisation that provides professionals in education with support in promoting positive outcomes for children and young people with a physical disability.

GRADUATED APPROACH RESOURCES AND TRAINING

Social, Emotional and Mental Health

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Family Toolbox	yes	yes	no	yes	yes	no	All	No costing. No training needed.	A collection of helpful resources to support parents and families with challenging situations that may arise in family life. Includes outside services and other organisations that can provide support and help.
Zillo	yes	yes	no	yes	no	no	All	No costing. No training needed.	A website resource for CYP detailing activities and support available for CYP in Wirral. The website was created by CYP and updated by CYP.
Wirral Sandbox	yes	no	no	yes	yes	yes	All	No costing. No training needed.	Wirral's safeguarding risk assessment tool utilising resources and Wirral council services to support and guide through safeguarding issues ensuring the child or young person receives the right help at the right time.
Beacon behaviour support	no	yes	SEND information	yes	yes	no	All	No training needed- costing for various resources and training	Support for schools and parents that is free to access. From theory outlined in easy to understand ways, to parent guidelines and general SEND support.
The Boxall Profile	no	yes	SEMH	no	yes	yes	Primary Secondary 16-18	Training needed to apply the principles of the Boxall Profile- available on the website with a arrange of resources. Costing varied depending on resource.	A rounded assessment giving a clear picture of children's strengths and any weaknesses which may be causing difficulties in their learning and emotional regulation.
Books about managing emotions - 'The Huge Bag of Worries' (Virginia Ironside); 'A Volcano in My Tummy' (E Whitehouse and W Pudney); 'The Red Beast' (K Al-Ghani) and 'How are you feeling today?' (Molly Potter)	no	yes	SEMH	yes	yes	no	EYFS Primary	Various costing for range of recommended books.	Books related to feeling and emotions with useful stories that can be shared as a class, at home or individually to support and encourage children to identify and discuss their feelings. All books can be purchased individually from amazon and are still available.

GRADUATED APPROACH RESOURCES AND TRAINING

Social, Emotional and Mental Health

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
Mental Health and behaviour in schools	DfE	yes	SEMH	yes	yes	no	All	Free government guidance I supporting Mental health in schools	The DfE document relating advice and guidance for school staff on supporting children with SEMH needs. Parents may find useful as a point of reference for school offer and support.
Nurture groups - 'Beyond the Boxall Profile: Strategies and Resources (Revised)'	no	yes	SEMH	no	yes	no	Primary	At time of writing, £20 for the book.	This book offers resources and practical ideas based on the Boxall Profile.
Starving the anxiety gremlin- and other related books	no	yes	SEMH	yes	yes	no	Secondary	At the time of writing, books are around £13.99-£15.99 over a range of titles.	Written by Kate Collins-Donnelly, this book and others in the series aims to support children in coping with extreme emotions of anxiety and anger. This is a cognitive behavioural therapy workbook and can be used alongside others in the series- ages 10+.
Next Step Cards	yes	yes	Mental Health Support	yes	yes	no		Costing is partially funded as part of the Trust's Footprint- more information can be found on the website. Training is needed and can be booked through the website and dates are added throughout the year.	Next step is designed to support anyone who cares for children and young people. Whether you're a parent, teacher, mental health professional or commissioner of health and social care services, Next Step is a tool that helps young people to communicate on their own terms, in their own environment. Created by both young people and mental health experts, the colourful toolkit provides the perfect platform to enable safe and structured conversations with young people who may be struggling with their emotional health and wellbeing. Evidence and research based. Pre-training learning can be found - https://www.cwp.nhs.uk/application/files/3316/5548/8892/Next-Step-Pre-Learning-Document.pdf
TLC- The Local Carers Network	no	yes	Advice and support on SEND for Parent Carers	yes	no	no	All	Charity based organisation.	A free information, advice and support charity for children and young people and their families.

