Children first and at the heart of all we do

ORDINARILY AVAILABLE INCLUSIVE PROVISION GUIDANCE

P P



Working as One Council in the historic capital of the Black Country



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## INTRODUCTION

Defining Special Educational Needs - from the Special Educational Needs and Disability Code of Practice 0-25 years, 2015 (CoP). introduction:

'A child or young person has special educational needs if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. A child of compulsory school age or a young person has a learning difficulty or disability if 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 to others of the same age in mainstream schools or mainstream post-16 institutions.



# SPECIAL EDUCATIONAL PROVISION IN SCHOOLS AND OTHER EDUCATION SETTINGS

All children and young people are entitled to an education that is appropriate to their needs, promotes high standards and the fulfilment of potential.

This guidance is designed to help education professionals in all settings identify, plan for and meet the needs of children and young people (CYP) who have special educational needs or disabilities (SEND) and require reasonable adjustments or additionality at the SEN Support stage, in line with the Special Educational Needs and Disability Code of Practice 0-25 years, 2015 (CoP). It highlights the vital importance of high-quality teaching and learning in the context of inclusive pedagogy for all CYP, as the basis for meeting the range of needs within a mainstream setting.



It identifies the main categories of SEND and some typical characteristics or presentations of learners with SEND in those categories, alongside approaches and strategies to help address those needs in the classroom, whilst also sign-posting towards services and agencies that can offer additional advice and support.

Within schools and other education settings, children fall into one of the following 3 broad categories:

- Universal The majority of children fall within this category and will have their needs met through quality first teaching with some short-term targeted intervention as required.
- SEN Support Children who have been identified by the school as having special educational needs and requiring some more prolonged targeted or specialist support.
- Education Health Care Plans (EHCP) These children will have undertaken a statutory assessment which has resulted in an EHCP being issued and may require more prolonged targeted and specialist support.

The SEND Code of Practice is clear in its expectation of schools, stating that mainstream schools and maintained nursery schools 'must:

- Use their best endeavours to make sure that a child with SEN gets the support they need – this means doing everything they can to meet CYP 's SEN
- Ensure that CYP with SEN engage in the activities of the school alongside pupils who do not have SEN
- Early Years providers must have arrangements in place to support children with SEN or disabilities. These arrangements should include a clear approach to identifying and responding to SEN.

Any provision or support should be provided in line with the needs of the child or young person and is not dependent on any formal diagnosis. This guidance aims to provide advice to all school practitioners with the support of the school's special educational needs coordinator (SENCo).

(6.36) "Teachers are responsible and accountable for the progress and development of the pupils in their class, including where pupils access support from teaching assistants or specialist staff."



(6.37) "High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered."

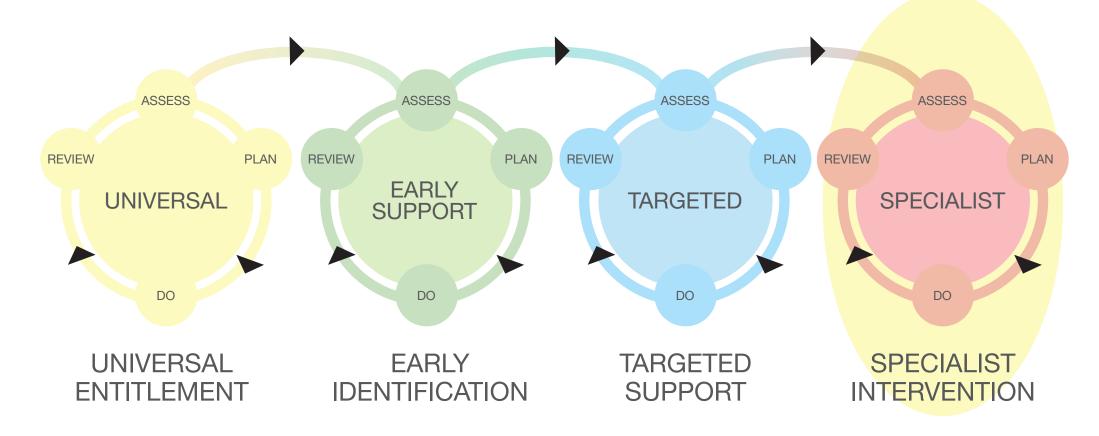
(5.36) "It is particularly important in the early years that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life"

There are recommendations and prompts to ensure effective and consistent provision for Dudley children and young people with SEND. Enabling them to achieve the best possible educational outcomes and to be effectively prepared for adulthood, including independent living and employment. This framework is not exhaustive, and provides guidance and suggestions that can be adapted and implemented to create a personalised response to meeting the specific needs of each individual. Whilst acknowledging that all settings are different and the resources and expertise that they have available to them varies, it is important to ensure that best endeavours have been taken to ensure provision is in place.

(Numbers in brackets refer to chapters in the SEND Code of Practice where relevant)

## THE SEND PATHWAY

The SEND Pathway shows a graduated approach to ways in which needs may be met. It is important to recognise a continuum of need, with much variation of extent and nature of need within a defined group. Many CYP are identified as requiring additional support for SEN, but the level and extent of need will vary significantly within that group, including for CYP who have the same category of need. This is why a graduated approach is important; one size will not fit all, and boundaries of need may often be blurred and/or variable.



## DUDLEY DEFINITION OF ORDINARILY AVAILABLE INCLUSIVE PROVISION

Dudley parent/carers, education settings and practitioners worked collaboratively to create a definition of what Ordinarily Available Inclusive Provision means in Dudley;

"Ordinarily Available Inclusive Provision refers to the additional resources and graduated support that all mainstream settings should provide for all children and young people through the funding and resources that are already, or 'ordinarily', available in the setting." This Ordinarily Available Inclusive Provision guidance is intended to be used as a tool for schools and settings and those partner agencies working with them. It is also intended to be an information source for parents, carers and young people to inform and guide in relation to the education of children and young people with Special Educational Needs and Disabilities. The guidance offers suggestions and strategies that can be implemented to support children and young people with additional needs. It is not an exhaustive list and will also include some interventions that may not be ordinarily available to all settings. This guidance is not intended as a tool to hold settings to account, but there is an assumption that settings will use their best endeavours to meet the needs of all of their pupils.

The framework is divided into each of the 4 broad areas of need, but acknowledges that many children and young people will present with a range of needs that will span a number of different areas.

## UNIVERSAL OFFER

This section outlines the expectations on all Dudley schools, according to the needs of the child/young person. Much of this section will be an integral part of the school's provision for all children. The provision and strategies outlined in this section may be required for children and young people with SEN and/or disabilities but will undoubtedly be of benefit to many of the learners in the setting.

Expectations of all settings	Strategies
A regular cycle of Assess, Plan, Do, Review is used to ensure that pupils with SEND are making progress.	Pupil's difficulties in learning and behaviour are observed and monitored in different contexts to inform planning and next steps.
(See SEN Code of Practice Ch.6.44- 6.56 for more details)	Staff are aware of pupil's starting points so that expected progress can be measured.
	A holistic, multi-agency assessment is used to inform planning and interventions.
Formative assessment and feedback are a feature of lessons and evident in marking and assessment policy	A range of assessment strategies are used to ensure a thorough understanding of learners.
	The impact of interventions is critically evaluated. Alternative approaches are explored to establish whether they may result in better outcomes for the learners.
The setting works in partnership with parents, carers and learners.	Formal and informal events take place to seek views in relation to SEN provision.
	Learners are helped to understand their own barriers to learning. Providers adopt a 'Think Family' approach
The setting recognises, and responds to, the need for pastoral support for learners with SEND and recognises that behaviour is a means of communication and may indicate an unmet need	Peer awareness and sensitivity towards difference are raised at a whole school level.
	PSHE is used to develop wellbeing and resilience.
	Awareness that learners with SEND are vulnerable to bullying

### FRAMEWORK OF SUPPORT COMMUNICATION & INTERACTION

Could include children or young people with or without a diagnosis of autism (ASD) and also those with a Speech Language and Communication Need (SLCN)

Identified barriers and/or need:	Training/support Reference
Difficulties communicating what they want to and being understood	Interventions
(Expressive Language difficulties)	
word-finding difficulties	
limited vocabulary	
<ul> <li>overuse of non-specific words like "thing" or "stuff"</li> </ul>	
over reliance on stock phrases	
<ul> <li>difficulty "coming to the point" of what they are trying to say</li> </ul>	



<ul> <li>Model language – reflect back correct speech rather than correcting.</li> <li>Repeat what the child or young person has said and add one word.</li> <li>Encourage children and young people to work in pairs and small groups.</li> <li>Organise small group or individual language sessions – adults have phonological awareness and understand the impact that processing difficulties may have on phonics teaching accordingly.</li> <li>Teach in a way that links with language programmes devised by a Speech and Language Therapist.</li> <li>Allow time for children and young people to process and respond (10 second rule).</li> <li>Introduce a variety of language through rhymes, songs.</li> <li>Ensure that all efforts to communication. For example, Makaton, ICT, communication books and boards. You may also want to consider the use of a symbol communication system, please speak to your SENCO for further advice.</li> <li>Wellcomm assessment and intervention</li> <li>Communication Environment training</li> <li>Wellcomm assessment and intervention</li> <li>Communication for Schools hutps://revolutionforschools.dudley.gov.uk/search=ieys</li> </ul>	
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Makaton:
jemma@upanddowns.org.uk
single place bookings £81pp
Up to 5 Learners = $£325$
Up to 8 learners £520
Up to 11 learners = $\pounds715$
Up to 15 learners = $\pounds975$
Online training for Levels 1 - 4 are priced the same and are inclusive of Participants Manuals, Certificates of attendance, Tutor fees, and admin costs.
A taster session costs £150 for Up to 15 Learners.
<ul> <li>SALNET speech and language workshop for group settings</li> </ul>
https://www.blackcountryhealthcare.nhs.uk/our- services/childrens-speech-and-language-therapy- service-dudley
National Training
Whole School SEND:
An introduction to speech language and communication needs
https://onlinecpd.wholeschoolsend.org.uk/unit-4
Identifying and supporting speech, language and communication needs (SLCN)
https://onlinecpd.wholeschoolsend.org.uk/unit-5
Supporting the development of speech, language and communication skills
https://onlinecpd.wholeschoolsend.org.uk/wp- admin/admin-ajax.php?action=campus-wss-join- course&blog_id=8&_wpnonce=3ee437e6ab

