

Graduated Response to Special Educational Needs in Mainstream Schools (Early Years)

2025



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The Education Authority (EA) is committed to supporting schools and educational settings to help enable the learning that children and young people with special educational needs may experience. The services we provide directly contribute in many ways to educational performance in our schools, impact on the life opportunities of our children and young people and are underpinned by our EA values - openness, respect, reflection, responsibility, excellence and equality.

Our dedicated teams of professionals have a clear vision: **to help and support every child to be the best that they can be**. The goal is to provide excellent education support services to all. The **focus** must always be on the children and young people on whose lives we impact every day. We are **accountable** to them as well as their parents and carers, schools, and the wider community.

*the term schools refers to all mainstream schools and educational settings.

*the term parents refers to all parents/carers and guardians

All children are entitled to an education that is appropriate to their needs, promotes high standards and allows them to fulfil their potential. A high-quality education enables a child to achieve their best, be confident, lead a fulfilling life and make a successful transition to the next stage of their school life or onwards towards adulthood. All schools operate in a well-developed inclusive educational policy environment. This includes policies and strategies to give effect to raised standards, school improvement, tackling underachievement and low achievement, providing for additional needs and special educational needs.

(Draft CoP Schools' Section)

This guidance sets out and reflects a **graduated response**, which nursery, primary and post-primary schools should follow, in order to address the needs of some of our most vulnerable learners. The vast majority of children and young people with additional needs will have those needs met through the **graduated response** available in their mainstream schools.

It sets out the learning continuum for a range of educational needs and identifies examples of the types of **intervention and support** available through whole school educational provision, with **high quality teaching and learning**, to specialist external provision from EA services. In addition, it outlines the **statutory** duty placed on the Education Authority to monitor and evaluate the effectiveness of special educational provision across the stages of the Code of Practice in line with the **graduated response**.

The EA vision is committed **to providing the right support in the right place at the right time** for all children and young people.

In developing this guidance, consideration has been given to the principles and processes outlined in the **“Special Educational Needs Code of Practice” (2020, draft version.)** This document should be used as a key reference in supporting and developing provision for children and young people identified as having a special educational need.

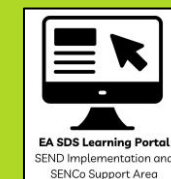


The arrangements set out in Section 3 reflect a “graduated response” which nursery, primary and post primary schools should follow in order to address a child’s difficulties in learning.

(Draft CoP Schools’ Section)

Throughout the document there are many links that will take you directly to helpful resources and materials.

*When you have registered and click on this **icon**, it means you will find the document in the new **SEND Implementation and SENCo Support area** in the EA SDS Learning Portal.*



The Draft SEN Code of Practice states that...

The continuum of whole school educational provision and special educational provision is delivered through a continuous and systematic cycle of **identification, planning, taking action, monitoring, evaluation and review** by the school to enable all children, including those with SEN, to learn and progress.

(Draft CoP – Schools' Section)

The continuous and systematic processes within each stage reflect a **graduated response** aimed at identifying the special education provision to which a child responds positively resulting in the child making progress and providing for improved outcomes.

(Draft CoP - Schools' Section)

Special educational provision is characterised as the implementation of reasonable adjustments (including normal differentiation), **additional teaching and learning strategies** and approaches and learning support drawing from the school's special educational provision map.

(Draft CoP – Schools' Section)

Note: In addition to the Code of Practice, schools should draw from any EA (or other) guidance provided to assist in the auditing, planning, implementation, and review of special education provision mapping.


What is the Graduated Response?

Most pupils with special educational needs and disabilities will be educated in mainstream settings. The **Graduated Response** is the process schools should employ when **assessing the needs of children and young** people and providing appropriate provision. This provision should reflect increasing intensity as the child/young person moves through the stages of the Code of Practice.

It provides a **continuous cycle to identify, plan, action, monitor, evaluate and review** in response to the progress the child/young person makes with their learning.

The graduated response **outlines the steps a school should apply** before taking a decision on the level of provision needed to support a child/young person with special educational needs. This learning continuum **includes whole school and special educational provision**. It describes the steps school should take before any decision is made to seek outside agency advice.

With careful planning (**'Special Educational Provision Mapping'**), practitioners can develop effective interventions without specialist expertise.



The views of the child/young person and parents will be considered at each stage in the process.

What is the Graduated Response?

The Graduated approach encompasses an array of strategies which are underpinned by a number of central principles:

- ☒ All children/young people are entitled to high-quality teaching and learning
- ☒ All children/young people can learn and make progress
- ☒ SEN is a whole school responsibility, and all teachers are teachers of SEN
- ☒ A differentiated curriculum is not SEN provision - differentiated learning opportunities should be given to all learners
- ☒ Provision for a child/young person with SEN should match the nature of their needs
- ☒ There should be regular recording of a child's/young person's SEN using the 'Personal Learning Plan' (PLP). The PLP process includes setting expected outcomes, mapping provisions and identifying strategies or actions to help the child/young person make progress. School will monitor, evaluate and review the effectiveness/impact of provision and the outcomes achieved for future planning.

The IPAMER Model



The Cycle of Provision includes:



Identify

When a pupil is experiencing difficulties with learning, the teacher will assess their needs, drawing on observations, professional judgement, formal and informal testing and their experience of the pupil. This will help the teacher **identify** the pupil's priority need(s).

School should always capture the views of both parents and pupils within this process.



Plan

All teachers and support staff who work with a pupil should be made aware of their needs. **Planning** should outline or include the provision that needs to be put in place to help the pupil make progress.



Action

Action which includes high quality teaching and/or planned provision should be implemented to support the pupil in making progress.



Monitor

Within an agreed timeframe, action/provision needs to be **monitored** closely, to establish if effective pupil progress is being made. School should use evidence, observations, data (e.g. ongoing assessments, standardised test results or profiles) to assist with **monitoring**.



Evaluate

School will analyse the impact of the action/provision put in place for the pupil. They will **evaluate** the progress a pupil has made, examine improvement and consider further areas to be addressed.



Review

School should **review**, refine, and revise their decision about the provision required as they gain a richer understanding of the pupil's needs. It is necessary to consider what is most effective in helping the pupil secure good outcomes.

Review decisions should be made in consultation with the pupil and parent.

Whole School Educational Provision (WEP)

A **whole school** approach and ethos to promote inclusive practice is central to the graduated response. Whole school educational provision is at the start of the continuum of educational provision. **All teachers**, using their **professional judgement**, based on **observations, assessments**, and **insight** to the child, should **recognise and respond** to the different abilities, aptitudes, interests, and diverse needs of their pupils through teaching and learning which offers a continuum of support. These general arrangements in a school **recognise that children are individual, learn in different ways and at their individual pace.**



Planning the classroom organisation to accommodate all learners

Using a wide range of strategies, effective differentiation and a variety of learning opportunities

Using alternative teaching approaches and learning strategies

Whole school educational provision will include:

Having effective classroom practice to support the ability range of the children in the class

Providing help within the curriculum framework

High Quality Teaching

The provision of high-quality teaching is the first step in responding to pupils who have or may have SEN at whole school level.

Ensuring every teacher is supported in delivering high-quality teaching is essential to achieving the best outcomes for all pupils, particularly the most disadvantaged among them.

Some elements of high-quality teaching include, **setting high expectations**, promoting good **progress** and outcomes, demonstrating **sound subject and curriculum knowledge**, **planning** and **teaching well-structured lessons**, **adapting teaching** to different pupils, making accurate use of **assessment** to check for understanding and **managing behaviour** effectively for a safe learning environment.

Understanding Adaptive Teaching

“Normal differentiation within the curriculum and learning support through educational provision linked to high quality teaching in order to **cater for the different aptitudes and abilities** within the classroom (including reasonable adjustments and learning support) is **not** special educational provision.” (*Draft CoP, Schools’ Section*).



Manageable

Ensuring all pupils are given tasks that match their level of ability and attainment.



Achievable

Presenting teaching and learning opportunities so that pupils can demonstrate what they know, understand and are able to do.

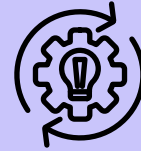


Motivating

Allowing pupils to achieve success and feel the learning experience has been worthwhile.

Contributory Factors which could be affecting a Child's Learning within Whole School Educational Provision

If a child/young person is not making progress with their learning, a school should consider these contributory factors as not all difficulties that a child may experience are due to them having special educational needs. The **child/young person is likely to be more responsive the earlier that a school identifies and takes steps to address** the contributory factors which may be having an adverse impact on their education and learning. It is often the case that there may be overlapping factors.



Hearing/Vision/
Medication needs/
Disability



Children under specific
circumstances



Under-achievement



Attendance



Peer
Relationships



Family
Circumstances

Reasonable Adjustments

- The reasonable adjustments' duty is owed to all disabled pupils, affects all policies, procedures, and practices. It involves **timely discussions** with parents and pupils, **gathering information** where appropriate from the EA and/or HSCT.
- Reasonable adjustments are the actions that a school takes in order to **avoid** putting a pupil (or prospective pupil) with a disability at a **substantial disadvantage** compared to other pupils.
- It should be noted that there is no uniform definition of what reasonable means, this will depend on the context of the individual school setting as well as the needs of the child with a disability.

(Draft CoP Schools' Section)

Where do reasonable adjustments apply?

- | | |
|-------------------------|------------------------------------|
| • Teaching and learning | • School clubs and activities |
| • The curriculum | • Homework |
| • Class organisation | • Assessment and exam arrangements |
| • Break and lunchtime | • Timetabling |
| • School policies | • School trips |
| • School uniform | |

...the whole life of the school



The requirement to make reasonable adjustments applies whether or not a child also has an associated SEN.

The requirement is both anticipatory and reactive. Many children with SEN will have a disability but not all children with a disability have SEN.

(Draft CoP Schools' Section)



Making Reasonable Adjustments in School

Sometimes support is about making '*reasonable adjustments*' and **doing things a bit differently**. It can include having a safe place/quiet room where the child can go, carefully choosing where a child sits in the classroom, extra help or specialist equipment.



Schools and the EA should take account of the guidance provided in the Equality Commission's Disability Discrimination Code (3:12).

Disability Discrimination Code of Practice for Schools

Accessibility Planning

Under SENDO, 2005 Supplement (education-ni.gov.uk) [Supplement to the Code of Practice](#), an accessibility plan is required by a school to show how the Board of Governors promote and plan to improve the extent to which disabled pupils can access education across the following three areas:

- [Planning Guidance](#)
- [Leaflet](#)
- [Easy Read Guide](#)



The physical environment

Anticipatory duty to increase accessibility of the school premises, lighting and paint schemes to help visually impaired children, lifts and ramps to help physically impaired children, carpeting and acoustic tiling for classrooms to help hearing impaired pupils.



Access to information

Information normally provided in writing (such as handouts, timetables and textbooks) can be made more accessible by providing this: in Braille, in large print, on audio format, as a signs and symbol system.



The curriculum

Adjustments that would help children with disabilities have better access to the curriculum might include changes to teaching and learning arrangements, classroom organisation, timetabling, support from other pupils, and the school curriculum.

Sometimes when a child or young person is identified as needing support, the first step a school may take is to draw up a **Record of Concern**. This document outlines the areas of difficulty the child/young person is experiencing and addresses how the school intends to implement support for the child/young person. This process includes discussion with the child/young person and their parents. After an agreed timescale, progress will be reviewed, and a decision made whether to place the child/young person on the school's SEN register.

- [SEND TEAM SCHOOL RESOURCE – Record of Concern](#)
- [DE CoP Annex: "Where there is a concern" Flowchart and Checklist](#)



Definition of SEN

The Education Order (Northern Ireland) 1996 defines the meaning of **special educational needs** and **special educational provision**.

*A child has a **learning difficulty** if they:*

*(a) have a **significantly greater difficulty in learning** than the majority of children their age, and/or*

*(b) Have a **disability which either prevents or hinders** them from making use of everyday educational facilities of a kind generally provided for children of their age in ordinary schools.*

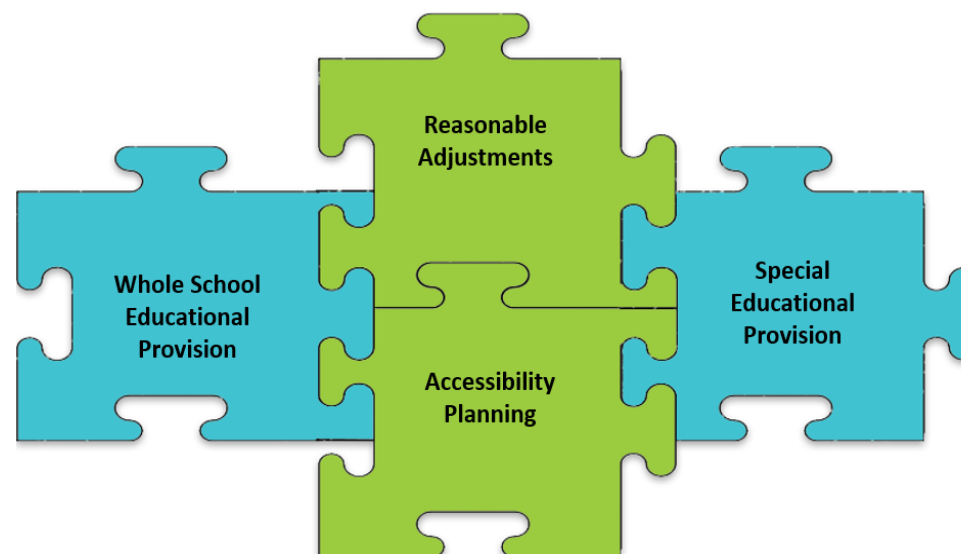
A child has special educational needs if he has a learning difficulty which calls for special educational provision to be made for him.



Within the SEN Framework, whilst recognising the existence of a medical condition, disability, or development delay, it is the child/young person's **learning difficulty which calls for special educational provision to be made** and the child/young person's response to that provision which is key.

Special educational provision means educational provision, which is **additional to, or otherwise different** from, the educational provision made generally for other children of the same age in mainstream schools.

Special educational provision is characterised as the **implementation of reasonable adjustments** (including normal differentiation), **additional teaching**, learning **strategies**/approaches and learning support drawing from the school's special educational provision map.