Social, Emotional and Mental Health

Resource Name Cognitive and Learning	Council	External	Specific learning design	Further advice/Can be used by/ for Parent/Carer	School use	Assessment use	Stage	Costing and Training needs	Notes
UK Trauma Council - Critical Incidents and Educational Communities	no	yes	Advice and support for critical incidents that are potentially traumatic	yes	yes	no	All	None	Resources to support principles in responding to a critical incident in educational settings.
Neurodiversity Celebration Week toolkit	no	yes	Primary/ Secondary/ FE Toolkit	no	yes	no	Primary Secondary FE	None	This toolkit can be used to increase the understanding of neurodiversity across your setting/community.

GRADUATED APPROACH RESOURCES AND TRAINING

Training

Name of training	Training Provider	Specific Training Outcomes	Who is this training for?	Further information and notes
Ambitious About Inclusion	Whole School SEND Approach by NASEN	Whole school inclusive practice	All Education Staff	A comprehensive training program around the principles of SEND education in inclusive practice as part of the whole schools SEND approach. This training is broken down into multiple pathways suitable for a range of roles across an education setting. Funded by the Department for Education, these online modules address some of the most common SEND training needs across the education sector. They aim to develop a whole school approach to inclusion and include differentiated learning for all workforce roles. This training is online and can be done in sections as part of individual CPD or a full team reflection. Can be found online at https://www.wholeschoolsend.org.uk/ambitious-about-inclusion-online-learning
Making Sense of Autism (MSA)	Autism Education Trust	To develop a greater understanding of children with Autism.	Staff working with CYP with Autism	A 2-hour module for staff working with autistic children in schools. Booking through autismsoccomm@wirral.gov.uk For more information see flyers or visit the AET website Autismeducationtrust.org.uk
Good Autism Practice (GAP)	Autism Education Trust	To develop a greater understanding of children with Autism and how to support them within your setting.	Staff working with CYP with Autism	Delivered over 2 sessions of 3 hours each- both need to be completed to gain certificate of completion. Booking through autismsoccomm@wirral.gov.uk For more information see flyers or visit the AET website Autismeducationtrust.org.uk
Anxiety Module	Autism Education Trust	To develop a greater understanding of children with Autism and how to support them within your setting.	Staff working with CYP with Autism	Open dates throughout the year for both Level 1 and 2. Whole-setting training days can be booked by contacting the Inclusion Team. Email: daniellesmith2@wirral.gov.uk
Restorative Justice Training	Wirral YOT/ Wirral Inclusion Team	To support settings in developing Restorative Justice approaches when managing conflict resolution.	All staff	Whole-setting training days can be booked by contacting YOT or the Inclusion Team. Email: kathygill@wirral.gov.uk (YOT) daniellesmith2@wirral.gov.uk (Inclusion Team) samanthagonsalvespayne@wirral.gov.uk (Inclusion Team)
SENCO Training offer	Wirral- Chester University	To ensure SENCOs have access to targeted training and continually improving their knowledge and practices.	SENDCOs	Dates throughout the year of targeted training from Chester University as part of the SENCO Summit. Email: annadollard1@wirral.gov.uk
SENCO Information Exchanges	Wirral Council	To ensure that SENCOs have the opportunity to both share and receive new information/updates.	SENDCOs	The SENDCO information exchanges are in place termly to facilitate a way to share any new information, raise any issues and share best practice. AM and PM sessions are in place to facilitate attendance. All sessions held at Birkenhead town hall. Email: sallytittle@wirral.gov.uk
Level 2 Understanding the needs of babies and young children with SEND.	EYFS Wirral Council	To understand the needs of babies and young children with SEND.	This is for all practitioners in day nurseries.	For further information: To book on via the Early Years Platform on this https://wirralequality.co.uk/ or contact eysend@wirral.gov.uk for more information.
Level 3 Accredited Award for SENDCOs in settings and Foundation Stage in schools.	EYFS Wirral Council	To gain a Level 3 Accredited Award.	This is for Early Years SENDCOs in settings and foundation stage leads/ SENDCOs in schools	For further information: To book on via the Early Years Platform on this https://wirralequality.co.uk/ or contact eysend@wirral.gov.uk for more information.