Difficulties understanding what is being said to them. (Receptive Language Difficulties)	
Provisions and /or strategies:	Word Aware
Consider how many information	http://thinkingtalking.co.uk/word-aware/
carrying words a child or young person can manage when giving instructions – adapt use of language	<ul> <li>Creating a learning environment that supports speech, language and communication</li> </ul>
and method, e.g. simple choices, reduce complexity and sentence length, consider using forced/false alternatives.	https://onlinecpd.wholeschoolsend.org.uk/wp- admin/admin-ajax.php?action=campus-wss-join- course&blog_id=9&_wpnonce=0d702d3b33
<ul> <li>Provide visual prompts if necessary, including key vocabulary, visual timetables, now and next, objects of reference, gestures and labelling equipment with photographs, pictures or symbols.</li> </ul>	
<ul> <li>Ensure the adult is physically at the child or young person's level.</li> </ul>	
<ul> <li>Organise small group or individual language sessions</li> </ul>	
<ul> <li>Adults have phonological awareness and understand the impact that processing difficulties may have on phonics acquisition, and differentiate phonics teaching accordingly.</li> </ul>	
<ul> <li>Give extra / allow 'take up' time to process what has been said.</li> </ul>	
• Think about the environment and how to limit any distractions.	
<ul> <li>Check you have engaged the child's attention before talking to them, use their name.</li> </ul>	
Check that hearing has been tested.	
<ul> <li>Pre-teach topic vocabulary and provide opportunities to re-visit understanding and use of words.</li> </ul>	
<ul> <li>Consider use of 'First, then, now, next' visual framework.</li> </ul>	
<ul> <li>Ensure access to an oral language modifier for assessments</li> </ul>	

Child or young person does not	Autism Training
understand or use social rules of communication	https://carolgraysocialstories.com/social-stories/ what-is-it/
Implement small group sessions e.g.	LA training
Circle of friends	IEYS TEAM:
Use social stories.	Visually supported communication
<ul> <li>Give prompts – symbols, signing</li> </ul>	Autism Education Trust Training
systems.	Early Years Autism
<ul> <li>Use visual supports for routines e.g. Now (you are doing this) and Next</li> </ul>	Wellcomm assessment and intervention
(you are going to be doing that) boards. Use of, 'My turn, your turn'	<ul> <li>IEYS pages on Revolution for Schools https://revolutionforschools.dudley.gov.uk/ Search?search=ieys</li> </ul>
Use modelling / role play	CIPS Team
<ul> <li>Playground buddies/role models</li> </ul>	Autism Education Trust – Making Sense of Autism/
Restorative approaches to conflict	Good Autism Practice
resolution	https://www.autismeducationtrust.org.uk/autism- training-and-development
	Peer Awareness/Assemblies
	National training
	Autism learns
	https://www.autismlearns.co.uk
	West Midlands Autism
	Autism Awareness
	Autism & Communication
	Autism & Sensory Differences
	Autism & Behaviours of Concern
	Autism & Anxiety
	Autism & Girls
	Autism & Pathological Demand Avoidance
	https://autismwestmidlands.org.uk/training/
	Full day 6 hours 550 or a half-day session that is 3 hours for 2325.
	https://www.autism.org.uk/advice-and-guidance/ topics/communication/communication-tools/social- stories-and-comic-strip-coversations
	https://www.ambitiousaboutautism.org.uk/what- we-do/connecting-young-people/youth-led-toolkits/ autistic-and-ok?
	www.autismwestmidlands.org.uk/information- resources-index/
	www.autismwestmidlands.org.uk/online-resources

Difficulties with language / difficulties	AET Sensory/Environmental audit
with communication	https://www.autismeducationtrust.org.uk/aet-shop
• First, use the child or young person's name to draw their attention, followed by key word instructions e.g. "Jamie, stop".	
Give simple instructions (avoid the use of idiom).	
• Use literal language (avoiding sarcasm and figures of speech).	
<ul> <li>Consider the use of symbol communication such as Picture Exchange Communication System (PECS) or similar. Consider the use of communication libraries to try out a variety of resources.</li> </ul>	
• Be aware of your own body language: a high percentage of what we communicate is non-verbal but not always recognised.	
<ul> <li>Use an appropriate tone of voice (calm, not too loud).</li> </ul>	
• Consider an appropriate environment (noise, temperature, lighting, layout, distractions).	
Difficulties with imagination	Comic Strip conversation/social stories
<ul> <li>Try role play and drama, use of props (e.g. puppets)</li> </ul>	https://www.youtube.com/watch?v=BqQldkFWW_M https://www.youtube.com/watch?v=JMPV-8ojHvk
Modelling	Many examples and training videos on youtube
Story telling and sequencing.	
<ul> <li>Photos to talk through what might be happening.</li> </ul>	
Harness the use of the child or young person's (special) interests when considering your approach.	

Difficulty with social communication	National Training:
and developing relationships	Whole School SEND
Plan class groupings and/or	Creating a socially safe environment
opportunities to develop social understanding and inference.	https://onlinecpd.wholeschoolsend.org.uk/unit-2
Plan group work (provide explicit roles	SALT programmes
initially) and use flexibly to promote	IEYS Team
independence from adults.	IEYS pages on Revolution for Schools
<ul> <li>Organise small group / one to one tasks and activities, e.g. Lego based</li> </ul>	https://revolutionforschools.dudley.gov.uk/ Search?search=ieys
therapy	ABCC training
Implement a 'buddy' system.	PSED and Behaviour Strategies
• Promote a calm learning environment.	Refer to social stories
<ul> <li>Be clear/explicit in your communication of expectations.</li> </ul>	https://carolgraysocialstories.com/social-stories/ what-is-it/
Ensure staff monitor at break	www.childautism.org.uk
and lunchtime and intervene with strategies to support peer interactions, e.g. teaching of structured games, turn taking, it's OK to lose etc.	https://www.autism.org.uk/shop



<ul> <li>Provide sensory breaks and snaks.</li> <li>Provide sensory processing needs and snaks.</li> <li>Provide sensory processing needs and snaks.</li> <li>Provide sensory needs and be flexible with the uniform polocy means and to bankts set.</li> <li>Consider the any role of the sensory struet at the set of a nault tool toolkit</li> <li>Provide sensory processing needs and toolkit</li> <li>Brave of sensory needs and to and from school.</li> <li>Provide access to a haven / low arousal space, if needed.</li> <li>Consider the any former tool and from school.</li> <li>Provide needs and to and from school.</li> <li>Provide sensory profile for the individual child.</li> <li>Consider the any of an audit tool tool tool.</li> <li>Provide access to a haven / low arousal space, if needed.</li> <li>Consider the use of en-defenders, weighted blankets etc.</li> <li>Consider the use of en-defenders, weighted blankets etc.</li> <li>Consider Sensory circuits</li> </ul>	Anxiety in busy unpredictable	
<ul> <li>routine, e.g. use of visual resources, visual timers and objects of reference.</li> <li>Organise small group / one to one tasks and activities.</li> <li>Ensure that there is a calm learning environment and/or access to a low arousal space.</li> <li>Ensure clear communication of expectations.</li> <li>Provide regular mentor support, including adults or peers.</li> <li>Consider the use of a visual timetable or 'now and next cards'.</li> <li>Ensure staff monitor key transition points e.g. home / school, break and lunchtime with strategies to reduce anxiety. &gt; Provide a 'get out' option or a way of asking for help / alterting adults to distress.</li> <li>Sensitivity to sensory stimuli</li> <li>Provide sensory breaks and snacks.</li> <li>Be aware of the significance of sensory processing needs on eating. This can include food colour, texture, taste, meal size, mixing of food on plates etc.</li> <li>Be aware of sensory needs and be flexible with the uniform policy when necessary.</li> <li>Consider the awal stimuli, proximity. Use of an audit tool would be helpful.</li> <li>Have a flexible approach to transitions e.g. between lessons and to and from school.</li> <li>Previde access to a haven / low arousal space, if needed.</li> <li>Develop a sensory profile for the individual child.</li> <li>Consider the use of ear-defenders, weighted blankets etc.</li> </ul>		
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Consider Sensory circuits		
	Consider Sensory circuits	

1	nysical outbursts causing harm to	Refer to SEMH section
to	hers and/or to self and/or damage property	https://www.ambitiousaboutautism.org.uk/what- we-do/connecting-young-people/youth-led-toolkits/
•	Use a consistent approach to managing individuals with "reasonable adjustments" made.	autistic-and-ok? www.autismeducationtrust.org.uk/resources/school- exclusions-school-stress-and-anxiety
•	Continue to implement strategies that are reassuring.	
•	Offer clear guidance – explicit messages letting the pupil know what is expected of them.	
•	Offer a 'get out with dignity' choice letting the child or young person leave the situation.	
•	Monitor so that you have a good understanding of the frequency and location of triggers: frequency charts; STAR (situation, trigger, action, response) observation sheet; ABCC (antecedent, behaviour, consequence, communication) observation sheet; informal observations should be carried out to analyse incidents, develop understanding and plan for adjustments according.	
•	Encourage two-way communication with families. This could include changes within the family (e.g. divorce, bereavement, illness) and strategies that work / don't work. Ensure information is relayed to all relevant staff.	
•	Put preventative strategies in place, e.g. avoiding high arousal situations such as busy corridors.	
•	Arrange a low arousal area / reflection room, chosen in agreement with the child / young person.	
•	Ensure appropriate de-escalation strategies are in place (e.g. time out card).	
•	Implement a risk management plan which includes pro-active strategies, early interventions to reduce anxiety/ harm and reactive strategies to ensure a consistent approach.	