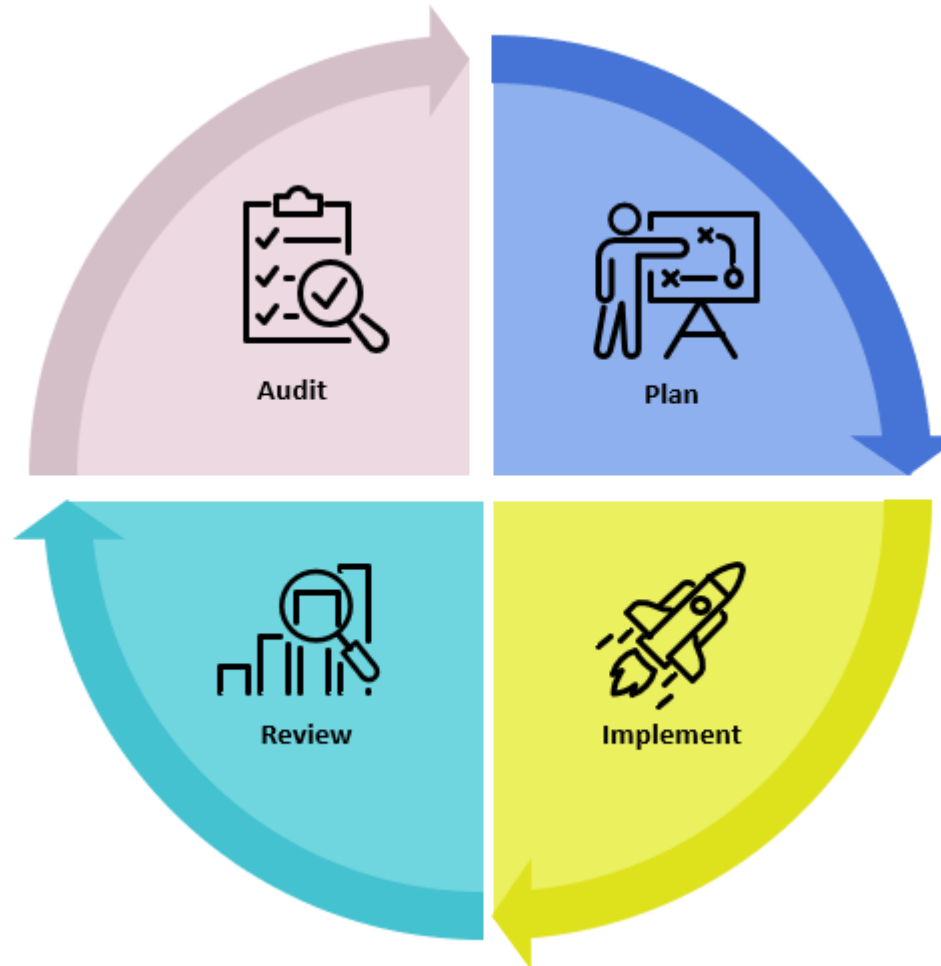
The school's map of its special educational provision under each of the five overarching SEN Categories is a key resource for a school to draw from in determining the appropriate special educational provision for a child.

(Draft CoP: Schools' Section)

Special Educational Provision (Provision Mapping)

Information within the special educational provision map should:

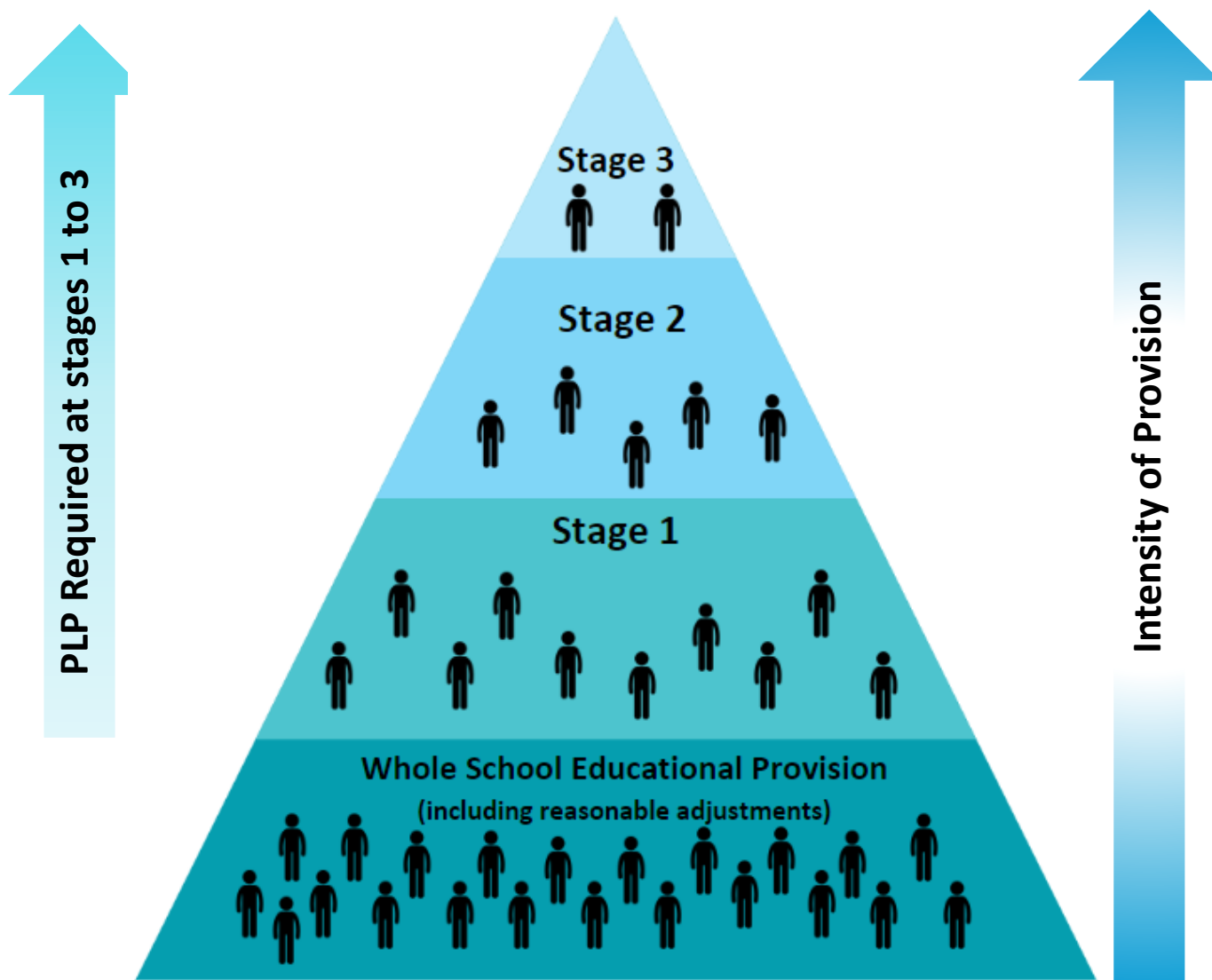
- Be accurately recorded to document the SEN support that has been provided by the school
- Evidence the impact the provision has made
- Be disseminated throughout the school to promote whole school ownership
- Be updated at least annually, to reflect good practice and the changing needs of children/young people
- **Map the types of special educational provision delivered to support each of the three stages of the Code of Practice**
- Be developed based on the five overarching SEN Categories as set out in DE guidance 2019 [SEN and Medical Categories](#)
 - Cognition and Learning
 - Social, Behavioural, Emotional and Wellbeing
 - Speech, Language and Communication
 - Sensory
 - Physical



For additional resources and information on Provision Mapping see link below:

- [Link to SEND Implementation and SENCo Support Provision Mapping folder](#)

Graduated Response Model of Provision



KEY:

SpEP - Special Educational Provision

WEP - Whole School Educational Provision

NB: It is recognised that for some children the complexity of their needs will be clear from the outset and swift action will be required, moving immediately to requesting external provision or a statutory assessment; this will, in most cases, be the professional judgement of the school who have the day-to-day contact. (Draft CoP, Schools' Section)

Personal Learning Plan (PLP)

The PLP sets out a programme of special educational provision for every child identified as having SEN and for whom special educational provision is required. A PLP describes what difficulties a child/young person is having and what the school is doing to meet their needs.



The PLP includes:

- ☒ Expected outcomes set for, or in collaboration with, the child/young person
- ☒ Relevant school assessment information about the child (if appropriate)
- ☒ Teaching strategies and resources to be used
- ☒ Monitoring and review arrangements
- ☒ The special educational provision to be put in place
- ☒ Progress made by the child/young person as a result of the special educational provision made for them
- ☒ Views of the child/young person and parent
- ☒
 - [CCEA PLP Microsite](#)
 - [Draft SEN Code of Practice](#)

- [PLP Easy Read](#)
- [Parent/Carer leaflet](#)

Stages of Special Educational Provision

Stage 1 School Delivered Provision	Stage 2 School delivered special educational provision plus external provision	Stage 3 Statement of Special Educational Needs
<p>Following discussion with the parent, or child/ young person, the teacher, working with the Learning Support Co-ordinator (LSC), has identified that it is necessary for the school to make special educational provision for the child/young person.</p> <p><u>DE Annexes Flowcharts and Checklists(Nursery)</u></p>	<p>The child/young person will move to stage 2 once any external special educational provision is being implemented.</p> <p>At stage 2, there will be close involvement between the EA/Health and the school. The school will continue to make full use of the range of strategies and provision within the school's special educational provision map, supplemented by EA and or Health, in order to achieve progress.</p> <p><u>DE Annexes: Flowcharts and Checklists(Nursery)</u></p>	<p>The child/young person will move to stage 3 once a statement of Special Educational Needs is in place. Stage 3 includes school and EA delivered special educational provision plus any relevant treatment or service identified by an HSC Trust.</p> <p><u>DE Annexes: Flowcharts and Checklists(Nursery)</u></p>
<p>Within the graduated response to addressing a child/young person's SEN, in the majority of cases, progress will be made through Stage 1</p>	<p>Stage 2 includes the statutory assessment process by EA.</p> <p>While the EA is considering whether to carry out a statutory assessment and, if this is deemed appropriate, throughout the statutory assessment process, the school should continue to implement, monitor and review the child's PLP.</p>	<p>The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust. The child will continue at stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.... Should the EA determine the child no longer requires a statement, the child will revert to either stage 2 or stage 1 on the direction of the EA.</p>

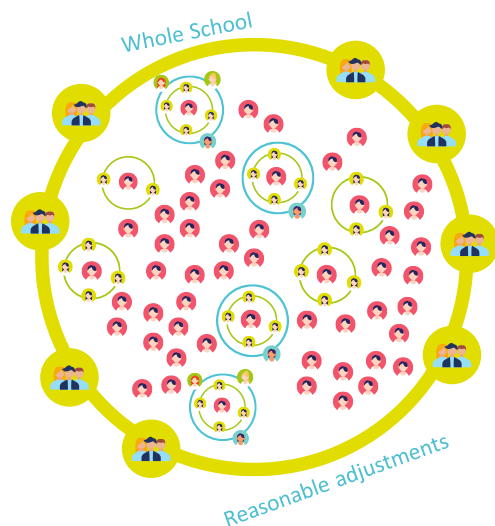
What happens at each stage?

	Stage 1	Stage 2	Stage 3
Identify	<ul style="list-style-type: none"> The child/young person is identified as needing placed on the school's SEN register. The child/young person and parents are included in this decision The appropriate overarching SEN category/ies are identified 	<ul style="list-style-type: none"> The child/young person is now placed at stage 2 on the school's SEN register Any additional SEN category/ies identified are recorded by the school 	<ul style="list-style-type: none"> The child/young person is now placed at stage 3 on the school's SEN register Any additional SEN category/ies identified on the child/young person's statement are now recorded by the school
Plan	<ul style="list-style-type: none"> A PLP is prepared to reflect the SEN category (or categories) The school use their special educational provision map to draw upon appropriate provision The school creates PLP expected outcomes and employs strategies to support the child/young person 	<ul style="list-style-type: none"> The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision The school in conjunction with the external service creates new PLP expected outcomes and employs strategies to support the child/young person 	<ul style="list-style-type: none"> The PLP is updated to record that the child is now at stage 3 and to reflect the content of the statement in the setting of expected outcomes based on the objectives of special educational provision The nature and extent of the EA's provision, including any relevant service/treatment the HSC Trust are to provide, and any additional school provision or modifications to the curriculum, as itemised in the statement are included in the PLP The school taking account of the statement objectives will plan for the inclusion of the additional provision offered from EA/Health School will then create new PLP outcomes and employ strategies to support the child/young person
Action	<ul style="list-style-type: none"> All those involved in providing for the child will implement the actions as agreed in the PLP 	<ul style="list-style-type: none"> All those involved in providing for the child will implement the actions as agreed in the PLP 	<ul style="list-style-type: none"> All those involved in providing for the child will implement the actions as agreed in the PLP

What happens at each stage?

	Stage 1	Stage 2	Stage 3
Monitor/ Evaluate	<ul style="list-style-type: none"> The planned actions will be monitored and reviewed at regular intervals 	<ul style="list-style-type: none"> The planned actions will continue to be monitored and reviewed at regular intervals by both school and EA/HSCT 	<ul style="list-style-type: none"> The planned actions will continue to be monitored and reviewed at regular intervals by both school and EA/HSCT
Review	<ul style="list-style-type: none"> The PLP review should provide information as to whether the pupil has achieved the expected outcomes, the implemented strategies were relevant and/or appropriate, and the provision made was effective Discuss and decide appropriate CoP stage and impact of provision In the event of the child not making progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision. The PLP should contain the core information/evidence of the school's actions to inform a request 	<ul style="list-style-type: none"> The PLP review should provide information as to whether the pupil has achieved the expected outcomes, the implemented strategies were relevant and/or appropriate, and the provision (school based & external) made was effective Discuss and decide appropriate CoP stage and impact of provision Many pupils will make progress through the delivery of stage 2 provision and following a period of support will no longer need external provision. In the event of the child not making progress, despite accessing external support, consideration may be given to making a request for statutory assessment 	<ul style="list-style-type: none"> The PLP review should provide information as to whether the pupil has achieved the expected outcomes, the implemented strategies were relevant and/or appropriate The review will consider if the provision provided by school and EA are effective in meeting the needs of the child/young person The review of the PLP will also form the key basis of the educational information to support the annual review of the statement

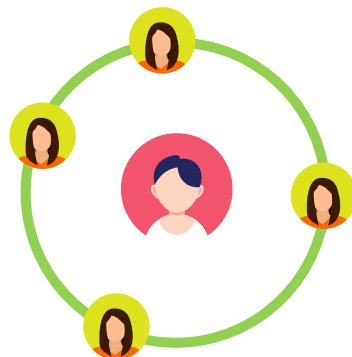
The Graduated Response – A Continuum of Support



Whole School Educational Provision

includes common strategies, approaches, differentiated/adaptive teaching, and learning support which help all children to access the curriculum. The majority of children/young people's educational needs are met through whole school educational provision.

Stage 1



Stage 1 Special Educational Provision

At this stage of the Code of Practice, special educational provision is made by the school. The child or young person will require a PLP. The majority of children and young people with SEN will have their educational needs met through this stage of provision.

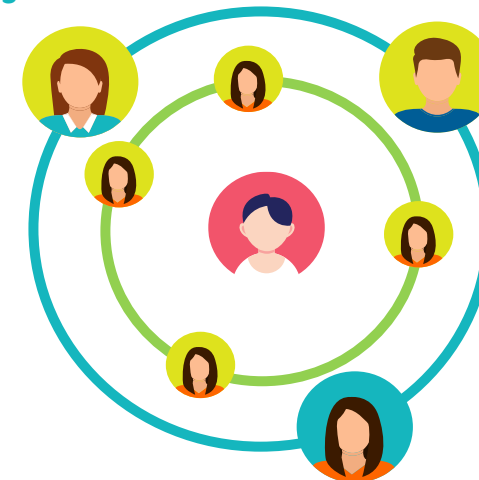
Stage 2



Stage 2 Special Educational Provision

At this stage of the Code of Practice, special educational provision is made by the school plus external provision from e.g. the EA or an HSCT. The child or young person will require a PLP. Responsibility for teaching and learning lies with the school, plus external provision from the EA. A smaller number of children and young people will need this provision.

Stage 3



Stage 3 Statement of Special Educational Needs

At this stage of the Code of Practice, special educational provision is made by the school, EA plus any relevant treatment or service identified by a HSCT. The child or young person will require a PLP. School will put in place reasonable adjustments, school delivered special educational provision plus EA provision as set out in a statement. A smaller number of children and young people will need this provision.