GRADUATED APPROACH RESOURCES AND TRAINING

Training

Name of training	Training Provider	Specific Training Outcomes	Who is this training for?	Further information and notes
New to the role of SENDCo termly for settings and Foundation stage in schools	EYFS Wirral Council	To explore the SENCO role within the Foundation stage.	This is for SENDCOs/ managers in settings and schools.	This training is also open if anyone would like to recap For further information: To book on via the Early Years Platform on this https://wirralequality.co.uk/ or contact eysend@wirral.gov.uk for more information.
New to the role of SENDCo for childminders	EYFS Wirral Council	To explore the SENCO role.	EYFS childminders.	Similar to the previous training but some adaptations suitable for childminders
Schools Professional Online Training- Spot Training around eating Disorders	Beat Eating Disorders	Training to support school staff in increasing awareness and knowledge of eating disorders in primary school age children - how to spot those early signs which may become apparent in primary age children.	All staff.	A series of webinars as well as an online board that questions can be posted and answered. Available at: https://www.beateatingdisorders.org.uk/training-events/find-training/spot-online-training-for-schools/
MindED - various training offer around mental health	Mind ED	Various training around different mental health issues.	Education and Healthcare staff working with children and young people.	Training and further resources available at https://www.minded.org.uk/
Well at School	Well at School	A range of courses available from understanding autism to low moods.	Education and healthcare staff working with CYP.	Training and further resources at https://www.wellatschool.org/resources/training
White Rose Maths- Various CPD	White Rose Maths	Maths mastery and teaching maths- curriculum support and CPD.	Educational practitioners across the full range of key stages.	Training and resources available to support. https://whiterosemaths.com/professional-development?page=1
Trauma informed parenting	Trauma Informed Parenting- TIP	How to support CYP living with the effects of trauma.	Parents, carers, teachers and anyone working or living with children and young people with trauma.	Designed by Suzanne Scott- various training packages and workshops are available at https://www.traumainformedparenting.uk/