Devise and use reintegration plans –	Refer to SEMH section
to support the child or young person in returning to full time education.	https://www.ambitiousaboutautism.org.uk/what- we-do/connecting-young-people/youth-led-toolkits/ autistic-and-ok? www.autismeducationtrust.org.uk/resources/school- exclusions-school-stress-and-anxiety
<ul> <li>Implement a clear plan of action, agreed with parent carers with regard to physical intervention. (Schools do not need parental permission to use reasonable force on children and young people). A Risk Assessment must be in place if the child or young person is causing a risk.</li> </ul>	
<ul> <li>Consider the use of a Pastoral Support Plan (PSP). Ensure it is read and implemented by relevant staff, and feedback given to pastoral lead.</li> </ul>	
<ul> <li>Consider use of a script which is understood and used by all appropriate adults.</li> </ul>	
• Change the adult supporting the child or young person as part of a planned approach. Ensure that this is seen as a positive and effective strategy.	
• Ensure all adults are aware of the need for the child/young person to process and respond before any type of discussion or reflection takes place	



evelopmental age	E.g. Task board
Implement regular, short breaks.	
Plan for differentiation.	
Use chunking and break tasks down into smaller, manageable steps.	
Consider the use of visual timetables.	
Consider backward chaining. Break the overall task down into smaller steps. The adult helps the child or young person with all but that last step with the child or young person being taught to do the last step themselves. Once the last step is learnt, the child/young person and adult work backwards learning other steps of the sequence until they can do the entire task.	
Use the child's / young person's name when giving instructions.	
Ask the child / young person to repeat back what activity they are going to do.	
Consider use of timers, so they know they only have to focus for a comfortable amount of time.	
Plan individualised timetables	
Consider font size, page colour and on white boards, coloured letters against different backgrounds can be an issue.	
	<ul> <li>engagement.</li> <li>Implement regular, short breaks.</li> <li>Plan for differentiation.</li> <li>Use chunking and break tasks down into smaller, manageable steps.</li> <li>Consider the use of visual timetables.</li> <li>Consider backward chaining. Break the overall task down into smaller steps. The adult helps the child or young person with all but that last step with the child or young person being taught to do the last step is learnt, the child/young person and adult work backwards learning other steps of the sequence until they can do the entire task.</li> <li>Use the child's / young person's name when giving instructions.</li> <li>Ask the child / young person to repeat back what activity they are going to do.</li> <li>Consider use of timers, so they know they only have to focus for a comfortable amount of time.</li> <li>Plan individualised timetables</li> <li>Consider font size, page colour and on white boards, coloured letters against different backgrounds can be</li> </ul>

## SOCIAL EMOTIONAL AND MENTAL HEALTH NEEDS (SEMH)

Identified barriers and/or need:	Training/support Reference
SEMH - General	Interventions
Provisions and /or strategies:	Specialist services training:
Top Tips:	EP service
Consider what the behaviour may be	Mental Health First Aid Youth
communicating. Are there any unmet communication or social, emotional	Understanding Teenage Brain
needs?	Understanding Anxiety and Strategies to support this
<ul> <li>Try to sensitively get the child or young person's views on</li> </ul>	Understanding Emotional Based School Non- Attendance
what happened to gain a clearer	Emotion Coaching
understanding of the behaviours in context.	Nurture Group Training
<ul> <li>Look at the history. When did the</li> </ul>	Anger: De-escalation and assault cycle
behaviour start to change? What are	Nurture Network session
the triggers?	Understanding Brain Development
Liaise and collaborate with home to	Becoming an Attachment Aware Setting
understand the wider picture.	Motivational Interviewing for Schools
<ul> <li>Keep notes of concerns and liaise with designated professionals.</li> </ul>	Supporting the CYP for parents who can't be there
<ul> <li>Be aware of any prescribed</li> </ul>	Attachment and Trauma Refresher
medication and feedback changes or	On being the Key Adult
concerns to your special educational needs co-ordinator (SENCO).	Emotion Coaching Refresher
<ul> <li>Model pro-social behaviours in the</li> </ul>	Using 'PACEful' approaches
classroom and acknowledge them in children and young people. Pro-	https://www.revolutionforschools.dudley.gov.uk/ Page/10910
social behaviours are considered to be positive, helpful and intended to promote social acceptance and benefit other people or society, such as sharing / co-operation.	https://www.dudleyparents.co.uk/home

Sucomore Pahaviaur Support Corries
Sycamore Behaviour Support Service
We offer whole school training in the school day or during staff meeting time. We also offer training for small groups of staff, teachers, TA's and Lunchtime Supervisors. Training available to schools is listed below. We can also offer bespoke training for your school based on your requirements. They may include:
o Positive Handling Training
o Attachment and Behaviour
o Low level disruption (OFSTED requirements)
o Anger Management – Prescribed programmes
o Managing behaviour in the EYS
o Top 10 strategies for encouraging good behaviour
o De-escalation and challenging behaviours
o Refusal and Defiance
o Top 10 tips for defusing confrontation
o Developing emotional security
o PDA
o Managing ADHD in the classroom
<ul> <li>Classroom strategies for communication difficulties (ASD)</li> </ul>
o Engaging the dis-engaged pupil
o Fighting and Biting
o Relaxation and mindfulness
o Behaviour clinics
o Lunchtime Supervisor training
o Lunchtime/playtime audit
o Positive classroom management
*Positive Handling foundation course. This has previously been delivered as CPI/MAPA. The Sycamore Centre is now identified as Dudley's CPI hub. This comes at an extra cost to schools
https://www.revolutionforschools.dudley.gov.uk/ Page/14170

BACK TO CONTENTS

Difficulties participating and presenting as withdrawn or isolated	
Provisions and /or strategies:	IEYS Team
Use assessment through teaching	Autism Education Trust training
and learning – e.g. are there parts of the curriculum that they find easier to manage than others? Use these to	PSED and behaviour strategies training
	Happier Minds - Mental wellbeing website
<ul> <li>develop confidence.</li> <li>Analyse informal observations; frequency observations and other</li> </ul>	Info on EBSA, Wysa, CAMHS, Dudley Talking Therapy service https://happierminds.org.uk/school- based-staff/
observation sheets.	Dudley Counselling service
<ul> <li>Discuss the child/young person with colleagues and your special</li> </ul>	Training and Professional development sessions for Staff
educational needs co-ordinator (SENCO). Check if there are staff	<ul> <li>Supporting attachment through play</li> </ul>
members who seem to get a more	<ul> <li>Stress management and relaxation</li> </ul>
positive response. What are the	Listening skills
strategies or approaches they use with the child/young person? Can	<ul> <li>Creative and therapeutic play in schools</li> </ul>
these be more widely replicated?	<ul> <li>The impact of domestic violence</li> </ul>
Differentiate tasks to ensure that all	<ul> <li>Developing Mindfulness in school</li> </ul>
children / young people experience success.	Bereavement Training
<ul> <li>Include explicit teaching of behaviour expectations.</li> </ul>	https://revolutionforschools.dudley.gov.uk/ Services/4802
<ul> <li>Try small group work e.g. friendship or</li> </ul>	Regulating emotions and behaviour – digital materials
social skills, nurture groups.	http://calmbrainapproach.com/
<ul> <li>Give the child/young person responsibility for looking after someone else.</li> </ul>	supports nurture work that schools are already doing. Supports children to calm themselves down by experiencing an intense period of calm.
	Solihull Approach Whole School Training is all about supporting emotional health and wellbeing with a focus on relationships and nurturing connected, sensitive and responsive interactions.
	https:solihullapproachparenting.com/schools/

- Use a backward chaining approach to activities, such as bringing children and young people in at the end of assembly.
- Use play based activities.
- Establish the child/young person's interests. Use differentiated resources

   teach the curriculum appropriate to the development of the child. For example, a year five child may be accessing year one objectives in the same context.
- Use buddying /peer mentoring to enable the child/young person to take on both roles, enabling them to receive support from a peer and provide support to a peer.
- Try activities which provide the child / young person with a sense of belonging or importance to the group.
- Provide alternative methods to contributing to class discussions.

Behaviour that challenges	National Training
expectations	ADHD information services
<ul> <li>Give a consistent message but flexible approach, e.g.' I want you to be in class learning' is the consistent message. The approach to support this happening may vary or be flexible depending on individual needs.</li> </ul>	Understanding ADHD and its implications for the classroom. This is a one day course led by experts, focusing on understanding ADHD, how to accommodate and get the best out of children with the diagnosis and preventing school exclusion.
Ensure that reasonable adjustments	http://addiss.co.uk/training.htm
are made such that they differentiate	ADHD information services
for social, emotional and mental health needs in the same way that we differentiate for learning.	1-2-3 Magic is a successful behaviour training programme that is easy to understand and implement. It is very different from other programmes
• Ensure learning needs are being met.	available, as it is a simple but powerful approach
<ul> <li>Understand the basis for the</li> </ul>	to managing challenging behaviour in the primary school.
behaviour e.g. what is the history/ context?	http://addiss.co.uk/training.htm
<ul> <li>Continue to implement strategies that are reassuring. &gt; Offer clear guidance         – explicit messages letting the child/ young person know what is expected of them.</li> </ul>	The ADHD Foundation Neurodiversity Charity is the largest provider of training in ADHD and neurodevelopmental conditions for professionals in the UK. All our courses are interactive, full of practice strategies and informed by up to date research. We
<ul> <li>Offer a 'get out with dignity' choice letting the child/young person leave the situation.</li> </ul>	can offer a wide range of expert led courses acros a wide range of subject areas. These courses can be tailored to your needs as an education setting, offering the opportunity to focus on a specific
<ul> <li>Monitor so that you have a good understanding of the frequency and location of triggers – frequency charts; STAR (situation, trigger, action,</li> </ul>	area/need or a selection of topics. We also offer Neurodiversity Friendly accreditations for education settings, including our ADHD Friendly Award. These cover ADHD, autism, dyslexia, Tourette's, and more
response) observation sheet; ABCC (antecedent, behaviour, consequence, communication) observation sheets; informal observations can be carried	https://www.adhdfoundation.org.uk/training/training- for-education/
	0151 541 9020
out to inform understanding.	info@adhdfoundation.org.uk
Understand that behaviour is a	Steve Brown -Behaviour Support & Training Ltd
method of communication e.g. what purpose is the behaviour trying to achieve for the child or young person?	School/pupil support (inc. counselling, assessments staff/student/classroom/SLT support etc.)