** A child/young person's views and parent views are required at all stages.*

SEN Categories

This section is divided into the five overarching SEN categories. It can be read and used as a 'standalone' guidance document for schools.

When reading the indicators of need and descriptors of provision for each overarching SEN category it is important to bear in mind that a child or young person may display some or all of the difficulties described and may have a range of needs across the categories.

The indicators of need and descriptors of provision are **examples** and are **not** an exhaustive or prescriptive list.



Cognition and Learning



Social, Behavioural,
Emotional and
Wellbeing



Speech, Language and
Communication Needs



Sensory



Physical
Needs

Cognition and Learning

The Graduated Response - Early Years



Cognition and Learning – Early Years

Cognition and Learning relates to the thinking skills and thought processes that a child displays. All children within early years develop at varying rates. A child with cognition and learning difficulties will have greater difficulty in learning than the majority of children of the same age and may display difficulties in:

- **Memory skills**
- **Reasoning skills**
- **Organisational skills (including written and spoken language, task completion)**
- **Sequencing**
- **Problem solving**
- **Concepts**
- **Motor Skills (Fine and Gross)**

The child may demonstrate:

- Difficulty with acquiring new concepts
- Limited imaginative and repetitive play
- Fleeting attention
- Difficulty with the acquisition of language/literacy/numeracy
- Poor self-esteem and motivation

The child's difficulties may lead to:

- Poor self-esteem
- Social difficulties
- Emotional difficulties
- Frustration
- Poor concentration



Cognition and Learning relates to the thinking skills and thought processes that a child displays.

All children within early years develop at varying rates.

A child with cognition and learning difficulties will have greater difficulty in learning than the majority of children of the same age and may display difficulties in:

- **Memory skills**
- **Reasoning skills**
- **Organisational skills (including written and spoken language, task completion)**
- **Sequencing**
- **Problem solving**
- **Concepts**
- **Motor Skills (fine and gross)**



Moderate Learning

Difficulties (MLD)

Pupils with MLD will learn at a slower pace and have greater difficulty than their peers in all academic aspects of the curriculum. On standardised tests of ability and attainment, they are likely to have levels at or below the second percentile i.e. the lowest 2% of age-related peers. Pupils with MLD require a differentiated curriculum and a multi-sensory approach to their learning. With tailored learning opportunities, the majority of pupils with MLD make good progress in mainstream schools.

A child or young person with **moderate learning difficulties** may have difficulties with:

- Memory Skills, Reasoning Skills, Organisational Skills (including spoken and written language, task completion)
- Sequencing
- Problem Solving
- Concepts
- Motor Skills (fine and gross)

Cognition and Learning relates to the thinking skills and thought processes that a child displays.

All children within early years develop at varying rates.

A child with cognition and learning difficulties will have greater difficulty in learning than the majority of children of the same age and may display difficulties in:

- **Memory skills**
- **Reasoning skills**
- **Organisational skills (including written and spoken language, task completion)**
- **Sequencing**
- **Problem solving**
- **Concepts**
- **Motor Skills (fine and gross)**



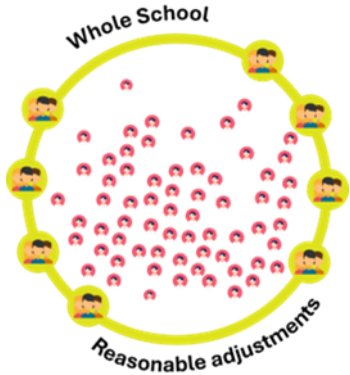
Severe Learning Difficulties (SLD)

Pupils with SLD have significant intellectual or cognitive impairments with attainment levels normally at or below the 0.1 percentile and will require a higher level of support than their age-related peers in all areas of the curriculum and in most activities throughout the school day. Depending on their individual profile, some pupils with SLD make good progress in mainstream school with additional support and where this is the parental preference.

Profound & Multiple Learning Difficulties (PMLD)

Pupils with PMLD have significant and complex learning needs. In addition to severe learning difficulties, they will have significant SEND in at least two or three other areas e.g. physical disability, sensory impairment, and medical condition(s). They will require a high level of adult support, for both their educational and personal care needs. They are likely to require specialist equipment and support for their posture, feeding and intimate care. Many will have a Healthcare Plan.

Identify



Children arriving in Early Years settings often have had SEND identified during health visiting contact with their family, resulting in a referral to other health professionals and EA.

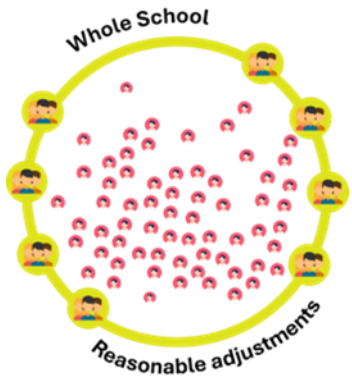
Others may arrive and concerns may arise about their development following observation.

Screeners and assessment tools can also provide help in identifying SEND in young children such as:

- [Well Comm Speech & Language Toolkit](#)
- [Teaching Talking](#)
- [Early Years Developmental Journal](#)
- [Child's Progress checker - Speech & Language UK \(\[speechandlanguage.org.uk\]\(https://speechandlanguage.org.uk\)\)](#)



Plan & Action



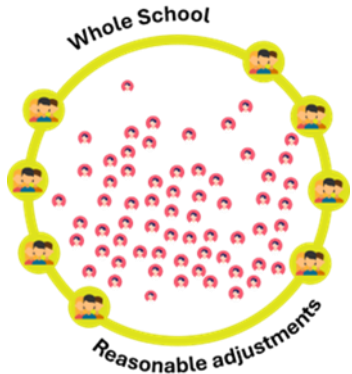
It is important to gather information and understand each individual child in order to identify reasons for the presenting needs and the most effective support strategy. Classroom teaching and learning plans should include effective differentiation and must follow the [Curricular Guidance for Pre-School Education.pdf \(ccea.org.uk\)](https://www.ccea.org.uk/curriculum-guidance-for-pre-school-education.pdf).

Parental engagement

It is important that Early Years settings actively involve parents/carers in supporting their child's learning and development.

- Resources and training sessions on a range of topics/themes are available via the [Getting Ready to Learn](https://www.gettingreadytolearn.org.uk/) (GRtL) website.

Plan & Action



It is important to gather information and understand each individual child in order to identify reasons for the presenting needs and the most effective support strategy. Classroom teaching and learning plans should include effective differentiation and must follow the [Curricular Guidance for Pre-School Education.pdf \(ccea.org.uk\)](#).

Play based learning

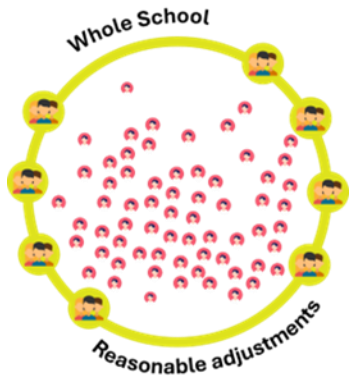
Most early years settings are designed to incorporate indoor and outdoor play facilities.

- Play supports the development of language, early literacy, early numeracy and a range of other cognitive outcomes, and can benefit children who are identified as having social, emotional, and educational difficulties.
- CEA provides further guidance in [Learning through Play in Pre-School and Foundation Stage 0.pdf \(ccea.org.uk\)](#) and for outdoor play in [Learning Outdoors in Pre-school and Foundation Stage.pdf \(ccea.org.uk\)](#)

Classroom layout and organisation

- The room has clearly defined areas for learning.
- The toilet area is easily identified with routines on display.
- The snack/dinner area is identifiable and defined with visual routines available.
- Materials are stored and labelled visually to allow children to access easily and independently.
- There are clear visual cues to indicate how many children can play in an area and how to use it.
- There are clear turn-taking systems in place for high interest activities.

Plan & Action



It is important to gather information and understand each individual child in order to identify reasons for the presenting needs and the most effective support strategy. Classroom teaching and learning plans should include effective differentiation and must follow the [Curricular Guidance for Pre-School Education.pdf \(ccea.org.uk\)](#).



[Routines & Transitions](#) (Ctrl & Click for useful resources)

- The daily routine is predictable, and a visual timetable is clearly visible.
- A transition cue is used consistently.
- Systems are in place to prepare for change.

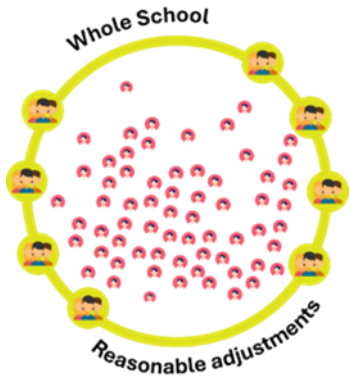
[Behaviour management](#) (Ctrl & Click for useful resources)

- Expected behaviours are presented visually and expressed positively.
- Class rules are clearly demonstrated and taught.
- Children are given choices.
- Desired behaviours are noticed and praised.

Building relationships

- Children are greeted on arrival and encouraged to greet each other by name.
- Adults participate in play and allow children to lead when appropriate.
- Reflective commenting is used during play.
- Visual cues are used to support communication.
- Emotions and feelings are named and explored.
- Adults model appropriate expression of emotions and self-regulation.

Monitor, Evaluate & Review



The progress of the children within a setting will be monitored through observation or assessment.

Children's progress will be evaluated following the school's assessment cycle, and further steps can be considered.

The support provided can be reviewed in consultation with the parents, taking into consideration the views of the child, and next steps to ensure the best outcomes.

The review should consider:

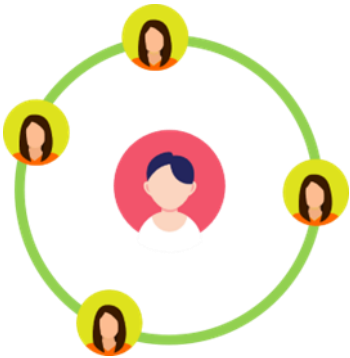
- Has progress been made?
- If progress has been made, what adjustments/strategies might further support the child?
- Next steps? (Formulated in conjunction with teachers, coordinators and parents.)

Refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)



Special Educational Provision - Stage 1 - Cognition and Learning – Early Years

Identify (Please also see [whole school](#))



Despite whole school provision and reasonable adjustments being made, the progress in learning for the child is at a slower rate.

The child is identified as needing provision, which is **additional to, or otherwise different from**, their peers. They are placed on the school's SEN register at stage 1, in consultation with parents.

A [Personal Learning Plan \(PLP\)](#) will be implemented for the child.

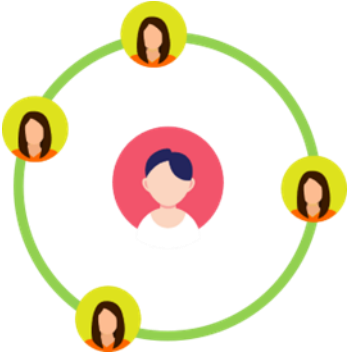
The school will use their special educational **provision map** to identify stage 1 strategies/provisions that are available to help the child.

Observations will inform a teacher or practitioner about an individual child's needs, which can be further explored in consultation with parents and any relevant health professionals. These may include:

- Non-verbal/delayed speech
- Lack of interaction with adults
- Difficulty concentrating and remaining focused
- Difficulty retaining information
- Difficulty following instructions and routines
- Being withdrawn/passive
- Difficulty regulating own emotions.
- Lack of awareness of the world around them
- Lack of awareness of peers
- Limited interest in play activities
- Underdeveloped play skills
- No purposeful play e.g. role play
- Poor self-help skills e.g. dressing, eating and toileting
- Difficulty transitioning

Various assessment tools can also inform about the specific needs of a child such as WellComm Toolkit, Teaching Talking and/or Boxall.

Identify (Please also see [whole school](#))



Some of the following videos and information may help with identifying and understanding cognition and learning type difficulties that may affect children.

Please note, the following referenced links and websites may contain pop-ups and marketing materials. The EA cannot guarantee the security of these sites, the operation of the links or that they will be virus-free. Readers should use these links at their own discretion.

How might learning difficulties affect a child?

- [Piaget's Theory of Cognitive Development – You Tube clip](#)
- [What is a learning disability?](#) – You tube clip
- [Signs of MLD](#) – (Twinkl)
- [Insights into Severe Learning Disabilities](#) (Leaf Care)
- [About profound and multiple learning disabilities](#) – (Mencap)



Special Educational Provision - Stage 1 - Cognition and Learning – Early Years

Plan & Action (Please also see [whole school](#))



A PLP is prepared to reflect the SEN category (or categories), outcomes are written to include provision and strategies to support the child at stage 1 of the CoP.

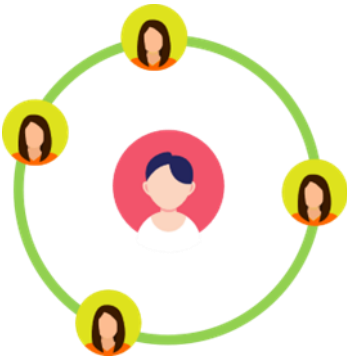
Schools use lots of different teaching approaches and resources to help every child learn in the way that is best for them.

The school should seek and listen to the child's and parent views about how they learn effectively and should focus on the strategies that work best.

In addition to the whole school approach, stage 1 strategies and provision(s) may include:

- Increased communication with parents to allow for ongoing review of learning and ensure key expected outcomes are also worked on at home
- Increased opportunities for practice and generalisation of new skills learnt
- Carefully structured new tasks so the child knows what is expected of them
- Developing social interaction so the child can work cooperatively with other children, take turns and develop imaginative play
- Providing individual and small group support where the child can learn new skills and concepts and can practice and consolidate these
- Ensuring appropriate differentiation of problem solving and other investigative play activities
- Develop the child's concentration and attention and help them to stay on task
- Provide opportunities for the child to copy good models of play and behaviour
- Reasonable adjustments within the classroom to allow for access to the curriculum (e.g. adaptations where appropriate, such as specialist scissors, pencil grips)
- Use of information , training and learning resources available on the EA Local Impact Team's [Annual Plan of Arrangements](#) for SEN Early Years.

Monitor, Evaluate & Review



The Code of Practice sets out the need for stage 1 provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parents**.

A Personal Learning Plan (PLP) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).

When reviewing, consider if:

- The child has achieved the expected outcomes set for them?
- Was the provision effective?
- Were the implemented strategies relevant and appropriate?
- Has the child made progress?

This process of monitoring, evaluating and reviewing will help identify next steps in learning and provision for the child.

Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register. Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA's Local Impact Teams and/or HSCT.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Special Educational Provision - Stage 2 - Cognition and Learning – Early Years

Identify (Please also see [whole school](#) & [stage 1](#))



Some children will not make progress with whole school and stage 1 provision. They will require further specialist support from external services from the education authority and/or HSCT.

If a child has been identified at school level, a referral has been accepted by the EA Local Impact Teams for external support, and the specialist support is provided to the child, they then will be identified as being at stage 2 of the CoP.



In addition to whole school, stage 1 further indicators of need may include:

- Despite whole school, reasonable adjustments, and stage one provision the development/progress in learning for a child continues to be at a slower rate than expected therefore additional external support is needed which is not available from within the school
- The child has persistent learning difficulties evidenced in school tracking, despite access to appropriate learning opportunities and targeted stage one interventions as part of the school's graduated response to support their learning
- EA School Based Consultation or EA Educational Psychology Report recommendations
- The child's attainment is consistently at a level below age-related expectation.