Other Resources and Support

Council Resource	Resource provision
Local Offer Wirral	The Local Offer sets out, in one place, information about the offer you would expect to be available across Education, Health and Social Care for children and young people who have Special Educational needs or a Disability ages birth to 25.
Wirral Sandbox	Wirral Sandbox is an expanding risk assessment and service directory tool for anyone working with young people. It can be used to help inform risk assessment, help you to find the correct service to help you to support a young person, provide you with helpful guidance, advice, tips, resources to help you to support young people at the earliest possible stage as well as keeping you up to date on the latest from the wide network of services for young people in Wirral.
Zillo	ZILLO is a website for young people living in Wirral, Merseyside. It is a website for young people to come to get the lowdown on the latest events, arts, culture, news and expert health and wellbeing advice. At ZILLO we want to promote the very best of Wirral, its young people and culture and through our Young Reporters media and journalism project providing young people with valuable real-life experiences of writing and creating content for the web. ZILLO Young Reporters is open to all Wirral Young People aged 11-18 and up to 25 for young people with Special Educational Needs and Disabilities (SEND).
Family Toolbox	A collection of helpful resources for family life. Family toolbox also has a directory of available help and support for families. From bath time routines to SEND support, Family toolbox is a comprehensive range of support for families on Wirral.
ADHD Foundation	The ADHD Foundation is the UK's leading neurodiversity charity, offering a strength-based, lifespan service for the 1 in 5 of us who live with ADHD, Autism, Dyslexia, DCD, Dyscalculia, OCD, Tourette's Syndrome and more.
ADDvanced Solutions	ADDvanced Solutions Community Network encourages, equips and empowers children, young people and their families living with neurodevelopmental conditions, learning difficulties and associated mental health needs. Our engaging, community-based, learning, coaching and mentoring programmes will help you and your family to better recognise, understand and meet your individual needs, enabling you to manage the day-to-day challenges.
Crea8ing Community	Crea8ing Community offers a wide range of training programmes to share techniques, skills and knowledge to support parent and carers to raise healthy, happy children with strong emotional well-being and resilience. Support for both Parent – carer and young people.
Next Chapter	The role is to help you focus upon your strengths and what you can control and achieve, enabling you to put solid foundations in place, in order to create the life that you want, with the tools and resources to confidently build it. This means, that we focus upon the basics, meeting you where you are at and walking the journey with you, until you feel confident to try it alone.
The Positivitree	The Positivitree is a charity and mental wellbeing organisation on a mission to empower parents and carers of children with additional health or care needs with self-care tools and experiences that improve wellbeing. The main focus of the organisation is on the wellbeing and self-care of the parent/carer community by providing useful events and activities.
The Sensory Shack	The Sensory Shack has reopened to give one to one respite to children and adults with additional needs. We can offer 1-5 hour blocks and can take a sibling from the same family on the same session. The charge is £15 per hour for people paying themselves.
NASEN - National Association for Special Educational Needs	National Association for Special Educational Needs- We are the National Association for Special Educational Needs (NASEN) – a charitable membership organisation that exists to support and champion those working with, and for, children and young people with SEND and learning differences. Rooted in research and evidence-informed best practice, our information, training and resources ensure that our community members in the UK and across the globe are provided with the most up-to-date knowledge and support required to become effective, inclusive practitioners. Together, we are able to contribute to the debate and effect change to improve provision within early years, schools, post-16 and wider settings and, ultimately, outcomes for the children and young people that they serve.
Education Endowment Foundation	The Education Endowment Foundation is an independent charity dedicated to breaking the link between family income and educational achievement. We do this by supporting schools, and colleges, and nurseries to improve teaching and learning through better use of evidence.
Speech and Language UK	Free resources and services for families and for educators. A wide range of support is available through this site.

GRADUATED APPROACH TEACHER TOOL DOCUMENT

This Graduated Approach tool has been created to support the application of the Graduated Approach in a classroom setting and to assist teachers during the early assessment phase as well as further into targeted provision. This is alongside the Graduated Approach already in use created by Wirral council to ensure a whole school approach to SEND provision. The blank page outlines the pathway of response and provision in a classroom setting of a mainstream setting.

This allows teachers to map out their classes and assess their current provision from universal, to targeted, to ECHP and then to reflect on the needs in their class. This document should be reviewed every half term as CYP develop and learn. This document could be monitored by the SENCO and SLT to understand the depth of need in each class and inform any current provision maps.

SEND can vary and range in type of need and range of support. The tool below is designed to support teachers reflect on their class. It is imperative that all reasonable adjustments are made, and evidenced, to fully document the progress of a CYP as they receive support in their education and that quality first teaching strategies are in place as the universal offer for all children and young people.

This section also includes the Assess, Plan, Do Review (APDR) cycle. School life is extraordinarily busy and keeping a record of written documentation supports the CYP by ensuring their journey can be followed by all involved.

This could also include written meeting notes of any time discussing with parent /carer to keep an accurate record of any conversation had. It is considered best practice to keep folders and evidence to document a CYP's pathway through their graduated response.

The class provision map

Use this page to map out the children in your class. Using their initials, place the CYP in their correct phase. Reflect on provision using page one and other resources in the Graduated Approach and plan out the interventions/provision and support that will be needed to support all the CYP in the classroom.

Consider if there are any groups of CYP who have a similar need and how this can be supported in class. This document should be filled out once at the start of every half term.