SEND training sessions e.g. ADHD, Tourette/Tic Disorders, SLCN, Dyslexia, PDA, Autism, Behaviour Management, Lunchtime supervisor training, social skills groups, social scripts, Comic Strip Conversations, restorative approaches, Emotion Coaching, de-escalation etc

andreamoorebst@gmail.com 07947369701

What are they trying to tell us with

their behaviour? Is there an unmet

acceptable, behaviours.

need? Help the child/ young person to learn to substitute with other, more

•	Devise a risk management plan which	stevebrownbst@gmail.com 07946728713
i	includes pro-active strategies, early interventions to reduce anxiety / harm and reactive strategies to ensure a consistent approach.	www.stevebrownbst.co.uk
		Innovate https://innov4te.co.uk/other-services
		1-1 Mentoring
•	Use reintegration plans and meetings to support the child/young person in returning to full time education. A gradual reintegration is most effective.	bespoke 1-1 mentoring based on the young person's barrier to engage in Education, employment or training. Issues may include, but are not limited to: positive engagement, gangs, and criminal
•	Employ a clear plan of action, agreed with parent carers with regard to physical intervention (schools / settings do not need parental permission to use reasonable force	exploitation, domestic violence, healthy relationships, positive post 16 options. This can be delivered at the referring school, INNOV4TE or a neutral community venue. This can be delivered during the school day, evenings or weekend as required.
	on a child/young person). A risk assessment must be in place if the	Building Blox
	child/ young person is causing a risk.	This building emotional resilience programme was developed as a response to children who are
•	Use choices to allow the child/young person to have some control with the same end result e.g. "Would you like to talk to me now or in 1 minute?"	vulnerable owing to a variety of factors: typically, adverse childhood experiences; this programmes includes 1-1 and group work. Using play, technology and other interactive methods. Building Blox
•	Teach the child/young person ways to get their needs met, such as developing social skills or strategies to self-regulate emotional states.	covers; recognising and increasing positives, coping mechanisms and strategies, recognising, processing and managing emotions, how to build resilience, how to seek and accept help, healthy relationships.
•	Use readiness to learn strategies and	Primary Preventative
	routines, for example, after breaks or between tasks.	Early intervention is key to promote successful transition from primary to secondary school, and
•	Consider the impact of the timetable and how you prepare children and young people for transitions.	prevent exclusions. The programme is designed to educate year 5/6 pupils on external factors that could have an adverse effect and negatively influence their choices. We explore school readiness for those
•	Plan for transition between year	children identified as having additional SEMH needs
	groups / phases of education, including 'what works well' in terms	Readiness for Schools
•	of in-class differentiation, and support professionals to analyse the behaviour.	A variety of diagnostic tools are used to understand a learner's barriers to their education. A bespoke programme is then created to cater to their needs. The programme focuses on: Self-control and management of behaviour, social skills, self- awareness and confidence, skills for learning and
		approach to learning. Each of these topics will be monitored throughout the programme to ensure progress is being made. A case study will be produced for each of the learners on the programme.

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Raise the need for use of a Pa Support Plan with your SENC Inclusion Lead if a child or you person shows regular episode dysregulated behaviour, or pe disruptive behaviour, or is at r exclusion.	O / We deliver the Athena programme, which is an empowering programme for young women who may be experiencing issues in accessing their education due to: Self-image, confidence and self-esteem.
<ul> <li>Discuss the need for getting advice from the Fair Access T Educational Psychology Servi specialist teacher advisory tea difficulties persist.</li> </ul>	in education, New to area/No school place. The programme explores issues specific to young women based on individual assessments, using a variety of diagnostic tools covering SEMH and academic ability.
<ul> <li>Ensure that advice is consister implemented, analysed and re for effective impact.</li> </ul>	
<ul> <li>Review individual plans regula may have changed, or you ma able to contribute.</li> </ul>	Anti racism and mental health
• Ensure there is a whole school and settings consistent approt to support the children and you people's individual strategies.	https://bookings.annafreud.org/s/training-in-schools
Consider use of scripts.	



	hysical symptoms that are medically	Whole School SEND
	nexplained, for example, soiling and tomach pains.	Unit 8: Understanding behaviour as communication
	oiling:	https://onlinecpd.wholeschoolsend.org.uk/unit-8/
	onnig. onsider the causes for soiling too, these	Unit 9: Promoting mental wellbeing in your setting
	could be due to:	https://onlinecpd.wholeschoolsend.org.uk/unit-9/
0	Development – exploring the	Unit 10: Understanding and promoting resilience
	sensation.	https://onlinecpd.wholeschoolsend.org.uk/unit-10/
0	Sensory stimulus – the pupil likes the feel.	Unit 11: Understanding anxiety and creating a supportive learning environment
0	Not being toilet trained.	https://onlinecpd.wholeschoolsend.org.uk/unit-11/
0	Abuse.	
•	Use activities that are stress reducing e.g. games, dance, colouring, gardening, animals, and forest school.	
•	Monitor to see whether the symptom is persistent and consider contributory factors, eg sensory processing issues impacting on eating or anxiety.	
•	Keep a log and analyse pattern or trends to identify triggers. Talk to designated lead (special educational needs co-ordinator, pastoral or safeguarding lead) regarding your concerns if issue persists.	
•	Liaise with school nurse.	
•	Remember that pain can affect autistic children and young people or those who have experienced trauma in ways that are different to people who are neurotypical.	

Attention difficulties	https://www.adhdfoundation.org.uk/training/training-
• Have a clear structure to the day.	for-education/
<ul> <li>Have a consistent seating plan for all lessons – primary or secondary.</li> </ul>	0151 541 9020 info@adhdfoundation.org.uk
<ul> <li>Sit the child or young person away from distractions and near good "learning" role models.</li> </ul>	
<ul> <li>Have clear expectations regarding behaviours and a clear and consistent response to behaviours.</li> </ul>	
<ul> <li>Think about potential reasons, is there a pattern?</li> </ul>	
<ul> <li>Record behaviour and remember to analyse and review trends.</li> </ul>	
• Allow plenty of time for movement or frequent small concentration periods.	
<ul> <li>Plan lessons in small manageable chunks.</li> </ul>	
• Be aware of times of the day that may be more difficult.	
• Use of a 'time out' card to enable classroom behaviour to remain positive. Do not assume the 'time out' card is being "abused" if it is used often for one lesson of the week. It may be that there are certain barriers to learning for the child in this lesson, eg sensory.	
<ul> <li>Consider whether any reasonable adjustments need to be made to discipline procedures / behaviour policies and ensure these are in line with equalities legislation.</li> </ul>	
<ul> <li>Remember to consult with the child / young person so they can share with you their perspective.</li> </ul>	

Attachment difficulties	Anna Freud centre
Be aware that a child or young	Anti racism and mental health
person with attachment difficulties may respond differently to behaviour	Mental Health and School attendance
strategies which work with others. Discuss this with your special educational needs co-ordinator (SENCO) if needed.	https://bookings.annafreud.org/s/training-in-schools
• Be aware that the child / young person may say they do not want the support offered. This doesn't always mean that they don't need it. Seek to support in more subtle ways, but do not withdraw support.	
• Liaise with parent carers for shared understanding.	
• Consider the family context and the range of children and young people who may have attachment difficulties e.g. adopted, forces children, child in need, or a child who has experienced care.	
<ul> <li>Ensure there is a good transition when the child / young person starts school / the setting. Check the history.</li> </ul>	
<ul> <li>Use attachment informed strategies within class and develop a nurture group or foster a nurture ethos.</li> </ul>	
<ul> <li>Consider the appropriateness of existing discipline procedures / behaviour policies. Discuss an individual support plan if necessary. The law states that 'reasonable adjustments' must be made.</li> </ul>	
• Liaise with the virtual school for Children in Care, educational psychology service (EPS), Behaviour Outreach team for training.	

## Low level disruption or attention needing

- Differentiate your use of voice, gesture and body language.
- Focus on reducing anxiety and thereby behaviours.
- Positive reinforcement of expectations through verbal scripts and visual prompts.
- Have a 'time in/out' or quiet area.
- Focus on the behaviour and what it is you would like the child or young person to do – what is it you (the adult) wants to achieve? Provide support to achieve the aim.
- Ensure a pro-social relational approach to managing behaviour is taken, not a punitive behaviourist approach.

### Difficulty in making and maintaining healthy relationships

- Use small group/nurture group activities to support personal, social and emotional development.
- Model appropriate emotional responses to disagreements or difficulties, e.g. sharing / turn taking.
- Think about who the child or young person can maintain a relationship with, for example, adults only, younger children. Why might that be? Can you use this information to build the child/young person's capacity to maintain relationships?
- Try differentiated opportunities for social and emotional development e.g. buddy system/paired learning activities/scaffolding group work.
- Use restorative approaches when relationships break down.
- Use a key worker to rehearse and replay more appropriate social communication methods, provide opportunities to practise the social communication skill being learned in class.
- Discuss the use of dedicated and planned time with your special educational needs co-ordinator (SENCO) to support the child/ young person where necessary, such as during unstructured break and lunch times.
- Do not use the school / settings 'special educational needs' base purely as a reactive strategy when friendship issues arise.
- Consider using a 'Circle of Friends' technique or similar.