Special Educational Provision - Stage 2 - Cognition and Learning – Early Years

Plan & Action (Please also see [whole school](#) & [stage 1](#))



The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision. At stage 2, there will be close involvement between the EA Local Impact Teams and the school. The child will remain at stage 2 while the school makes full use of the range of strategies and supports within the school's special educational provision map supplemented by EA support to achieve progress.

In addition to the whole school approach and stage 1, stage 2 strategies/provision(s) may include:

- The school in collaboration with the EA Local Impact Teams develop PLP outcomes and employs strategies to support the child at stage 2 of the CoP
- Where appropriate, the external EA Local Impact Teams assess the referred child to identify clear starting points, considering the gap that has been identified by the school, using individual diagnostic assessment to determine need and advise on ways forward for learning
- Increased communication between the school, EA Local Impact Teams and the parent which will allow for the ongoing review of the child's needs.



Plan & Action (Please also see [whole school](#) & [stage 1](#))



The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision. At stage 2, there will be close involvement between the EA Local Impact Teams and the school. The child will remain at stage 2 while the school makes full use of the range of strategies and supports within the school's special educational provision map supplemented by EA support to achieve progress.

In addition to the whole school approach and stage 1, stage 2 strategies/provision(s) may include:

Targeted support for the child from the EA Local Impact Teams to help them make progress.

- **This support may come in the form of:**

- further assessment of the child's needs
 - advice and guidance to school staff and/or parents
 - bespoke modelling in home/school/setting
 - parent workshops
 - advice and guidance from multiple specialists where several needs/co-occurring difficulties are identified
 - access to dedicated resources to help inclusion where appropriate and where they are available
- **Solution Focused Hub** – schools/settings are invited to take part in a solution focused workshop. Those present in the group work together using a solution focussed approach to find resolutions to the issue
 - **Specialist Support for Referred Children** - is provided to an identified group of children alongside staff from the setting. These programmes targets various early learning skills in a group session.

Special Educational Provision - Stage 2 - Cognition and Learning – Early Years

Plan & Action (Please also see [whole school](#) & [stage 1](#))



The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision. At stage 2, there will be close involvement between the EA Local Impact Teams and the school. The child will remain at stage 2 while the school makes full use of the range of strategies and supports within the school’s special educational provision map supplemented by EA support to achieve progress.



In addition to the whole school approach and stage 1, stage 2 strategies/provision(s) may include:

- Development of SBEW/Calm plan
- Targeted [training support](#) for the school/settings and parent from the EA Local Impact Teams to help them meet the unmet need/s of the child. These include:

Parent Training

- Helping with early communication skills
- Helping your child with language development
- Helping your child to understand and manage their emotions
- Supporting your child’s toileting needs
- Parent transition workshop

Schools/Setting

- Awareness and management of Toileting needs for children with SEN
- Helping children to understand and manage their emotions
- Supporting the development of early communication skills
- Top techniques - an introduction to meeting the needs of early years children with SLCN
- Transition training.

Monitor, Evaluate & Review



At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child and their parent/s.

Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

To help measure this effectiveness of intervention, EA services may consider:

- Review of targets/expected outcomes
- Issue of final reports and recommendations, which should be included in future PLPs
- Provision provided to schools in the form of resources, modelling, training etc.

It is important that the advice and guidance provided by the EA Local Impact Teams or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

The level, type or intensity of the stage 2 provision may need to be changed throughout this process if new need/s or more prevalent needs become apparent. Close collaboration between the school and the EA Local SEN Impact Teams and/or HSCT will help determine if the provision is being effective or needs changed.

Many children will make progress with the delivery of stage 2 provision and following a period of support will no longer need external provision from the EA Local Impact Teams or HSCT and will return to stage 1 of the CoP.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed. Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education [Flowcharts and Checklists\(Nursery\)](#)

Special Educational Provision - Stage 3 - Cognition and Learning - Early Years

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Where a request for a statutory assessment is made and the outcome is that the EA makes a **statement of special educational needs**, the child will be identified as being at stage 3 of the CoP.

A Statement of Special Educational Needs sets out the child or young person's special educational needs and describes the provision and support to help meet those needs, and the educational setting they should attend.



Some additional indicators may be noted at stage 3 for children with cognition and learning needs:

- The child may have an identified syndrome or physical/medical need which has been diagnosed by a paediatrician or other health specialists
- The child will have complex and persistent difficulties and is not making expected progress despite high levels of focused interventions
- The gap in their stage of development and their peers increases significantly
- The child's on-going learning difficulties are a significant barrier to their development across several areas of learning.

Plan & Action (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



The PLP is updated to record that the child is now at stage 3 and the content of the statement is reflected in the setting of expected outcomes based on the objectives of special educational provision.



In addition to the whole school approach, stage 1 and stage 2, stage 3 strategies/provision(s) may include:

- An adapted curriculum that is more individualised to the needs of the child
- Environments adapted to make them accessible with designated learning areas provided where necessary
- Availability of training opportunities for all staff members
- A highly structured and individualised learning programme with advice sought from specialist services. Parental permission must be given for the involvement of specialists
- Increased support to enable the child to access learning
- Differentiated strategies across cognition and learning

Monitor, Evaluate & Review



At stage 3 the child will have a statement of special educational needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.

The child will continue at stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need.



Annual Review

The statement of educational need will be reviewed to determine the progress of the child. With input from educational professionals and/or medical/allied health professionals, the effectiveness of strategies, the impact of any previous intervention, new information or factors is shared, to ensure the statement of educational need is meeting the needs of the child.



Views of the Child & Parent/s

Central to the monitoring, evaluating and reviewing process is the input and views of the child and parent/s.

Social, Behavioural, Emotional and Wellbeing

The Graduated Response- Early Years



Social, Behavioural, Emotional and Wellbeing (SBEW)

Children with SBEW:

- will have difficulty in the development of their social, behavioural, emotional skills and well-being
- may have immature social skills and find it difficult to initiate and sustain healthy relationships which is impacting on their learning and progress in school.



How do we define Social, Behavioural, Emotional and Well-being?

“Social Behavioural, Emotional and Wellbeing (SBEW) as an identified special educational need is unique in that at different points in their lives every single member of the school community will experience need in this area. It is therefore incredibly important that a whole school ethos is designed, built and maintained with a commitment to understand and support all our pupils, parents and colleagues in an atmosphere of collective care.

Additional needs in this area, however severe, do not need to be long term and should not carry shame.”

Useful resource: [Working with Whole School Community to Understand, Well-being-SEN Resource File](#)

In this section the term “*schools*” refers to all mainstream schools and educational settings and the term “*parents*” refers to all parents/carers and guardians.

Specific subcategories

Social and **Behavioural Difficulties** (SBD) and **Emotional** and **Well-being Difficulties** (EWD) should never be viewed in isolation to the indicators of needs and expected outcomes for the overarching SBEW category. These subcategories always present alongside each other.



Severe Challenging Behaviour (SCB) associated with SLD or PMLD

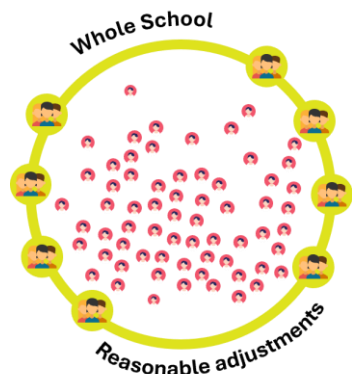
Only children identified with Severe Learning Difficulties (SLD) or very occasionally pupils with Profound Multiple Learning Difficulties (PMLD) should be recorded in this category.

Children with SLD and PMLD often display SCB which functions to enable them to have their needs met and/or control their environment. SCB will pose serious risk to self and others and can often result in damage to the environment.

Children presenting with SCB are likely to be involved with the HSCT services.

Children with SCB will have had a risk assessment and will have a risk management plan and/or social behaviour emotional wellbeing plan that will include any medication and safe handling requirements.

Overarching Indicators of Need



Consider, is the child presenting with ...

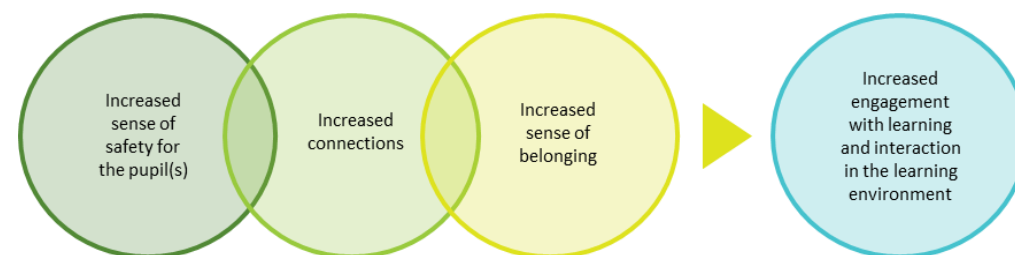
- Frequent dysregulation (both hypo and hyper)
- Behaviours/actions which raise a safety concern
- Limited engagement/interaction with adults and / or peers
- Limited engagement with adult led activities or routines
- Finding elements of their environments or interactions overwhelming

Additional Indicators:

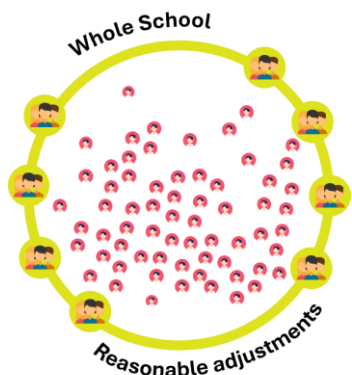
- May have underlying social, emotional and/or mental health needs formally assessed by professionals
- May need additional/alternative care e.g. Child Looked After/Adopted

Regardless of stage of support and indicators present, any plan to support a child with SBEW needs will have the following staged **expected outcomes**:

- Increased sense of safety
- Increased connections
- Increased sense of belonging
- Increased engagement with learning and interaction in the learning environment



Identify



When a very young child presents with SBEW needs it can be extremely challenging for all involved as it sits alongside an early stage of development and can impact upon relationships between school, parents and the child, potentially setting a pattern for years to come.

It is therefore vitally important that time is taken when identifying needs and that these are communicated to parents at the right time and in a sensitive, supportive manner.

While identifying the needs communicated through presenting behaviours, take time to consider how the setting could be adapted to better match the developmental stage and group dynamic of the children you have year on year.

It is unlikely that the same set up will work for every unique group of children you work with.

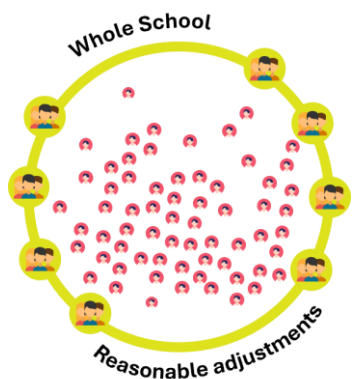
Remember to consider the overarching indicators, children may be presenting with

- Frequent dysregulation (both hypo and hyper)
- Behaviours / actions which raise a safety concern
- Limited engagement / interaction with adults and / or peers
- Limited engagement with adult led activities or routines
- Finding elements of their environments-or interactions overwhelming

Identify the needs in the group as a whole and then plan steps/changes to meet these on a whole group level.



Plan and Action

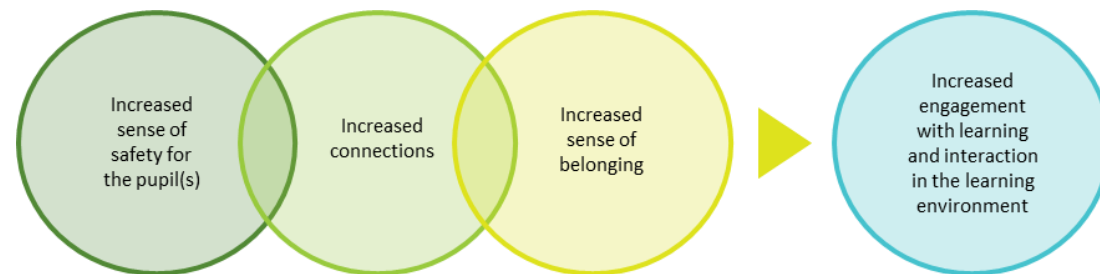


Remember the staged expected outcomes and keep these as a focus when you begin the plan and action:

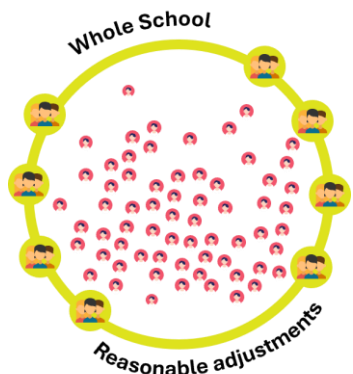
- Increased sense of safety (how will we make our space feel safe for all our children?)
- Increased connections (how will we ensure all our children build trusted relationships in our setting?)
- Increased sense of belonging (how will we ensure all our children know that we want them here with us?)
- Increased engagement with learning and interaction in the learning environment (what is the best way to set up our learning experiences to engage this class group?)

Identify the needs in the group as a whole and then **plan** steps / changes to meet these on a whole group level.

Consider if the structure, routines and play based activities are well matched to the needs of the whole group each year.



Plan and Action



When SBEW needs are identified it is important to allow all our children time to access a developmentally appropriate play- based curriculum. Formal learning in Northern Ireland is not expected to begin until P3 and this allows most of our children 3 or 4 years for this important stage of development.

The Northern Ireland Curriculum expects the Foundation Stage to provide a seamless transition to formal learning in Key Stage 1 and this has been reinforced by A Fair Start Report and Action Plan (May 2021). This means P1 classrooms are expected to be an extension of nursery, particularly in the first term. ***The Northern Ireland Curriculum is flexible and allows professionals to adapt delivery and classroom organisation to work for the pupils in front of them each year.***

As a first step, review current curriculum delivery in your nursery or foundation stage setting to ensure most learning is experienced through well planned and challenging play, including self-initiated play. [Learning through Play in Pre-School and Foundation Stage_0.pdf \(ccea.org.uk\)](#)

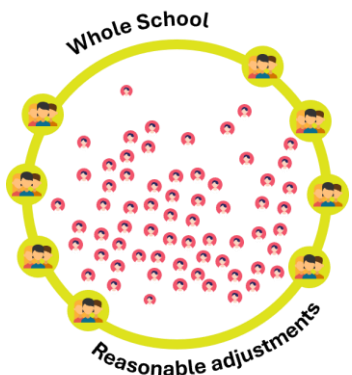
Next, plan the best way to structure and timetable aspects such as outdoor play, snack, story time, arrival, leaving to best suit your unique groups year on year.

""The transition from pre-school to Year 1 in the Foundation Stage and then from Foundation Stage into Key Stage 1 can be difficult for both children and teachers to navigate, and so the importance of the Foundation Stage acting as a pedagogic bridge to enable a seamless flow is clear." – Fair Start Report and Action Plan (May 2021)

Useful resources to help you plan and develop appropriate actions include:

- [SBEW CHAPTER: SEN RESOURCE FILE](#) - Section 1 outlines implementing Nurture and Trauma informed practice at a whole setting level.
- [RISE NI - Early Years Education Staff Website](#)
- CYPs training calendar: www.easds.org.uk
- High Five [Professional Learning \(google.com\)](https://www.google.com)

Monitor, Evaluate & Review



Schools may monitor, evaluate, and review the progress of these whole school provisions as part of ongoing assessment in school, within a designated time frame. Evaluate progress through an ongoing cycle of **Identify, Plan, Action, Monitor, Evaluate and Review**.