The names of CYP may change throughout the year and this will also provide a running record of previous provision that has been given to CYP which is vital information for the next teacher/setting. You will also be able to assess who has had a particular need for how long and review if the APDR model is working for that CYP or group of CYP.

Teacher Tool Document

Tier of provision	Names/initials of class members	Reflections and plans
1 Universal	E.g.: 01.08.22 IM DP LR	Universal support DP may need pre teach for language in maths due to EAL
2 Early intervention	E.g., 01.08.22 LM- capital letters not consistently used in sentence building. GM- some support needed in split digraph spelling groups i.e. Like, phonics morning jobs to be reviewed by teacher/ TA to support this.	LM- visual prompt on table to assist with formation of capital letters- house point rewards for doing this independently – monitor over half term- success measure 3/5 times completed. GM- extra reading session week using the RWI section 5 books detailing the split digraph words- some to take home and practice – different spellings this term to cover this gap.
3 Targeted support and provision		
4 Targeted intensive support and provision EHCP and further support	DS	EHCP targets to be reviewed – Writing name target- Achieved and evidenced three times independently - see book.

Teacher Tool Document

Use this blank table to support your cycle in planning interventions to meet the needs of the CYP.

Name of CYP:

Name of Teacher/Class:

<p>ASSESS</p> <p>What skill has been assessed and what are the post-assessment reflections?</p>		
<p>PLAN</p> <p>What is going to happen to meet the need discovered in the assessment phase?</p>		
<p>DO</p> <p>How/when is this happening? Record any evidence.</p>		
<p>REVIEW</p> <p>How did the 'do phase go? What are your reflections on your plan and the outcome? Was the target met? Does the cycle need to be started again with a different plan? What is going to happen next as a result of this cycle?</p>		

CYP/POST-16 – ALL ABOUT ME

MY NAME:

Questions for you to think about

What is important to me?

Who is important to me?

What am I good at?

What do I find difficult?

What do I like to do the most at school/college?

CYP/POST-16 – ALL ABOUT ME

What do I like to do the most when I am not in school/college?

What is the best way to communicate with me?

What makes me happy?

What would I like to achieve this year?

What would I like to achieve in the future?

Completed by:

Date:

If you are completing this on behalf of the child/young person what is your relationship to them?

CYP/POST-16 – ALL ABOUT ME

MY NAME:

Questions for your family to answer about you

What is important to them?

What is important for them (to keep them healthy and safe)?

What do others like and admire about them?

What are their likes and dislikes?

What makes them happy?

What makes them sad?

How do they communicate with others?

How should others communicate with them?

CYP/POST-16 – ALL ABOUT ME

MY NAME:

Questions for your family to answer about you

Do they have any significant routines?
What places do they like to go?
Who are the important people in their life?
What are their gifts, qualities and skills?
What would their perfect day look like?
What would you like them to achieve in the short-term?
What would you like them to achieve in the future?

Completed by:

Date:

Relationship to child/young person:

YOUNGER CHILD ALL ABOUT ME TEMPLATE

CHILD'S NAME:

CHILD'S AGE:

This information was completed by:

(name and relationship to child)

Things _____ likes to do:

Things _____ doesn't like to do:

_____ favourite toys/play activities are:

_____ favourite food is:

Things _____ can do for themselves:

Things _____ needs help with:

YOUNGER CHILD ALL ABOUT ME TEMPLATE

This is how _____ tells her/his parents/
carers what she/he wants and needs:

This is how _____ shows she/he is
frustrated, angry or sad:

_____ can do these things when eating:

_____ helps with personal care
(e.g., toileting, washing, dressing) by:

We know that the following people
are important to _____

We know that _____ likes to go to:

YOUNGER CHILD ALL ABOUT ME TEMPLATE

The following part is about your comments and wishes for your child.

We see _____ as a:

We have the following worries about _____ development:

These are the opportunities and support we as a family need:

In the next year, we would like _____ to be able to:

In the future, we would like _____ to be able to:

These are the things we want you to know:

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