## Difficulties following and accepting adult direction

- Look for patterns and triggers to identify what may be causing behaviours e.g. use of language.
- Be aware that these behaviours may underlie an unmet need for safety.
   Use positive scripts – positive language to re-direct and reinforce expectations e.g. use of others as role models.
- Consider calming scripts to deescalate, including for example, use of sand timers for 'thinking time'.
- Provide limited choices to give the child/young person a sense of control whilst following adult led activities.
- Use meaningful rewards and consequences flexibly and creatively such as 'catch them being good' sticker charts or whatever the child or young person is personally motivated by, e.g. hair care, personal care, sports, shooting baskets, controlled access to iPad, YouTube etc.
- Consider creating a visual timetable and using visual cues such as sand timers to support the end of activities and sharing.



	resenting as significantly unhappy or tressed
•	Identify a key figure within class or special educational needs and disabilities (SEND) team who can provide an emotional secure base and build on preferred learning styles.
•	Establish a calm place/quiet area which is chosen and agreed with the child or young person.
•	Ensure feedback is used to collaborate and plan with parent carers, to ensure consistency between the home and school / setting.
•	Consider the use of comic strip conversations to identify triggers and identify an alternative choice of action.
•	Provide opportunities to reflect emotional states and develop strategies to support self-regulation.
P	atterns of non-attendance
•	Talk to parent carers to identify barriers of non-attendance.
•	Think about 'push and pull' factors.
•	Consider accessing Emotional Based School and settings Avoidance (EBSA) materials.
•	Collaborate and plan with parent carers, to ensure consistency between the home and school / setting.
•	Consider the impact of exclusions on individual attendance in the long run – will the child or young person learn that this behaviour enables them to go home to their safe space in their bedroom?

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Post 16 social, emotional and mental health difficulties – additional guidance

Some key factors which may be common causes of Social, Emotional Wellbeing and Mental Health issues amongst post 16 students with SEND:

• The emphasis and expectation regarding independent learning at all levels of qualification.

To thrive in a college or post-16 setting, a young person needs to be equipped with good study skills and an increasing level of independence, particularly in relation to organisation of time and workload, and life skills such as independent travel and financial management.

#### • The pace of the curriculum, particularly at level 3.

The linear 'A' levels and new BTEC qualifications demand strong memory retention, note taking and the ability to disseminate knowledge within set time constraints, whether these be via assessment deadlines or exam conditions. They have more extensive specifications, which must be taught, continually assessed and revised within a relatively short time span. In many colleges and post-16 settings, there has been an increasing emphasis on 'flipped learning' where the young person is expected to acquire the factual knowledge for a topic area via their independent learning. The classroom is very much for checking, consolidating and practising how to use this knowledge in formal assessed work.

 Transitioning to adult services which may include the reduction of some external services and support. As the young person reaches their 16th birthday and, where applicable, moves from childrens' to adult services, some types of support may cease. It is important that this is known and planned for ahead of time as part of the young person's transition strategy.

The structure of the young person's timetable. This can remove them from previous, long term friendship groups, which they may have previously relied upon for support and interaction. Consider how the setting can support the development of new friendships by organising social activities so young people can get to know others through shared interests.

The young person may not wish to disclose their SEND difficulties/ differences.

This may be due to their desire not to be 'labelled', a fear that disclosure will prejudice their place at college, or, as many now complete their application forms without support, they did not think to include it or understand the question on the form. Be sensitive to these young people and have an identified member of staff who will check in with each young person regularly to pick up on any difficulties.

 Transition to a new setting can invoke strong emotions within some young people who struggle with change and fear the unfamiliar.

Consider putting into place a range of strategies that can support young people to cope with their emotions. Addressing the impact of these factors on social, emotional wellbeing and mental health.

#### Anxiety

Anxiety in young people may be general, social or in relation to learning and is often one of the key difficulties which a college/sixth form's SEND team is asked to support. Learning related anxiety is prevalent amongst this group. Young people with SEND commonly experience difficulties relating to speed of processing, working memory, time management and organisation. When they experience high levels of worry or anxiety and their threat response is triggered, working memory and the ability to process information will be further hampered as their brain shifts into 'survival' mode. This can add to the young person's distress and feelings of failure which can then impact their attendance and performance in their courses.

Some support strategies:

- Wellbeing courses specifically aimed at young people who are experiencing issues with their mental health, such as anxiety, can be beneficial. For example, courses on:
- o Mindfulness
- o Academic anxiety
- o Cognitive based skills
- Referrals for counselling may also be used as a support strategy.
- Providing a drop-in facility for young people for help with generic study skills and emotional wellbeing.

- Providing transition support / programmes with a focus on the acquisition/development of the study skills and studentship qualities required for further education and higher education study subjects.
- Be aware of referral routes within college. These routes may be different in different colleges but may include Pastoral Mentors, Mental Health Advisors, Counsellors and Safeguarding Leads.
- Isolation

Isolation can have a devastating impact on a young person's experience of college and can impact on their emotional wellbeing, mental health and their ability to engage with their courses. Feedback from post 16 settings suggests that feelings of isolation are becoming more prevalent amongst young people.

Some support strategies:

- Provide supervised / facilitated social opportunities / spaces on a regular basis which young people know about and are comfortable to attend and participate in at whatever level suits them.
- Providing other spaces that offer opportunities for social interactions / connections. For example, a 'Comfort Zone' for quiet work. Often young people using this facility begin to chat to others and form friendships.

o Peer mentoring – this might be an informal arrangement supported by the setting's SEND support team or a more formal arrangement such as Circle of Friends. In addition, careful pairing and grouping within the classroom can encourage peer interaction. It is important that all students with SEND or any other potential vulnerabilities (e.g. disadvantaged students, care leavers, young carers) are seen as individuals requiring tailored support to meet their needs. Many post-16 settings develop an 'integrated approach' to providing extra support to young people. This means that any young person who accesses support is initially assessed not only in terms of their learning needs, but also their wellbeing. WSCC post 16 settings report that they often find that young people requiring additional support, benefit from a package of support rather than just one discrete intervention

## COGNITION AND LEARNING

Identified barriers and/or need:	Training/support Reference
Uneven profile / difficulties across the	interventions
curriculum but with some areas of strength.	IEYS Team
Provisions and /or strategies:	New to EYFS training
	SENCo network meetings
<ul> <li>Ensure the 'assess, plan, do, review' process is understood and used</li> </ul>	Role of the Setting SENCo training
consistently across the school or	EYFS Ranges training
setting. The cycle and evidence of impact should be recorded.	Schema training
<ul> <li>Ensure the child or young person has full access to the breadth of</li> </ul>	Triple I (Intent, Implementation and Impact) and the Engagement of the Adult
learning by making adjustments and	Terrific Two's
modifications to differentiate the	LA Training
curriculum, right across the board. Differentiate by task, outcome, level	LSS
of difficulty or amount of support/ scaffolding provided.	https://www.dudley.gov.uk/residents/learning-and- school/learning-support/
<ul> <li>Include additional learning opportunities to develop prosocial</li> </ul>	https://www.revolutionforschools.dudley.gov.uk/ Services/4578
behaviours.	Boosting Reading @ Primary (BR@P)
<ul> <li>Place emphasis on self-actualisation         <ul> <li>activities designed to develop skills</li> </ul> </li> </ul>	<ul> <li>Boosting Reading @ Secondary (BR@S)</li> </ul>
which will support them to become	ENABLE 1:1
independent learners.	ENABLE Group
Support them to develop their self- esteem through celebration and	<ul> <li>Fischer Family Trust Wave 3 Literacy Intervention Programme</li> </ul>
reinforcement of strengths and successes.	Inference Training
Where possible, use the child or	Talking Maths
young person's strengths to make	A Structured Approach to Reading Comprehension
links to and support areas of difficulty.	A Structured approach to Spelling
	<ul> <li>Games to Support the learning of HFW words and Phonics (read and spelling)</li> </ul>
	Running Records and Miscue Analysis
	Phonics for Pupils with Literacy difficulties

<ul> <li>Dyscalculia – Maths and SpLD</li> </ul>
<ul> <li>Auditory and Visual difficulties affecting learning</li> </ul>
Dyslexia Friendly Schools
How to be an effective TA
Multisensory Teaching
Developing an SEN Screening Toolkit
ECHO TEAM
Supporting Writing through Colourful Semantics
<ul> <li>Supporting Children's Narrative Skills through Colour Coding</li> </ul>
National training
British Dyslexia Association
https://www.bdadyslexia.org.uk/services/training
e.g The Dyslexia Friendly Learning Environment
training on Dyscalulia
Also run training days:
https://www.bdadyslexia.org.uk/events/category/ training-days
Whole School SEND
Understanding executive function
https://onlinecpd.wholeschoolsend.org.uk/unit-14/
Memory for Learning
https://onlinecpd.wholeschoolsend.org.uk/unit-15/
Developing skills for mathematics
https://onlinecpd.wholeschoolsend.org.uk/unit-17/
Promoting independence from the Earliest Years
https://onlinecpd.wholeschoolsend.org.uk/unit-19/
Person-centred working
https://onlinecpd.wholeschoolsend.org.uk/unit-18/
Coming soon: Understanding the building 'blocks' for reading and writing (Unit 16)
Down Syndrome UK
https://downsyndromeuk.co.uk/education- professionals/

#### Inadequate progress despite appropriate differentiation, working below age related expectations.

Provisions and/or strategies:

- Ensure the 'assess, plan, do, review' process is understood and used consistently across the school or setting. The cycle and evidence of impact should be recorded.
- Assess through teaching to identify the areas of need in consultation with the child or young person.
- Model use of open-ended simple statements such as 'I wonder... or what if' rather than questions.
- Give clear and simple instructions, breaking down longer instructions and giving one at a time.
- Use visual timetables, visual cues and prompts e.g. objects, pictures, photos, symbols, choice boards, sequences.
- Develop 'Social Stories'.
- Give time to process information before a response is needed. >
- Pre-teach e.g. provision of a Teaching Assistant to help prepare the children and young people for the new topic.
- Make explicit links to prior learning.
- Share next steps so children and young people know what to expect.
- Use differentiated resources teach the curriculum appropriate to the development of the child. For example, a year five child may be accessing year one objectives in the same context.
- Use meaningful strategies to boost self-esteem and confidence.
- Provide specific meaningful praise and feedback when a child / young person perseveres and/or achieves something new

#### Social Stories and Comic Strip Conversations

Social stories (a trademark owned by Carol Gray) and comic strip conversations assist with developing social understanding, social communication and interaction and help to keep children and young people (CYP) safe. This training will provide staff with an understanding of what social stories and comic conversations are, how they help, how to write them and the evidence base for how to use them effectively.