Participation of school staff, child and parent should be included in the 6-part cycle.



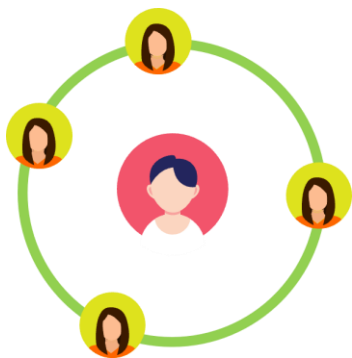
When implementing strategies at whole setting/class level continually monitor and evaluate using these key questions:

- **What's going well?**
- **What's helping?**
- **What's not going well?**
- **What would help?**

Remember to allow time for your group of children to develop. Having these questions embedded in your staff team brain will open opportunities to continually adapt throughout the year to meet the presenting needs of the group.

Refer to the Department of Education : [Flowcharts and Checklists\(Nursery\)](#)

Identify (Please also see [whole school](#))



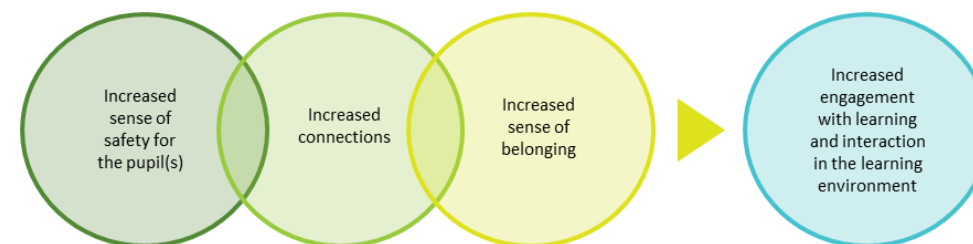
Consider what further/additional indicators may be noted at Stage 1 for children with Social, Behavioural, Emotional and Well-being.

Starting from the base position of the nursery/playgroup classroom set up to be ready for the unique class group each year, fully utilising the play-based curriculum, there will be pupils who still present with indicators of SBEW need.

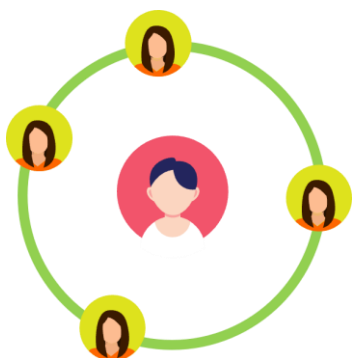
Refer to the [overarching indicators](#) and then identify the core need to inform the focus of the plan.

Identify the core need for this child right now from the continuum of expected outcomes. Keep this as a focus when you begin the plan and action:

- Increased sense of safety (how will we make our space feel safe for this child?)
- Increased connections (how will we ensure this child has trusted relationships in our setting?)
- Increased sense of belonging (how will we ensure this child knows that we want them here with us?)
- Increased engagement with learning and interaction in the learning environment (what is the best way to set up our learning experiences to engage this child?)



Identify (Please also see [whole school](#))

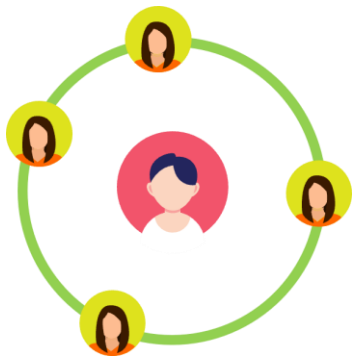


Regardless of the behaviour presented and whether at Stage 1, 2, or 3 meeting these needs will be the focus of support. It is important for professionals to remember that we address the need being communicated by the behaviour rather than target, manage and modify the presenting behaviour itself.

- Traditional approaches to behaviour, such as rewards and consequence models, lead to ruptured relationships between adults and children and this has a lasting impact on the wellbeing of all involved. Supports at Stage 1, 2, or 3 must recognise the importance of healthy attachments with caregivers and actively encourage and nurture positive interactions.

- Pupils who present with SBEW needs often experience social thinning as a result and this leads to less supportive relationships, which in turn leads to increased SBEW needs. This is why it is vitally important to identify aspects of the setting environment to change before considering actions which isolate e.g. reduced day, time in setting kept apart from peers. Actions which lead to exclusionary strategies must be extremely rare, must never be a first response and must always be accompanied with a clear plan to increase access to the setting.
- The [DE SEN Resource File](#) has useful tools to guide this process
 - Pg 25 Mistrust to Trust Scale
 - Pg 34 The 3 Rs Regulate, Relate and Reason
 - Pg 26 Rebuild adult-pupil relationships
 - Pg 36 Helping the individual take notice of themselves
 - Pg 41 Be Active

Plan and Action (Please also see [whole school](#))



Examples of types of planning/actions that schools may put in place for a child to help their Social, Behavioural, Emotional and Well-being at Stage 1 include:

- Drawing up a PLP and setting expected outcomes as part of the planning and action process
- Meeting with and including the view of the parent and child as part of this process
- Use of stage 1 provisions from the school's provision map
- Identify network of supportive adults around the child
- Identify appropriate online training for the network around the child - [CYPs Training directory](#)

- Creating Core Plans to support the child with SBEW:

- [SBEW Plan](#)

- [Supported Calm Plan](#)

- Solution focused hub (Farouk Consultation Model) (non-referred child)
- Access to the helpline to discuss support from SEND Central is available Monday to Friday 9am to 4:30pm on 028 90317777 (option 3)

- **Start where the child is and work from there.**

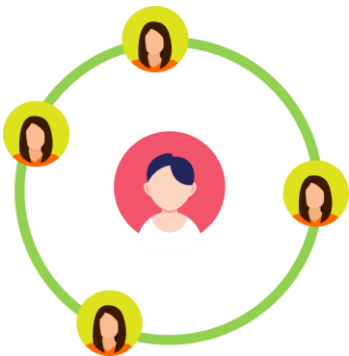
- When are they calmest?

- Who are they with?

- What are they doing?

Plan the day with a structure and routine allowing for flexibility around what works best for this child. Use the questions noted in the SBEW plan as prompts to creatively find ways to meet the child's identified needs.

Plan and Action (Please also see [whole school](#))



Possible support strategies are as follows:

Dysregulated behaviours

- Focus on building [regulatory activities](#) into their routine when they arrive everyday (not just when they appear dysregulated)
- Use the 3Rs model to reach the learning brain

[High Five Ready to Learn resource](#)

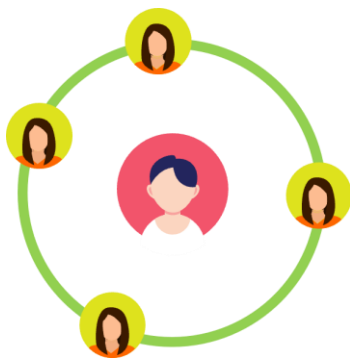


Possible support strategies are as follows:

Attention/ Concentration

- Consider expectations. Structure their time so they are not expected to sit longer than they are currently able. Choose activities based around areas of interest to build concentration
- Rather than a first / then approach with preferred activity second, consider how to make the not preferred activity more interesting. This will have a longer-term positive impact
- All support should be implemented using the [PLACE model](#)

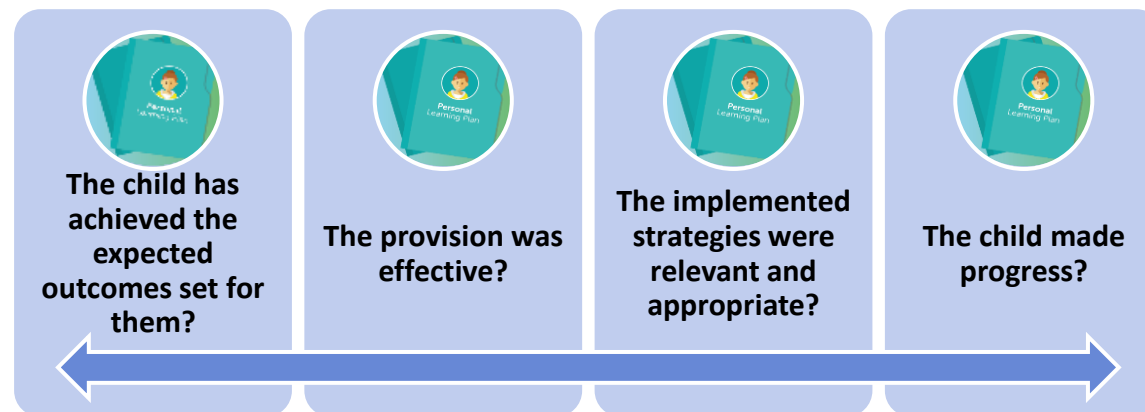
Monitor, Evaluate and Review



Some children may require extra intervention and approaches additional to those provided within whole school provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parent(s)**.

A Personal Learning Plan (PLP) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and their parent(s).

When reviewing, consider if:

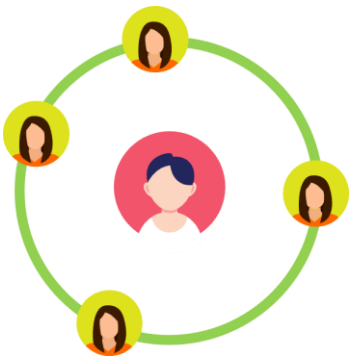


This process of monitoring evaluating and reviewing will help identify next steps in learning and provision for the child.

Monitoring will be continuous as the network of supportive adults Connect and Take Notice of the child. The information gathered throughout this time should be brought to the SBEW Plan review. The child's voice must be central to this.

Remember to focus on tracking the underlying/unmet need and child's voice rather than simply the surface behaviours which indicate the need.

Monitor, Evaluate and Review



As part of the review process, it is important to consider “what is helping and why.” This will give greater insight into specific strategies to try or to keep in place.

Ask these **reflective** questions:

- What is going well?
- What is helping?
- What is not going well?
- What would help?
- Have we got the right people involved?

Consider, is the child presenting with:

- Increased sense of safety
- Increased connections
- Increased sense of belonging
- Increased engagement with learning and interactions in the learning environment

As part of this **review**, ongoing supports, if any, should be identified with the following potential next steps:

- Option 1 - supports can be delivered as part of the whole school ethos/activities therefore pupil moves off CoP;
- Option 2 - supports can be delivered through the supportive network in school therefore pupil remains at Stage 1; and/or
- Option 3 - network of adults require further expertise and guidance therefore pupil moves to Stage 2 and the school may request additional support.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Identify (Please also see [whole school](#) & [stage 1](#))



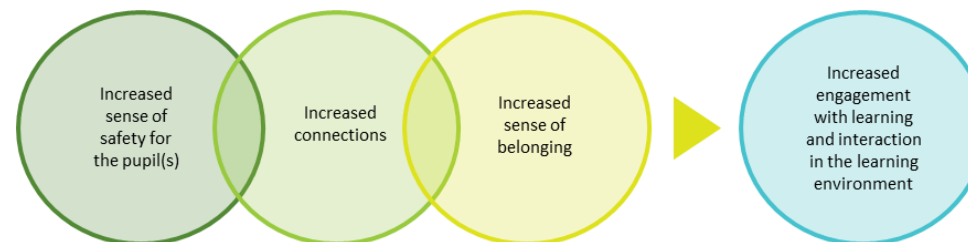
It is important to give the supports put in place at stage 1 a chance to work. Typically allow up to 6 weeks for progress to be noticeable. When indicators of SBEW need persist or increase while support is in place it may be time to consider who else should be involved. This is Stage 2.

- The additional support will, in the first instance, provide a support to the network of adults around the pupil. The adults should continue to Connect and Take Notice of the child to identify ongoing need.
- The focus of the support will remain to increase safety, connection and belonging for this child. Support should remain trauma informed, following nurture principles and should continue to focus on meeting the unmet need, rather than modifying presenting behaviours.

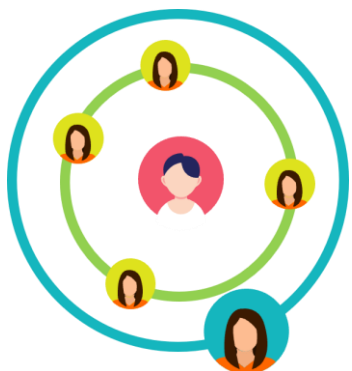
This support supplements, rather than replaces, the network of supportive adults in school. Depending on the need identified, support could include advisory and/or modelling or intensive support could include direct intervention.

Once again, remember the staged expected outcomes and keep these as a focus when you begin the plan and action:

- Increased sense of safety (how will we make our space feel safe for this child?)
- Increased connections (how will we ensure this child has trusted relationships in our setting?)
- Increased sense of belonging (how will we ensure this child knows that we want them here with us?)
- Increased engagement with learning and interaction in the learning environment (what is the best way to set up our learning experiences to engage this child?)



Plan and Action (Please also see [whole school](#) & [stage 1](#))



Stage 2 will document the close involvement between the EA and the school. It will consider the plans and actions that may be on offer from external provisions to supplement school delivered special educational provision.

- A PLP will be required at Stage 2 and expected outcomes will be set as part of the planning and action process including Provision Mapping .
- School staff partner with EA support services and/or external agencies. Often a fresh set of eyes on a situation can bring a helpful perspective as staff continue to support the child. Openly share the journey that has brought staff and the child to this point. Use the reviewed SBEW Plan as a start point. Be creative and keep the child at the centre.

- By this stage, it's common for staff to feel compassion fatigue or even blocked care. Work with the additional support to review how the network of adults around the child is working and whether small changes would help. Collaborate to develop a new plan and be clear on roles of the team around the child.
- Make the most of the additional support available at stage 2. Free up key setting staff to meet with support staff, take part in modelling sessions, attend training. Avoid this all falling to one staff member- use the whole team.
- Maintain a proactive, sensitive approach with parents. Focus on ensuring parents feel safe and supported. This may take time but is extremely important. Be sure to share the small wins- share hope!

Monitor, Evaluate and Review



At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child and their parent(s). Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

- Monitoring remains continuous as the network of supportive adults Connect and Take Notice of the child. Continue to focus on tracking the underlying/unmet need and child's voice rather than simply the surface behaviours which indicate the need
- Once again, the team will review the SBEW plan. This will give greater insight into specific strategies to try or to keep in place

Continue asking these reflective questions:

- What is going well?
- What is helping?
- What is not going well?
- What would help?

Continue to consider, is the child presenting with ...

- Increased sense of safety
- Increased connections
- Increased sense of belonging

Increased engagement with learning and interactive in the learning environment

It is important that the advice and guidance provided by the EA Local Impact Teams or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

Monitor, Evaluate and Review



SBEW review and planning meetings should be held regularly and should be attended by parents(s) and ideally should be led by the SENCo/LSC. These should be positive, and solution focused. Consider collective care and ensure the parent(s) feel supported and understood.

The level, type or intensity of the stage 2 provision may need to be changed throughout this process if new need/s or more prevalent needs become apparent. Close collaboration between the school and the EA 'Local' Impact Teams and/or HSCT will help determine if the provision is being effective or needs changed.