To access please email EPS@dudley. gov.uk , where you will be sent a link to the training to complete at your own convenience. Please note there is no cost for this training, but you will be required to complete an evaluation form after each session.



n addition to strategies other cognition and lear following may be of help		
	):	
<ul> <li>Assessment through to identify the areas of consultation with the person. Observation of more appropriate.</li> </ul>	of need in child or young	
<ul> <li>Teach metacognition (how we learn e.g. by understand the child person's difficulty and what helps).</li> </ul>	trying to or young	
<ul> <li>Adopt a neuro-diversion celebrate the strength</li> </ul>		
<ul> <li>Recognise and celebrative effort and show interest of their life.</li> </ul>		
<ul> <li>Work closely with the educational needs co (SENCO) and other sp to understand what sp approaches to use in from assessments or</li> </ul>	-ordinator pecialist staff trategies or line with advice	
<ul> <li>Use evidence-based to develop skills e.g., handwriting, literacy,</li> </ul>	spelling,	
Link learning to real li	fe situations.	
To support memory:		
<ul> <li>Provide memory aids strips, number square word lists, table squa</li> </ul>	es, post-its, key	
<ul> <li>Consider teaching of eg memory games, ki prompts, and use of p such as mind mappin</li> </ul>	inaesthetic planning tools	

#### For literacy difficulties:

- Make simple changes e.g. font style and size, coloured paper, line spacing, lighting, overlays, appropriate use of technology.
- Use 'think, pair, share' to provide time to think.
- Consider peer groupings so the child or young person has access to good role models for language and communication.
- Consider use of appropriate learning resources e.g. pencil grips, spelling aids and alternative methods for recording information – including verbal and ICT methods.
- Provide opportunities of over learning through games to support reinforcement.
- Reduce the use of language in other areas of the curriculum, eg maths – solving word problems. For numeracy difficulties:
- Provide access to concrete resources e.g. hundred squares, number lines, Numicon etc.
- Provide context for learning so that the child or young person can understand the relevance of each concept and link to their experiences.
- Teach in the sequence of language, concrete resources and diagrams before symbols.
- Support use of a calculator when mental calculation is not the focus of the session. For example, when solving word problems.

### For developmental coordination difficulties:

Please see the Sensory and Physical Needs section for developmental coordination difficulties (DCD) previously known as dyspraxia.

# PHYSICAL AND SENSORY NEEDS

Identified barriers and/or need:	Training/support Reference
Developmental co-ordination	Interventions:
difficulties	IEYS Team
Developmental co-ordination difficulties were previously known as dyspraxia.	Safer Children Handling training for children with a physical / medical condition
Children may have difficulty with:	
<ul> <li>playground activities such as hopping, jumping, running, and catching or kicking a ball. They often avoid joining in because of their lack of co-ordination and may find physical education difficult</li> </ul>	
walking up and down stairs	
<ul> <li>writing, drawing and using scissors – their handwriting and drawings may appear scribbled and less developed compared to other children their age</li> </ul>	
• getting dressed, doing up buttons and tying shoelaces	
<ul> <li>keeping still – they may swing or move their arms and legs a lot</li> </ul>	
• A child with DCD may appear awkward and clumsy as they may bump into objects, drop things and fall over a lot.	
In addition to the strategies suggested in the Cognition and Learning section, the following may be of help.	

rovisions and /or strategies:	National training :
<ul> <li>core stability e.g. wobble cushion, exercises and games.</li> <li>Ensure correct seating position with appropriately sized table and chairs.</li> <li>Provide support for letter formation e.g. using a multi-sensory handwriting scheme, pencil grips, sloping boards etc.</li> </ul>	Whole School Send on line CPD units:
	Creating a physically safe environment
	https://onlinecpd.wholeschoolsend.org.uk/unit-3/
	http://www.wholeschoolsend.org.uk/events/live-
	discussion-creating-physically-safe-environment- primary
	http://www.wholeschoolsend.org.uk/events/live- discussion-creating-physically-safe-environment- secondary-further-education
Provide physical activities to support development of gross motor skills e.g.	An introduction to teaching learners with physical needs
Develop fine motor skills e.g. hand	https://onlinecpd.wholeschoolsend.org.uk/unit-13/
	pdnet standards
pincher grips activities e.g. pegs onto washing line.	Learners with physical disabilities have individual needs which need to be met to ensure they can access and engage with learning.
<ul> <li>Provide sequencing and organisational skills e.g. now / next boards, writing frames, visual timetables.</li> </ul>	To help those working with young people with physical disabilities, pdnet have produced a set of standards for those working in post-16 education.
	This resource provides tools to evaluate your current provision and to support developing an action plan for continual improvement
	https://www.et-foundation.co.uk/professional- development/special-educational-needs-disabilities/ specific-learning-differences-and-wellbeing/physical disabilities
	Pdnet Level 1 training
	Who is the training for?
	These free online training modules are designed for anyone working within an educational setting who needs to develop their awareness and understandin of physical disability and the impact it can have on learning.

What does the training involve?
Each module is approximately one hour in length and uses custom graphics and scenario-based learning to help users to understand the barriers or challenges that can be faced by children and young people with a physical disability and the steps that can be taken to overcome these.
https://pdnet.org.uk/pdnet-level-1-training/
Get Moving Program Dudley Paediatric Physiotherapy Service
https://www.blackcountryhealthcare.nhs.uk/our- services/paediatric-physiotherapy-service
Advice in supporting young persons physical needs throughout the school day. May include adaptations to curriculum, activity/ exercise advice use of equipment.
We work closely with PIMIS/CIPS on access and moving and handling from a therapeutic perspective.
Information on conditions and what it means for young person in that educational setting.

#### Hearing impairment

Indicators of possible 'hearing impairment'

- The child or young person may mishear words or instructions and need reinforcement and reassurance before beginning task.
- Fluctuations in attention, may struggle concentrating.
- Difficulty in understanding peers in group discussions or in noisier environments.
- The child or young person may have delayed language.
- Unable to follow whispered conversations
- May disengage with conversations or misinterpret discussions



	1
Provisions and /or strategies:	LA training from HI and SIPS service (free unless otherwise stated)
• Remove or reduce background noise.	PLEASE SEE TRAINING GRID FOR FUTHER
<ul> <li>Where appropriate, use hanging objects to support sounds bouncing back to the child's level.</li> </ul>	INFORMATION:
	Role of the Hearing Impairment service
<ul> <li>Employ techniques to monitor and</li> </ul>	Learning basic braille
support all children and young people	Role of the Hearing Impairment service
with noise levels.	Deaf Awareness
<ul> <li>Give prior warning regarding fire alarms. If appropriate use an alternative exit route.</li> </ul>	<ul> <li>Deaf awareness and supporting children with a hearing loss in a setting.</li> </ul>
<ul> <li>Ensure staff work together with other professionals e.g. Sensory Support</li> </ul>	<ul> <li>Supporting a hearing impaired child within a mainstream school.</li> </ul>
Team. Ensure all staff and visitors who	Deaf Awareness for Lunchtime Supervisors
work with the child are aware of how best to support them. They should	Training for taxi drivers and escorts.
be familiar with the child's One Page	<ul> <li>Managing Glue Ear – a workshop</li> </ul>
Profile or equivalent.	Unilateral Hearing loss
<ul> <li>Use appropriate seating and visual materials – see individual learning</li> </ul>	On Body Signing
plan for requirements.	Objects of Reference
Ensure instructions are delivered	The use of Sound Field in education
clearly and at an appropriate volume.	British Sign Language introduction
Check the lesson content has	<ul> <li>Modifying language/materials</li> </ul>
been effectively communicated and understood, particularly	Maths and the Hearing Impaired child
when delivering new information,	Phonics and the Hearing Impaired child
instructions or homework; and/or using unfamiliar vocabulary.	Swimming and the Hearing Impaired child
<ul> <li>Repeat / rephrase pertinent</li> </ul>	Deafness and Complex Needs
comments made by other children and young people ensuring the child	<ul> <li>Hearing Aid Care and maintenance – practical workshop</li> </ul>
can access those comments.	Cochlear Implant maintenance – a practical
Be aware the child / young person	workshop
may use lip-reading and visual clues to support their hearing. Ensure that	Bone Conduction Hearing Aids (BAHA's)
they are face on when you are giving	<ul> <li>Using Radio Aids</li> <li>Pisk Assessment and the hearing impaired child</li> </ul>
instructions. Try not to move around the room whilst talking.	<ul> <li>Risk Assessment and the hearing impaired child</li> <li>Deaf Awareness – classroom British Sign</li> </ul>
<ul> <li>Be aware of communication system</li> </ul>	<ul> <li>Deaf Awareness – classroom British Sign Language/ Sign Supported English</li> </ul>
development including eye contact,	
body language and facial expressions.	
body language and facial expressions.	

• Use visual reinforcement (pictures and handouts), to support learning.	Make a paper ear
<ul> <li>Consider using visual timetables and</li> </ul>	A good classroom environment
visual cues such as sand timers, to	<ul> <li>Act out how the ear works</li> </ul>
support sharing.	Training from national deaf children's society
• Be aware that during P.E. or games lessons it will be more difficult to follow instructions, particularly in large open spaces.	https://www.ndcs.org.uk/our-services/services-for- professionals/training-and-e-learning
<ul> <li>Consider that words spoken on an audio / visual recording may need a person to repeat what is being said, provide written copy and/or use subtitles.</li> </ul>	
• Consider the environment e.g. carpeting, soft furnishing, rubber feet on the table and chair legs etc. will reduce noise.	
• Seat away from any source of noise e.g. window, corridor, fan heater, projector, the centre of the classroom etc.	
• Encourage good listening behaviour: sitting still, looking and listening.	
• Encourage children and young people to ask when not sure what to do.	
<ul> <li>Establish a quiet working environment, particularly for specific listening work.</li> </ul>	
• Ensure all staff who work with a child or young person with hearing impairment (HI) are aware how best to support in school and settings.	
<ul> <li>Arrange for adults working directly with children and young people with hearing impairment to have appropriate training i.e. British Sign Language (BSL).</li> </ul>	
<ul> <li>Work together with other professionals to share strategies and advice to support the children and young people.</li> </ul>	
Consider a sound field system	

Vision impairment.	Contact VI and SIPSTeam for Vision Impairment
Deterioration in visual behaviours e.g., handwriting, copying, moving text closer to eyes, identifying peers in playground, frequently tripping, bumping and falling.	awareness, early identification, and environmental access training.
Indicators of possible 'vision impairment'	
• Wearing glasses/lenses that are not correcting vision.	
<ul> <li>Deteriorating handwriting – may be unusually small or large, or letters may be poorly formed.</li> </ul>	
• Difficulty copying accurately either from board or close to.	
<ul> <li>Remembers and understands verbal information rather than what is read or seen.</li> </ul>	
<ul> <li>When reading skips letters, lines and words and may cover an eye when reading or performing close tasks.</li> </ul>	
<ul> <li>Shows signs of poor hand eye co-ordination and over and under reaching.</li> </ul>	
• Appears clumsy and may often trip or fall.	
• Have difficulties with height, depth, or shadows.	
<ul> <li>Tires easily or easily distracted by precision tasks.</li> </ul>	
<ul> <li>Thrusts head forward to squint when looking at near/far.</li> </ul>	
• Holds equipment unusually close or at a strange angle.	
<ul> <li>Complains of headaches and/or may rub eyes.</li> </ul>	

• Eyes may have unusual appearance, e.g., clouding in front of eyes, wobbly eyes, small eyes.
<ul> <li>Tires and loses concentration more quickly than peers or appears to be frequently 'day dreaming.'</li> </ul>
<ul> <li>Difficulties with self-help skills, for example, dressing, mealtimes.</li> </ul>
<ul> <li>Less interest in activities than their peers.</li> </ul>
<ul> <li>difficulty in negotiating obstacles and/ or pathways around the environment.</li> </ul>
<ul> <li>Making unusual choices when using colour or failure to recognise and match colours in early years.</li> </ul>



Provisions and /or strategies:	Training from the RNIB
<ul> <li>Provide uncluttered space and plain backgrounds to help the child / young person focus on the appropriate</li> </ul>	www.rnib.org.uk/professionals/health-social-care- education-professionals/education-professionals/ training-for-professionals-supporting-learners-with-v
<ul><li>object.</li><li>Use auditory reinforcements.</li></ul>	<b>LA training from VI service</b> (free unless otherwise stated)
<ul> <li>Well organised classrooms/rooms/ halls with clear route ways.</li> </ul>	PLEASE SEE TRAINING GRID FOR FUTHER
<ul> <li>Accessible displays at eye level.</li> </ul>	<ul> <li>Role of the Visual Impairment service</li> </ul>
• Best seating arrangements in relation	VI Awareness
to the teacher/teaching focus and light source, including lunch time.	<ul> <li>Early identification and accessibility to learning an the environment</li> </ul>
<ul> <li>Teachers verbalising work written on the board.</li> </ul>	<ul> <li>Supporting children and young people with a</li> </ul>
<ul> <li>Clean and glare free whiteboard.</li> </ul>	visual impairment in a setting
<ul> <li>Handouts/worksheets/learning</li> </ul>	<ul> <li>Bespoke to the individual VI pupil</li> </ul>
resources clearly presented in a standard print size (Point 12) and	<ul> <li>Modification of learning resources</li> </ul>
good contrast. Avoid poor quality	An introduction to basic Braille course
photocopying.	Habilitation - Sighted guidance techniques.
rovide additional resources for	Habilitation: Mobility and independent living skills
inclusive play, for example brightly coloured and contrasting play	Habilitation: Long cane training, ILS equipment
equipment so all can play together.	<ul> <li>Specialist equipment and software</li> </ul>
<ul> <li>Consider lighting and position at group time / lunchtime.</li> </ul>	Electronic books
<ul> <li>May need encouragement to wear</li> </ul>	<ul> <li>Visual Impairment and Complex Needs</li> </ul>
glasses and support to ensure they	Cortical/cerebral visual impairment
are clean.	Early Years
• May need to wear an eye patch.	Peer VI awareness (Year 5-10)
Follow guidance from health professionals regarding eye patch	Learning basic braille (Year 5-10)
treatment.	Training for taxi drivers and escorts.
Environment:	On Body Signing
<ul> <li>Contrast e.g., between carpet and skirting, skirting and walls, walls, and doors.</li> </ul>	https://dudleyci.co.uk/the-visual-impairment-vi- service-visual-impairment-service
<ul> <li>Consider lighting, may need higher wattage or task lamps.</li> </ul>	https://www.rsbc.org.uk
<ul> <li>Yellow paint markings on steps, and any changes in surface levels.</li> </ul>	
<ul> <li>Ensure main pathways are level.</li> </ul>	

Clearly signed routes. • Working blinds in classrooms. • Doors with both push plates and handles. • Non-slip flooring in toilet areas. Highlighting of hazardous, immoveable/fixed objects e.g., playground furniture, pupil lockers. • Ensure everyone values the importance of tidying up after themselves, e.g., pushing chairs under the table, putting cushions back in the cosy area. • Provide access to quieter learning environments.



Physical sensitivity.	Whole School SEND:
Physical sensitivity including hyper and hypo responses and sensory processing	Supporting sensory differences in the learning environment
differences.	https://onlinecpd.wholeschoolsend.org.uk/unit-12/
<ul><li>Expand on what staff may see:</li><li>someone with hypersensitivity disorder may become agitated when</li></ul>	https://www.natsip.org.uk/doc-library-login/ mainstream-training-pack
hugged or spoken to in a clear, calm, and direct tone.	LA training
<ul> <li>Likewise, they may find discomfort</li> </ul>	Understanding Sensory Differences
in the smell of perfume, the taste or texture of food, or the feel of	SIS - IEYS
something on their skin or clothing (such as a name tag or sticker).	Early Years Settings
Consult with parent carers to identify	Dudley Children's Occupational Therapy
<ul><li>potential trigger times and activities.</li><li>Consider conducting a sensory audit</li></ul>	www.blackcountryhealthcare.nhs.uk/our-services/ dudley-childrens-occupational-therapy:
of the school / setting environment.	Advice for parents and professionals
<ul> <li>Share strategies and advice with all members of staff to support the child</li> </ul>	For parents: sensory processing, toileting and feedin
/ young person's sensory diet.	Motor coordination toolkit
<ul> <li>Consider referral to the Occupational Therapy Service.</li> </ul>	
• Access staff training (such as sensory integration) if needed.	
<ul> <li>Work together with other professionals to share strategies and advice to support the children and young people's sensory diet.</li> </ul>	
<ul> <li>Identify activities which help the child / young person to regulate. Use these at appropriate times of day to promote access to learning.</li> </ul>	
<ul> <li>Consider the impact of break times, lunch time and transitions. Work with the child to develop strategies which help them feel ready to learn.</li> </ul>	
<ul> <li>Consider using sensory reduction planning.</li> </ul>	
<ul> <li>Consider using individual workstations.</li> </ul>	
<ul> <li>Build resilience using timers.</li> </ul>	

Ia	asting (gustatory) differences.	
Th av te: fo	ne child / young person may have version to certain food tastes and xtures or may also seek input from ods and food textures. Break into ullet points	
•	Use visual supports to support with choices and awareness of what is for lunch, snack, dinner.	
•	Have a consistent mealtime routine involving opportunities for positive adult role modelling and positive support.	
•	Offer an element of choice, for example peas or carrots.	
•	Allow and provide opportunities for the child / young person to explore food texture with their hands.	
•	Encourage positive interactions with peers and staff to build confidence.	
•	Keep pressure to eat low, especially when trying new foods.	
•	Ensure that there are alternatives available at mealtimes and foods that suit a sensory preference.	
•	Plan carefully how the child / young person will access meals and snacks to reduce stress and any pressure to eat.	

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#### Smelling (olfactory) differences.

The child / young person may have a strong aversion to smells or indeed seek smells out. Break into bullet points

- Set up a 'no scent' zone, free from air fresheners, flowers, perfumes etc.
- Staff should consider the perfume/ aftershave and other products that have a smell that they wear.
- Consider if the cleaning materials have a strong smell.
- Provide scented resources.
- Allow the child or young person to have opportunities to bake and cook to create different smells.
- Be aware of smells from the outdoor environment, for example refuse collection and mitigate these smells where possible.

-	web (tootile) differences
T	ouch (tactile) differences.
•	Complaining about clothing or shoes, even though they seem to fit fine and are made out of fabrics that are usually comfortable
•	Objecting to having their hair cut or combed, or having their teeth brushed
•	Dislikes getting dirty
•	Dislikes activities such as finger painting or playing with "squishy" art supplies such as modeling dough or clay
•	Appearing to be "picky eaters" because certain food textures are hard to tolerate
•	Flinching or turning away when the wind blows against their face
•	Complaining about mild changes in temperature: feeling too hot or too cold when the air is actually temperate.
•	Consider the proximity of others - would a carpet tile help?
•	Allow the child to enter large group settings, eg assemblies once everyone has settled.
•	If helpful, allow the child / young person to be at the front or the back of a line.
•	Approach the child / young person within their visual field.
•	Consider the challenges that the child / young person may face with different floor surfaces.
•	Ensure that there are opportunities for the child / young person to engage in sensory opportunities to meet their tactile seeking needs.