As part of this review ongoing supports, if any, should be identified with the following potential next steps:

- Option 1 - supports can be delivered as part of whole school ethos/activities therefore pupil moves off CoP
- Option 2 - supports can be delivered through the supportive network in school therefore pupil moves back to Stage 1
- Option 3 - network of adults continue to require further expertise and guidance therefore pupil remains at Stage 2 and additional support continues
- Option 4 - supports identified require to remain in place to meet ongoing indicators of need- request comprehensive assessment from Educational Psychology. School should seek advice/recommendation from external services involved.

Note: It is important to allow supports at Stages 1 and stage 2 time - If ongoing need is indicated following sustained engagement with supports at Stages 1 and 2, staff should request a comprehensive assessment from Educational Psychology.

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Where a request for a statutory assessment is made and the outcome is that the EA makes a **statement of special educational needs**, the child will be identified as being at stage 3 of the CoP.

A Statement of Special Educational Needs sets out the child or young person's special educational needs and describes the provision and support to help meet those needs, and the educational setting they should attend.

Take Notice of the small indicators that evidence increased safety, connection and belonging in this child. The severity or intensity of presenting behaviours do not indicate the expected longevity of need.

- It is important to remember, even at Stage 3, the focus of support is increased safety, connection and belonging. With SBEW needs, it is possible for a pupil to be supported at Stage 3 at one stage of their schooling and not at a later stage. It should not be common practice to have a child with a Statement for SBEW needs in Nursery to still be at this stage in P6, unless there are other coexisting SEN.
- Remember the staged expected outcomes and keep these as a focus when you begin the plan and action:
 - Increased sense of safety (how will we make our space feel safe for this child?)
 - Increased connections (how will we ensure this child has trusted relationships in our setting?)
 - Increased sense of belonging (how will we ensure this child knows that we want them here with us?)
 - Increased engagement with learning and interaction in the learning environment (what is the best way to set up our learning experiences to engage this child?)

Plan and Action (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Stage 3 will document the continued close involvement between the EA and the school. It will consider the **plans** and **actions** that may be on offer from external provision to further supplement school delivered special educational provision, including any recommendations contained within the Statement of Special Educational Needs.

- A PLP will be required at Stage 3 and expected outcomes will be set as part of the planning and action process, including those noted in their Statement (Provision Mapping - at **Stage 3**).
- The Statement of SEN will outline supports required for this child and will be informed by educational advice from all external services involved including what has been learnt at Stages 1 & 2.
- The reviewed SBEW plans will be important to share. Planning at this stage in SBEW takes a long-term view of how we can support this child to rely less on these supports in the future.

Traditional models have in the past viewed optimum support for a pupil presenting with complex SBEW needs as being an adult allocated on a 1:1 basis. It has been recognised for some time that while this model may ease short term pressures for school staff it has many long-term limitations, particularly in relation to SBEW needs and ongoing staff wellbeing. [High Five Huddle \(google.com\)](#)

- The network of supportive adults should remain in place and continue to access relevant training opportunities. If additional SEN classroom assistance is identified as a support as part of the statement this person should join the network of supportive adults around the pupil rather than replace them. This network will continue to be there for the pupil in school and be their champions.

They will:

- Remain calm, alert, steady, grounded, empathic
- Increase opportunities for fun through playful interactions
- Be stress and shame regulators for the pupil
- Take the lead in implementing the SBEW plan in school

Plan and Action (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



"It's a 'community of care' that will enable a child to start to realise their value, and for dignity to be restored" Louise Michelle Bombèr - Know Me to Teach Me

- Established network of supportive adults around the child
- Appropriate EA [online training](#) accessed by network around the child
- External agency has been involved to directly support the network of adults around the child
- EP and SARs work with the network of adults around the child and the external agencies to develop child centred statement of SEN

Continue to Consider:

- What does this pupil need right now?
- What will we do to meet this identified need?
- Have we got the right people involved?
- What supports need to remain in place for now?
- Access to the helpline to discuss support from SEND Central is available Monday to Friday 9am to 4:30pm on 028 90317777 (option 3)



Monitor, Evaluate and Review



At stage 3 the child will have a Statement of Special Educational Needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision/s
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need(s).



Annual Review

The Statement of educational need will be reviewed to determine the progress of the child. Input from educational professionals and/or Medical/Allied Health Professionals, the effectiveness of strategies, the impact of any previous interventions, appropriateness of school placement, new information or factors shared, to ensure the Statement of Educational need is meeting the needs of the child.



Views of the Child & Parent/s

Central to the monitoring evaluation and review process will be consideration of the input and views of the child and parent/s.

The child will continue at Stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Monitor, Evaluate and Review



Continue to ask these reflective questions:

- What's going well?
- What's helping?
- What's not going well?
- What would help?



There requires to be clear evidence that advice from external agencies has been fully implemented over a significant period of time.

Where Early Years practitioners, advice givers/external agencies and parents feel the child has made adequate progress then consideration should be given to returning to the earlier stages of the graduated response.

As part of this Annual Review, ongoing support, if any, should be identified with the following potential next steps:

Option 1 – child remains on Stage 3 and network of support continues. Consistent utilisation of creative and innovative planning, keeping in mind expected outcomes, reasonable adjustments and continuous monitoring and review

Option 2 – child no longer requires supports provided through a statement of SEN, moves to Stage 2 or 1

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)

Speech, Language and Communication Needs

The Graduated Response – Early Years



Speech, Language and Communication Needs(SLCN) – Early Years

Speech, Language and Communication Needs (SLCN) is a broad category that covers the wide range of conditions affecting 3 areas:

Speech – the ability to say words clearly with the right sounds in the right places, to speak fluently without hesitating or repeating words and to use a clear voice in a way that makes speech sound interesting and meaningful. In Early Years, ear infections and glue ear can be frequent and will affect the ability to hear words and sounds correctly and therefore should always be considered.

Language – involves both talking and understanding, including the ability to use the right words in the right order to explain what you mean and to begin to add simple grammar to build sentences as well as the ability to understand language to make sense of what people say.

Receptive Language skills involve the ability to understand what is being said.

Expressive Language skills involve the ability to say the correct words in the correct order, to explain what is meant.

Communication – skills involve both verbal/spoken and non-verbal, including the use of facial expression, gesture, listening and taking turns to interact with others. Also, the ability to understand other people's points of view, not only what to say but how to say it appropriately.

Each of the 3 areas (SLCN) is dependent on the other and children may have difficulty with one, more or all aspects of speech, language and communication. The profile for every child with SLCN is different and their needs may change over time.

For more information view the EA Language Tree Video [Useful Resources & Links - Language and Communication | SEND Plan \(eani.org.uk\)](#)



Specific SEN Category Descriptors - Speech, Language and Communication Needs– Early Years

Developmental Language Disorder (DLD) is the term used for children with persistent and unexplained language difficulties which impact on their social and educational functioning.

There may be no obvious reason for the difficulties and children with a diagnosis or profile of DLD might require some form of support throughout their educational journey and beyond.

For more information visit www.radld.org

Language Disorder associated with a differentiating/biomedical condition such as Autism, Deafness/Hard of Hearing, Moderate or Severe Learning Difficulty, Brain Injury or a Chromosome Disorder. The Language Disorder occurs as part of a more complex pattern of impairments.

For more information on SEN visit [Special Educational Needs and Disability \(SEND\) | SEND Plan \(eani.org.uk\)](http://Special Educational Needs and Disability (SEND) | SEND Plan (eani.org.uk))

Communication and Social Interaction Difficulties – the ability to use language underpins all of children’s social interactions and learning activities.

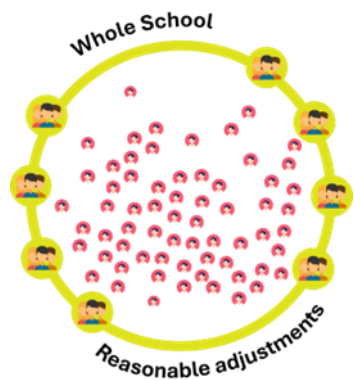
SLCN are commonly associated with other difficulties in childhood and beyond, including the acquisition of literacy skills (reading and writing) and may impact on social, behavioural and emotional well-being.

For further reading on the social use of language, [click here](#) .

N.B. Subcategory descriptors should only be [recorded on the SEN Register](#) if specified in an EA Educational Psychologist Report, an EA Statement of SEN or a HSCT Speech and Language Therapy report.



Identify

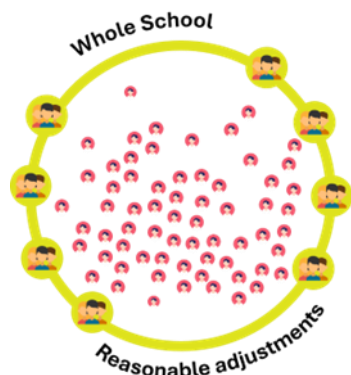


In the Early Years setting, children with Speech, Language and Communication Needs may present with:

- Difficulty attending and listening for an appropriate amount of time - fleeting attention/flitting between activities
- Difficulty following instructions, understanding the task set or simple mathematical terms such as shape and number - linked with size, shape or number (bigger/smallest/first/next etc.)
- Struggling to accurately name familiar items or using general terms e.g. 'thing' to refer to items
- Poor retention across the curriculum due to superficial understanding of what is being taught and poor memory skills
- May talk a lot but not 'make sense,' or may be hesitant in conversation, may give inappropriate responses to questions or speak 'out of context'
- Inability to retell stories or events in sequence, describe or explain with some details



Identify



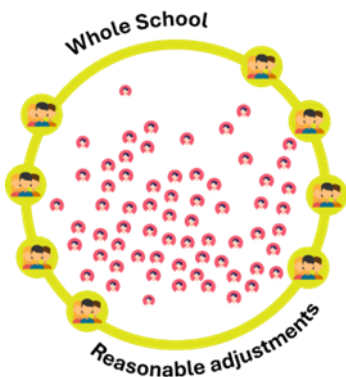
In the Early Years setting, children with Speech, Language and Communication Needs may present with:

- Shrugging their shoulders, providing short responses or opting out when it is their turn to talk
- Speech which is difficult to understand
- Using behaviour as an avoidance or a distraction during talk-focused activities
- Difficulty initiating conversation or peer interaction
- Difficulty understanding turn taking and sharing with peers and/or adults
- Anger and frustration when they do not have the language skills to solve problems
- Taking adults by the hand or gesturing/pointing to make needs known
- Frequently completing instructions by watching and then following peers



Whole School Educational Provision –Speech, Language and Communication Needs– Early Years

Plan and Action



Plan

It is important to gather information and understand each child holistically, as to identify reasons for the presenting needs and the most effective support strategy.

Classroom Teaching and Learning Plans should include effective differentiation/[adaptive teaching](#) and must follow Pre-School [Guidance](#) .

Teachers should be guided by the [strategies for inclusion of pupils of all abilities, including those with speech and language needs](#) and CCEA's [Progression Pathways](#) documents for Language and Literacy.

Action

Class teachers should:

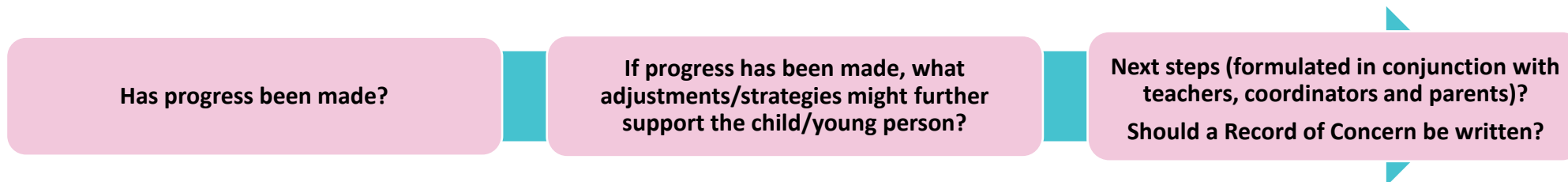
- Create a [communication friendly classroom environment](#) for all learners, which incorporates features and strategies which make communication as easy, effective and enjoyable as possible including ensuring that important places, equipment and displays are clearly marked with pictures or symbols as well as labels. The use of whole class and individual visual schedules
- Identify [classroom strategies](#) which may be most helpful and those which may cause stress for some learners experiencing speech, language and/or communication difficulties
- Collaborate with parents to reinforce language, attention and listening skills at home [Useful Resources & Links - Language and Communication | SEND Plan \(eani.org.uk\)](#)
- Collaborate with other professionals to develop and deliver support for all children's language and communication acquisition within the whole school context, e.g. [RISE \(NI\)](#)

Whole School Educational Provision – Speech, Language and Communication Needs– Early Years

Monitor, Evaluate & Review

Teacher monitoring including observations, assessments, evidence gathered and professional judgment along with the views of the child and their parents will all be taken into consideration when evaluating the impact of the whole school educational provision.

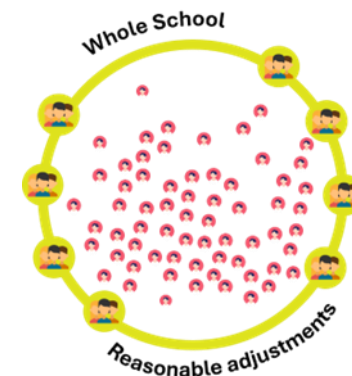
The review should consider:



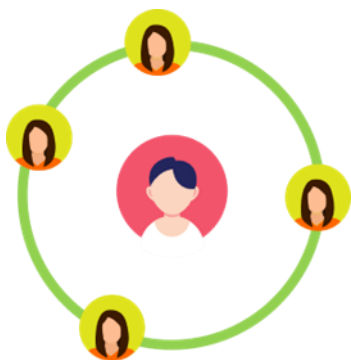
For a child with speech, language and communication needs, monitor individual progress and identify any gaps in learning through class-based observations, evidence gathering (e.g. [GL WellComm Assessment](#) or [EA LCS Language Programme: Informal Assessments](#)) and [CCEA Assessment for Learning](#) strategies, tools and resources at age-appropriate levels.

School staff should provide regular, time-framed reviews (for example after 6/12-week block) in order that child/young person, parents, and medical/allied health practitioners (if required) can discuss learning and agree appropriate provision. This may form part of the school's ongoing monitoring, evaluating, and reviewing processes.

Seeking the perspectives of all involved, to answer these key questions will help determine future planning. Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#) to help with this process.



Identify (Please also see [whole school](#))



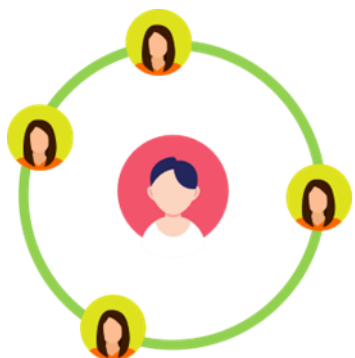
In addition to the indicators for whole school educational provision, children with Speech, Language and Communication needs which constitute a special educational need (SEN) may present with:

- An absence of basic Phonological Awareness, the understanding that words are made up of sounds, and sentences are made from words. The inability to hear chunks of sound or to hear rhyming patterns. The ability to discriminate between environmental sounds; ability to join in with and maintain a steady beat; remembering what they have heard (auditory memory).
- Difficulty using Receptive Language Skills – understanding language or processing what is being said.