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	roprioceptive differences.
	ne child / young person may seek extra put for their proprioceptive sense.
•	Difficulty performing normal childhood tasks
•	Clumsiness
•	Uncoordinated
•	Difficulty planning or carrying out tasks (unable to finish task as cannot direct limbs to make the movement)
•	Difficulty finding the right level for the movement, (for example pushing too hard when using pencil and snapping it, not gripping bottle hard enough and dropping it)
•	Trouble maintaining postural stability (unable to stand on one foot, slumping at their table, have to support head with their hands)
•	Offer age appropriate movement opportunities for the child / young person to regulate. For example, run, jump, join in weight bearing or deep pressure activities.
•	Recognise that a child/young person may seek further sensory input via leaning. For example, consider table or wall pushes.
•	Be aware that the child/young person may rock on their chair, or place the chair legs on their feet to seek "grounding".
•	Ask the child/young person to carry a box or bag (heavy) of toys or work to their next activity.
•	Offer jumping on trampette.
•	Suggest using a space hopper.
•	Use timers to support the start and finish of the activity.
•	Provide sensory circuits or regular access to a gym trail.

Interoceptive differences.
may have trouble knowing when they feel hungry, full, hot, cold, or thirsty.
may struggle to notice the messages from their bladder or bowel that they need the potty or toilet.
may find it difficult to manage their emotions and social interactions. If someone does not recognise the signals for an emotion, they are not able to respond to it. This can result in anger becoming rage, sadness becoming distress and so on.
<ul> <li>Ensure adults regularly talk about internal feelings both physical and emotional.</li> </ul>
Consider building mindful activities into daily routine.
<ul> <li>Consider using body mapping to support the child or young person in developing their interoceptive awareness.</li> </ul>
Consider activities that link physical sensations to labelling emotions.

#### **Physical disability**

•	Ensure that transition arrangements
	have been put into place prior to the
	child/ young person joining the class.
	This would include ensuring that the
	necessary adaptations are in place,
	such as:

- o Undertaking appropriate moving and manual handling training.
- o Use of support equipment e.g. work chairs, walkers, standing frames, hoists.
- Ensuring that appropriate accessibility plans are in place e.g. Personal Emergency Evacuation Plan.
- Undertaking appropriate care training and use of school and setting's hygiene suites.
- Procuring and knowing how to use/ maintain (where necessary) with operated life-skills / curriculum equipment.
- Use adapted equipment to facilitate access specific activities throughout the day e.g. cutlery, crockery, scissors.
- Maintain progress by having a detailed handover with the child/ young person's previous teacher to have a clear understanding of their strengths, coping strategies and any particular areas of need. Consider those that also relate more broadly to their development or emotional well-being such as opportunities to develop confidence or developing and maintaining friendships.
- Keep a focus on promoting independence and resilience within planning and differentiation.
- Provide accessible 'stretch' opportunities.

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#### Medical needs

In addition to the quality first teaching expectations outlined in Section 1, additional provision and interventions maybe required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and classroom practice.

Determine if the child / young person is under the care of health professionals and, if so, work with parent carers and the SENCO to gain up to date assessment information.

Refer to relevant professionals if needed for further assessment and advice.

Consider the adaptations needed to ensure that the child / young person is able to access learning with their peers as much as possible.

Work together with other professionals to share strategies and advice to support the child/young person.

Severe and complex medical needs including a life-threatening diagnosis	LA training from PIMIS service (free unless otherwise stated)
or condition.	
Ensure that staff have the equipment	PLEASE SEE TRAINING GRID FOR FURTHER INFORMATION:
they need, e.g. support equipment such as lockable medicine cabinets,	Safer people handling
first aid bags, fridges.	Risk assessment -for supporting children and young people with physical impairments and medical
Ensure that transition arrangements have been put into place prior to the child / young person's entry to class. This includes necessary adaptations	conditions
	Supporting children and young people with medical conditions in schools and early years settings
such as: o Having a good understanding of	Other courses: PIMIS offer a range of courses designed around supporting children and young
any documents related to managing medical needs.	people with physical impairments and medical conditions in the classroom; these courses work from a diagnosis perspective to develop an understanding
o Accessing training prior to transition, such as rotated medication / care training, or manual handling.	of how children and young people learn and what strategies are required in the classroom. We also offer courses to develop the understanding of a particular
o Consider how staff establish and maintain good communication links with parent carers and share information in a timely manner.	diagnosis and how this impacts on the child or your person with the view to improving outcomes for the groups of children and young people. Some of these courses are offered as generic courses or to schools on a bespoke basis depende on the needs of their pupil's staff requirements and knowledge for experience base.
<ul> <li>Identifying what additional support may be required e.g. diet, toileting, swimming, use of PE and science equipment, cooking, breaktime and to attend clubs and trips.</li> </ul>	
• Ensure staff feel supported and equipped to support the child or young person, their family and the class through any losses. Discussing with your SENCO / lead professional for support. This could include access to bereavement training.	
• Review and update individual support plans with the SENCO to ensure that they reflect the level of need being presented and are informative for other members of staff (e.g. cover teachers).	
<ul> <li>It may also be helpful to discuss use of ICT equipment with the SENCO to support communication and learning.</li> </ul>	

•	Provide achievable opportunities for child or young person to experience success and be as independent as possible. For example, providing scaffolding opportunities to take part in paired or small group work.	
•	Consider fatigue levels when differentiating.	
•	Consider how you could promote regular home school contact when / if the child / young person is not attending the school / setting to maintain a 'sense of belonging' with peers and the community.	
•	Absence due to medical needs may require a reintegration plan to address learning gaps – consider talking to the SENCO or lead professional about this.	
•	Ensure advice from medical professionals is recorded along with support received in the child's individual support plan. This will need to be regularly reviewed and updated.	

### GLOSSARY OF ACRONYMS

ABA - Applied behavioural analysis ADD - Attention Deficit Disorder ADOS - Autism Diagnostic Observation Schedule ADHD - Attention Deficit and Hyperactivity Disorder AET - Autism Education Trust AP - Alternative provision APD - Auditory Processing Disorder APDR - Assessment, Plan, Do, Review AR - Annual Review AS - Asperger Syndrome ASC - Autistic Spectrum Condition ASD - Autistic Spectrum Disorder ASW - Advanced Social Worker AWM - Autism West Midlands

BCHFT- Black Country Healthcare NHS Foundation Trust BAS – British ability scales

CAAS – Childrens Autism assessment Service CAMHS - Child and Adolescent Mental Health Service CBT – Cognitive Behavioural Therapy CDT- Children with Disabilities Team CFD – Child Friendly Dudley CIN - Child in Need CIPS - Communication Interaction Physical and Sensory Team CLA - Child Looked After CiC – Child in Care CME - Child missing education CoP - Code of Practice **COPM-** Canadian Occupational Performance Measure **CP** - Child Protection **CPD-Continued Professional Development CCP-Centre for Professional Practice CPM - Costed Provision Map** CQUIN- Commissioning for Quality and Innovation CYP - Children & Young People CYPF - Children, Young People and Family

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**DBV-** Delivering Better Values

- DCD Developmental Co-ordination Disorder (Dyspraxia)
- DD Disability Discrimination
- DfE The Department of Education
- DLA Disability Living Allowance
- DSCO- Designated Social Care Officer
- DSR Dynamic support register
- DWP Department for Work and Pensions

EAL - English as an additional language
EBSNA- Emotionally Based School Non-Attendance
EHE - Elective home education
EOTAS - Educated other than at school
EYFS - Early Years Foundation Stage
EHC - Education, Health and Care
EHCNA - Education, Health and Care Needs Assessment
EHCP - Education, Health and Care Plan
EP - Educational Psychologist
EPS - Education Welfare Officer

FAS - Foetal Alcohol Syndrome
FE - Further Education
FH - Family Hubs
FSM - Free School Meals
FSW - Family Support Worker

GP- General Practitioner GSP - Graduated Support Plan

HAF- Holiday Activities Fun
HE - Higher Education
HV - Health Visitor
HI - Hearing Impairment
HLTA - Higher Level Teaching Assistant
HWBB –Health and wellbeing board

ICB – Integrated care board ICP – Integrated care partnership IEYS - Integrated Early Years Service IFSW – Intensive Family Support Worker IP – Inclusive Practice

JSNA-Joint Strategic Needs Assessment

KS - Key Stage

LA - Local Authority

LO - Local Offer

LSA - Learning Support Assistant

MDT – Multi-Disciplinary Team MH – Mental health MLD - Moderate learning difficulties MPFT – Midlands Partnership NHS Foundation Trust

ND – Neuro-Developmental NICE- National institute for Health and Care Excellence NTAS – National training and advisory service OAIP – Ordinarily Available Inclusive Provision OCD - Obsessive Compulsory Disorder ODD - Oppositional Defiant Disorder OT - Occupational Therapy / Occupational Therapist PCF – Parent Carer Forum
PB – Personal budget
PCA - Person Centred Approaches
PD - Physical Disability
PDA - Pathological Demand Avoidance
PEP – Personal Education Plan
PFA - Preparing for Adulthood
PHB- Personal Health Budget
PIP – Personal Independence Payment
PMLD - Profound and Multiple Learning Difficulties
PP - Pupil Premium
PRU - Pupil Referral Unit

RCHT- Royal College of Occupational Therapy RIPE – Reduction in Pupil Entitlement (Part-time timetable)

SALT - Speech and Language Therapy SC - Social Care SEMH – Social emotional and mental health SEN - Special educational needs

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SEND - Special educational needs and / or disability.

SENDIASS – Special Educational Needs & Disability Information, Advice and Support Service

- SENDIST Special Educational Needs and Disability Tribunal
- SENCO Special Educational Needs Co-ordinator
- SI Sensory Impairment
- SI Supported internship
- SIS Sensory Inclusion Service
- SLCF- Speech Language and Communication Framework
- SLCN Speech Language and Communication Needs
- SLD Severe Learning Difficulties
- SLT Senior Leadership Team
- SPA- Single Point of Access
- SpLD Specific Learning Difficulties
- SLT Speech and Language Therapy / Therapist
- SSW Senior Social Worker
- SW Social Worker

- TA Teaching Assistant TAC - Team around the child TAF - Team around the family TEH – Targeted Early Help TOMS – Therapy Outcomes Measures
  - VI Visual Impairment (loss of sight)
  - YJS Youth Justice Service YP - Young People / Young Person