- Difficulty using Expressive Language Skills –speaking in words, short phrases and/or sentences making themselves understood.
- Difficulties with Communication and Social Interaction.
- A diagnosis of Developmental Language Disorder (ratified by HSCT Speech and Language Therapy).
- Speech Sound Disorder (usually supported by HSCT Speech and Language Therapy)*.
- Dysfluency/Stammering (usually supported by HSCT Speech and Language Therapy)*.
- Voice Disorders/Paediatric Dysphonia (usually supported by HSCT/ENT and Speech Therapy)*.

* For specific indicators and classroom support strategies, see the [DE SEN RESOURCE FILE CHAPTER](#) (July 2021)

Plan & Action (Please also see [whole school](#))



Plan

For those children with an identified SEN in Speech, Language and Communication, the [SEN Code of Practice](#) must be followed.

Each child should be recorded on the SEN Register of the school and a [Personal Learning Plan \(PLP\)](#) be drawn up by the class teacher in consultation with the Learning Support Coordinator (LSC).

Expected Outcomes will be set and timebound as part of the PLP process and SEN provision for the child. Reference should be made to the school's Special Educational Provision Map to draw upon strategies and resources available at school level, which are additional to whole school educational provision above.

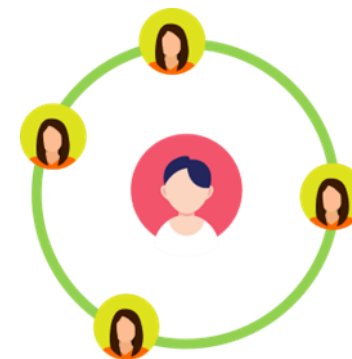
Action

For SLCN, this may include:

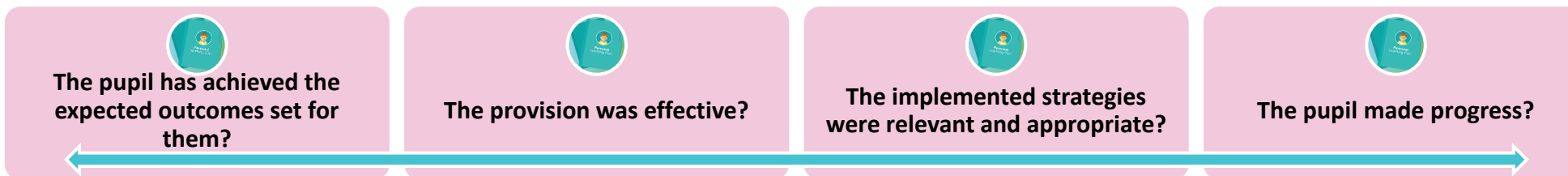
- Identifying the demands on a child with SLCN (social, language, cognitive, sensory, motor) and match specific [classroom strategies](#) with the child's ability
- Implementing EA resources available [Useful Resources & Links - Language and Communication | SEND Plan \(eani.org.uk\)](#) and DE SEN Resource File
- Availing of EA Training - [SEND Plan \(eani.org.uk\)](#)
- Gathering evidence of specific language needs through targeted e.g. [GL Well Comm Assessment](#)
- Contacting Early Years [SENEYIS](#) for general advice, guidance and signposting
- Liaison with the Speech and Language Therapist if appropriate

Monitor, Evaluate & Review

Some children may require extra intervention and approaches additional to those provided within whole school provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parents**. A [Personal learning Plan \(PLP\)](#) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).



When reviewing, consider if:



This process of monitoring evaluating and reviewing will help identify next steps in learning and provision for the child.

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)

Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register. Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA's Local Impact Team and/or HSCT.

Stage 2 - Special Educational Provision – Speech, Language and Communication Needs - Early Years

Identify (Please also see [whole school](#) & [stage 1](#))



Additional indicators of need for more intensive and specialist SLCN support and provision may include:

- Use of a Phonological Awareness Programme: Screener results
- Use of a Language Programme: Informal Assessment results



- EA School Based Consultation or EA Educational Psychology Report recommendations
- WellComm Assessment: scores below chronological age
- Diagnosis of Developmental Language Disorder (ratified by HSCT Speech & Language Therapy)
- Significant profile of Developmental Language Disorder – risk factors include family history of DLD, being male etc





















Plan & Action (Please also see [whole school](#) & [stage 1](#))



Plan

Once the referral for external provision is received and allocated to a member of Early Years, contact is made with parents/carers and with the school.

The planning stage includes information gathering, class-based observation, contact with HSCT Speech and Language Therapy (if applicable) and further Well Comm /EA Language Programme Assessments (if applicable).

 I want		 I see		 thank you	
 drink	 biscuit	 apple	 cake	 crisps	 banana
 book	 sand	 bricks	 pens	 farm	 puzzle
 shoe	 jumper	 trousers	 coat	 sock	 hat

Action

Actions are based on the individual needs of each child, developed and implemented in collaboration with the school setting staff to compliment the special educational provision and PLP already in place. External SEN provision intensifies the school support and may include *any, some or all of* the following:

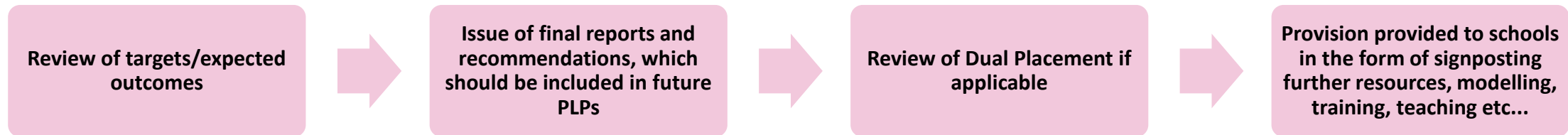
- Bespoke EA Early Years support and resources to target specific language and communication needs identified
- Small group support of up to 6 sessions led by EA Early Years team member
- Specific strategies and resources (as deemed appropriate to meet the child’s SEN) modelled to upskill school staff and resources provided for future use (and to add to school Special Educational Provision Map)
- Ongoing signposting, advice and guidance to class teacher to support whole class, small group and individual provision and inclusion of the child with SLCN.

Stage 2 – Special Educational Provision – Speech, Language and Communication Needs - Early Years

Monitor, Evaluate & Review

At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child, and their parent/s. Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

To help measure this effectiveness of intervention, EA services may consider:



It is important that the advice and guidance provided by the EA Local Impact Teams or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

The level, type or intensity of the stage 2 provision may need to be changed throughout this process if new need/s or more prevalent needs become apparent. Close collaboration between the school and the EA Local Impact Teams and/or HSCT will help determine if the provision is being effective or needs changed. Many pupils will make progress with the delivery of stage 2 provision and following a period of support will no longer need external provision from the EA Local Impact Teams or HSCT and will return to stage 1 of the CoP or exit the SEN register if appropriate.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed. Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)

Stage 3 – Special Educational Provision – Speech, Language and Communication Needs - Early Years

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



In addition to indicators of SLCN detailed at whole school, stage 1 and stage 2 provision above, a child at stage 3 will be in receipt of a statement of SEN which specifies Speech, Language and Communication as their primary or one of their special educational needs recorded under either the overarching SEN category (SLCN) or specific SEN subcategory.

The statement of SEN will document the specific speech, language and communication needs of the child, whether the child has a diagnosis of Developmental Language Disorder (DLD) or profile consistent with DLD, any other conditions/difficulties and recommendations and provision appropriate for the needs of the child.



Stage 3 – Special Educational Provision – Speech, Language and Communication Needs - Early Years

Plan & Action (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



The holistic needs of the child and recommendations in the statement of SEN, will be considered at the planning stage.



Actions are based on the individual needs of the child to compliment the recommendations as set out in the statement of SEN, the special educational provision already in place as specified in the statement of SEN and the school's PLP which has been drawn up based on the statement of SEN.

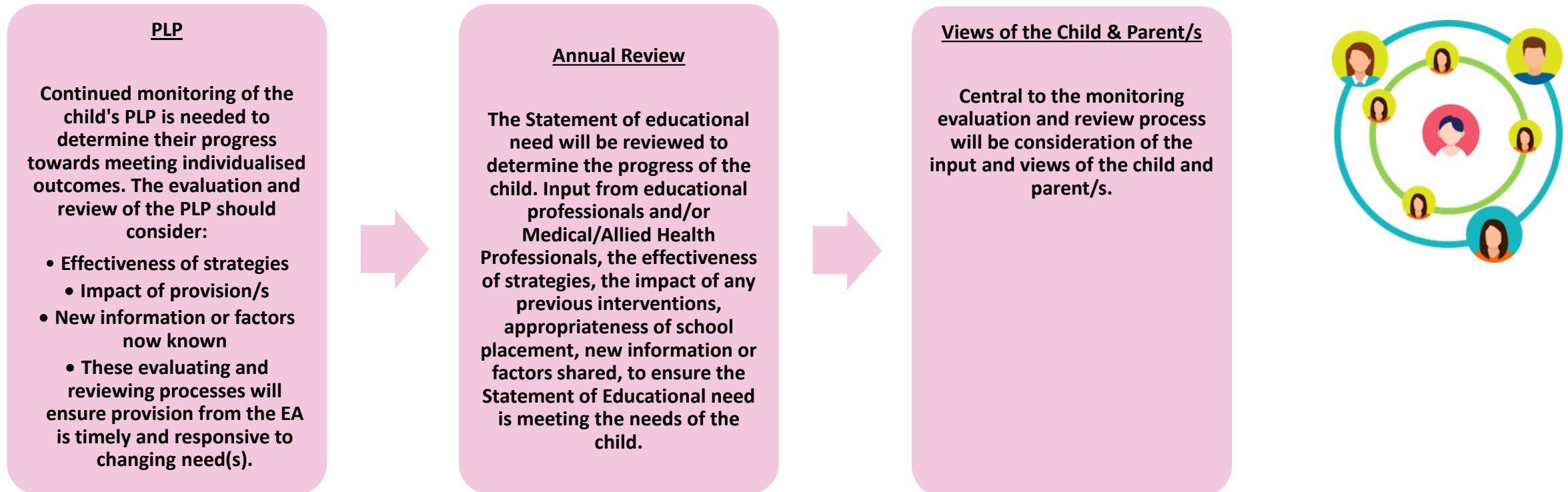
Early Years offer advisory support to settings when requested by the school and may include **any, some or all** of the following:

- Advice on specific language targets/expected outcomes to include in future Personal Learning Plans
- Specific strategies and resources modelled, and appropriate resources provided to school
- To provide further specific advice and guidance for the school staff

Stage 3 – Special Educational Provision – Speech, Language and Communication Needs - Early Years

Monitor, Evaluate & Review

At stage 3 the child will have a statement of Special Educational Needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.



The child will continue at stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Sensory

The Graduated Response



How do we define sensory impairment (SI)?

SI refers to Deafness/Hard of Hearing, Multi-Sensory Impairment and Vision Impairment.



Deafness happens when one or more parts of the ear is not working effectively and there is a hearing loss.

Vision Impairment is a term used to describe any kind of vision loss, whether it applies to someone who cannot see at all, or to someone who has partial vision loss. It does not include those whose sight problems can be corrected by spectacles or contact lenses.

Multi-Sensory Impairment or deafblindness is a combination of sight and hearing loss that affects a person's ability to communicate, access information and get around. A deafblind person won't usually be totally deaf and totally blind, but both senses will be reduced enough to cause significant difficulties in everyday life.

Please note that the level of impairment does not necessarily equate to the needs of the child. Many factors play a role in determining needs, for example, a severe or profound hearing loss does not necessarily result in intensive intervention.

Common across all sensory impairments, is the involvement of specialists such as qualified teachers of sensory impairment who support the children.

Deaf/Hard of Hearing

In this document we use the term 'deaf' to refer to all types of hearing loss, from mild to profound. This includes deafness in one ear or temporary hearing loss such as glue ear. The two main types of deafness are conductive (temporary) and sensorineural (permanent). Some children have a combination of both types of deafness.

The National Deaf Children's Society (NDCS) document Deaf Friendly Teaching¹ says:



Deafness is not a learning disability, and, given the right support, deaf children can make the same progress as hearing children of similar cognitive ability. The majority of deaf pupils are educated in mainstream schools.

[Deaf-friendly teaching: for primary school staff \(ndcs.org.uk\)](https://www.ndcs.org.uk)



***Please view this section along with the Sensory Needs Reasonable Adjustments Guidance (Graduated Response Folder) document.**



****The strategies outlined in the next 4 sections are not a tick list to work through. Individual children and young people may require a range of strategies and interventions from one or all sections.**

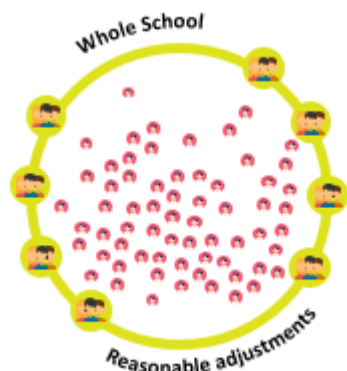
*****Please note that throughout this document we use the terms:**

Qualified Teacher of Deaf Children and Young People(QTODCYP)

Qualified Teacher of Vision Impairment(QTVI)

Qualified Teacher of Multi-Sensory Impairment(QTMSI).

Identify



Many children may have some degree of deafness or hearing difficulty in early years. This is often as a result of glue ear. For the majority of children who are deaf/hard of hearing, needs will already have been identified prior to starting in a setting and support plans will have been agreed. However, if you suspect a hearing loss:

- discuss any concerns that you may have with the family/carers/guardians
- suggest that they ask their GP or health visitor for a referral to the local audiology clinic for a hearing test
- **The Sensory Service** may provide telephone advice and direct you to useful information

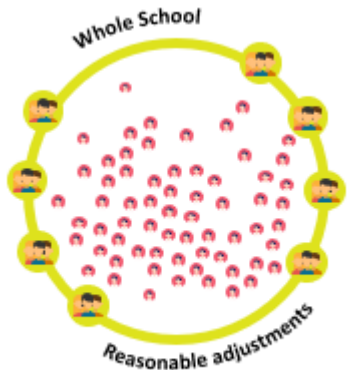
Once a hearing loss is identified by colleagues in Health, the Sensory Service will provide support according to identified need.

Indicators of a possible hearing loss may include:

- | | | | |
|--|--|---|--|
| <ul style="list-style-type: none">• Watches faces or lips intently• Constantly asks for repetition• Does not always follow instructions straight away• Mishears information or appears not to listen• Watches what others are doing before doing it themselves | <ul style="list-style-type: none">• Seeks assistance from peers• Talks either too loudly or too softly• Appears inattentive or as though daydreaming• Has difficulty focusing, listening, or concentrating• Tires easily• Becomes easily frustrated• Has poor phonological awareness | <ul style="list-style-type: none">• Has some difficulty processing or remembering new information, vocabulary, or language• Has less developed vocabulary• Fails to pick up on incidental conversations or language | <ul style="list-style-type: none">• Appears isolated and less involved in social group activities• Experiences misunderstandings in social situations• Misses key information• Has difficulties participating in group discussions and activities• Speech, language, and literacy difficulties |
|--|--|---|--|

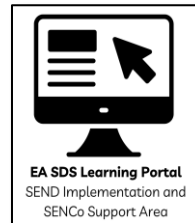
Whole School Educational Provision - Sensory - Deafness/Hard of Hearing

Plan & Action (Please view along with Sensory Needs [Reasonable Adjustments Guidance](#) ([Graduated Response Folder](#)) to Support Children with Sensory Impairments)



The first response to a child not making expected progress should be high quality teaching targeted at their area of need including consideration/implementation of reasonable adjustments in the learning environment.

Sensory Reasonable Adjustments Guidance Document (Graduated Response Folder)

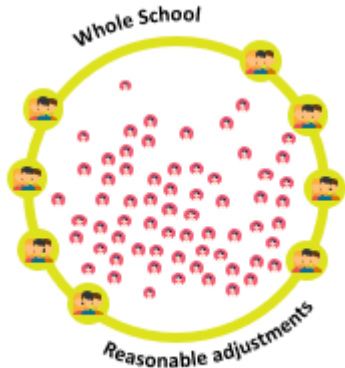


Is your school deaf friendly? Consider the following:

- Have you thought about the seating position in whole group activities so the child can hear and see well?
- Do you check the child is looking at you before you begin speaking?
- Do you use visual strategies to support children listening by e.g; having visual material around the room?
- Is the child accessing what their peers are saying? It is good practice to reiterate peer contributions.

Whole School Educational Provision - Sensory - Deafness/Hard of Hearing

Plan & Action (Please view along with Sensory Needs [Reasonable Adjustments Guidance](#) ([Graduated Response Folder](#)) to Support Children with Sensory Impairments)



Have you thought about reducing background noise by:

- Fitting curtains, carpets or blinds
- Putting rubber tips or 'hush ups' on the bottom of chair and table legs
- Using display drapes on walls and covering hard surfaces with fabric
- Padding the bottom of trays or pencil/pen pots with felt or foam.



For clarification, Sensory Impairment is not the same as Sensory Integration, or Sensory Processing Disorder.

See this short video looking at the difference: [NatSIP - New video: Sensory processing disorder](#)

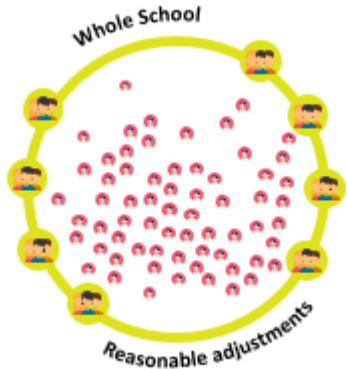
If you are interested in this area, the Sensory Service can provide a series of webinars which focus on working with deaf pupils and executive functioning.

Useful Links:

- [Tips for teaching deaf children with a mild hearing loss \(youtube.com\)](#)
- [NatSIP - What Good Looks Like](#)



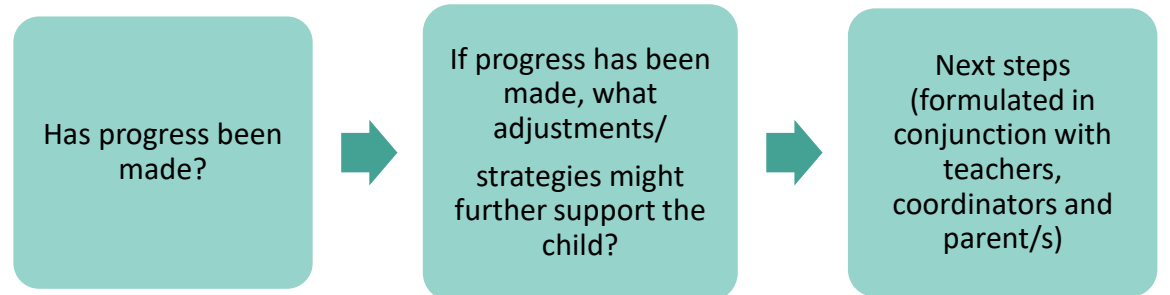
Monitor, Evaluate & Review



Always seek advice from a QTODCYP to ensure that appropriate strategies are in place for individual pupils. This may form part of the school's ongoing *monitoring, evaluating, and reviewing* processes.

Teacher monitoring may include how a child with sensory needs accesses activities. If possible, the child may be able to tell you what works well for them. These views, along with parental views, will all be taken into consideration when evaluating the impact of the whole school educational provision.

The review should consider:

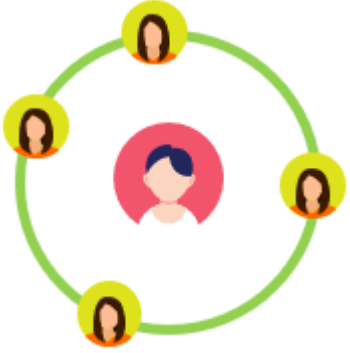


Seeking the perspectives of all involved, to answer these key questions will help determine future planning.

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#) to help with this process.

Special Educational Provision, Stage 1 - Sensory - Deafness/Hard of Hearing

Identify (Please also see [whole school](#))



Some children may require additional support to mitigate potential barriers to progress. The child **will have an identified permanent hearing loss** which may result in functional difficulties, language delay and access requirements.

Progress and outcomes may be in line or slightly below expected compared to age related norms, particularly in language development

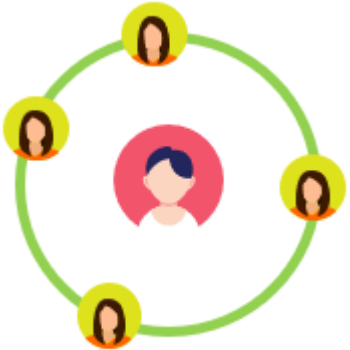
The QTODCYP will assess needs, including if there is a need for additional listening technology and provide advice and information. The school sets PLP outcomes and employs strategies to support the child at stage 1 of the CoP.

Deafness will impact on a range of skills that children will need to learn including:

- Listening skills
- Attention and concentration
- Language development and understanding of new or complex concepts
- Early Literacy skills
- Working memory
- Auditory memory
- Processing time
- Incidental learning
- Social skills and maintaining friendships
- Self-esteem
- Learning style
- Access to audio visual media, online and other sound resources e.g. for Music

Special Educational Provision, Stage 1 - Sensory - Deafness/Hard of Hearing

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) plan & action)



Inclusive strategies for all deaf children may include:

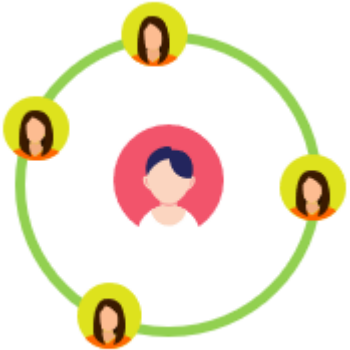
- Making sure that you have the child's attention before you start talking
- Speaking clearly and at your normal level and pace – speaking too slowly or exaggerating mouth patterns will make you harder to understand
- Allowing the deaf child to see your face and lips when speaking – putting something in front of your face or turning to the smart board will make it difficult for them to lip-read
- Checking that the child understands what has been said in a sensitive way, for example asking questions such as 'Who can tell me what we are going to need for this lesson?' or repeating/rephrasing if needed

- Allowing time for children to move their attention between you and other information when you speak so they can use your facial cues and lip patterns to help them understand
- Repeating questions or contributions from other children – their voices may be softer, and speech unclear
- Allowing more thinking and talking time
- Be aware that a child may need more time to complete tasks.
- When appropriate checking that oral information or instructions have been understood



Special Educational Provision, Stage 1 - Sensory - Deafness/Hard of Hearing

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) plan & action)



- Use of visual aids to support teaching/learning and gaps in vocabulary
- The need for access to technology if required (as advised by the QTODCYP)

While these suggestions provide examples of best practice, they are not exhaustive.

The needs of children with a sensory impairment are diverse and adjustments should be made according to the needs of the individual.

Useful Links

[A Girl like Ananya — AVID Language](#)

[Tips for teaching deaf children with a mild hearing loss \(youtube.com\)](#)



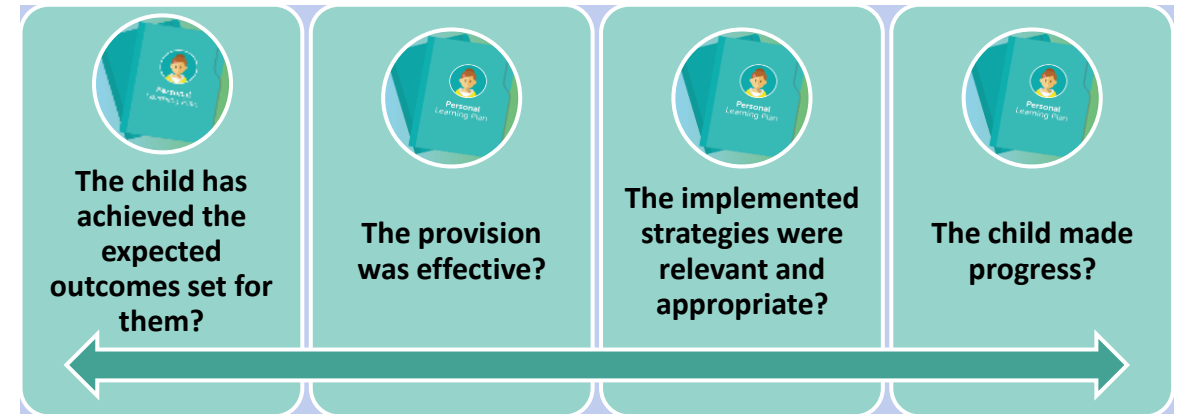
Monitor, Evaluate & Review



Some children may require extra intervention and approaches additional to those provided within whole school provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parents**.

[A Personal learning Plan \(PLP\)](#) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).

When reviewing, consider if:



This process of monitoring evaluating and reviewing will help identify next steps in learning and provision for the child.

Monitor, Evaluate & Review



For a child who has sensory needs due to hearing loss the assessment and review may also include:

- School staff linking with advisory sensory support/specialists as part of the review process
- The child's self-evaluation of support requirements
- The need to access technology if required.
- The child's success in communicating with others, socialising, and forming friendships

Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register.

Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA/or HSCT.



Special Educational Provision, Stage 2 - Sensory - Deafness/Hard of Hearing

Identify (Please also see information at [whole school](#) & [stage 1](#))

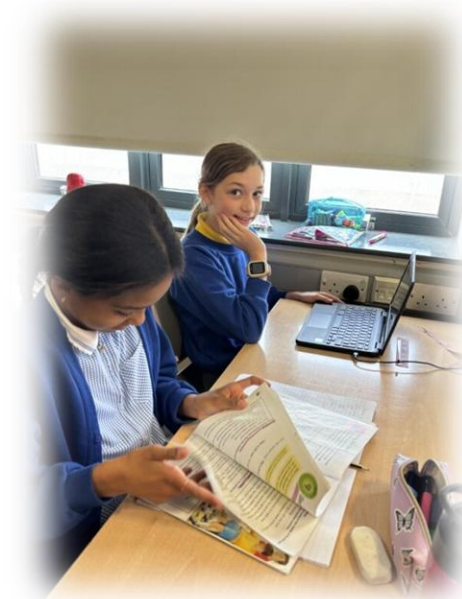


Some children require additional targeted support to mitigate potential barriers to progress and to identify the support that is needed to overcome these.

The challenges presented mean that for many deaf children their plan may need to include support in addition to that which is provided at whole school and stage 1 and if this will indicate a move to stage 2.

The QTODCYP will assess needs, including if there is a need for additional listening technology, and provide advice and information to all staff working with the pupil.

Many deaf children will experience difficulties with spoken language acquisition and impoverished access to language can be severe and long lasting. Improving technologies such as digital hearing aids and cochlear implants have provided new and excellent opportunities for access to spoken language; however, they do not restore normal hearing. The school will set PLP outcomes and employ strategies to support the child at stage 2 of the CoP.



Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) & [stage 1](#) plan & action)



In addition to whole school and stage 1 strategies which will help to ensure inclusion, the challenges presented by hearing loss mean that for many deaf pupils, their plan may include:

- Expected outcomes related to the development of language, communication, literacy, confidence and social skills and the support and the interventions required
- The provision and maintenance of hearing technology
- Pre-teaching of vocabulary, breaking down information into smaller chunks; repeating and rephrasing information; checking understanding through careful questioning
- Teaching vocabulary can also be supported by providing vocabulary for parents to reinforce at home

- Ensuring staff and other children are 'deaf aware' and have a good understanding of what they need to do to ensure the deaf pupil is included within the school
- Using assistive listening technology such as radio aids and sound field systems
- Implementation of strategies advised by the QTODCYP
- Provision of opportunities for children to work one-to-one or in a small group in a quiet listening environment to reinforce language
- Additional time for processing information or responding to a question
- Cueing a child into who is talking or if there is a change in topic

While these suggestions provide examples of best practice, they are not exhaustive. The needs of children with a sensory impairment are diverse and adjustments should be made according to the needs of the individual.

Useful Links:

[Reasonable Adjustments in Schools \(guidedogs.org.uk\)](https://www.guidedogs.org.uk/)

Monitor, Evaluate & Review



At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child, and their parent/s. Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

To help measure this effectiveness of intervention, EA services may consider:

Review of targets/expected outcomes



Issue of reports and recommendations, which should be included in future PLPs



Provision provided to schools in the form of resources, modelling, training, teaching etc.

It is important that the advice and guidance provided by the EA Sensory Service or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

You will need to consider:

- the need for access to technology if required (as advised by the sensory teacher)
- the child's success in communicating with others, socialising and forming friendships
- the balance between access to learning and learning to access
- effectiveness of communication support
- any changes to the child's level of hearing

Monitor, Evaluate & Review



- The [NDCS has produced a Quality Improvement Checklist for schools](#) which is useful for Monitoring, Evaluation and Review.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed.

Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment is appropriate, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)



Special Educational Provision, Stage 3 - Sensory - Deafness/Hard of Hearing

Identify (please also see [whole school](#), [stage1](#) & [stage 2](#))



Where a request for a statutory assessment is made and the outcome is that the EA makes a **statement of special educational needs**, the child will be identified as being at stage 3 of the CoP.



Other identifiers may include:

- The child's difficulties are significant and/or complex and/or multiple
- Their sensory needs may affect the child's ability to take part in particular classroom activities and/or aspects of school life
- The child's sensory needs may impact on their progress in educational, social, or emotional development
- The child's needs have not been met by relevant and purposeful measures taken by the school and external specialists
- Additional special educational provision is required which cannot be provided within the resources normally available to mainstream schools

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#), [stage 1](#) & [stage 2](#) plan & action)



In addition to deaf friendly strategies, some children may require some or all of the following:

- Regular input from a QTODCYP- for direct teaching; in-class support, advice and training to school staff, contribution to any multi-agency involvement; liaison with parents/carers; specialised assessments
- Measures to develop independence skills including independence as a learner, the ability to use and maintain equipment and self-advocacy/self-determination skills
- High levels of support on an individual basis for developing:
 - 1. listening and attention
 - 2. language
 - 3. communication skills

- The provision of communication support as required such as British Sign Language, Irish Sign Language
- Specific teaching strategies and resources to ensure access to teaching and learning
- Communication, literacy, confidence and social skills and the support and interventions required to achieve the outcomes
- Some deaf children in school settings will have a classroom assistant to support them with sign communication
- Any support required to improve self-esteem and social skills including deaf awareness. This may include opportunities to meet peers with a hearing loss

While these suggestions provide examples of best practice, they are not exhaustive. The needs of children with a sensory impairment are diverse and adjustments should be made according to the needs of the individual.

Special Educational Provision, Stage 3 - Sensory - Deafness/Hard of Hearing

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#), [stage 1](#) & [stage 2](#) plan & action)



Useful Links

- [NatSIP - A place to start - Working with a child or young person with sensory impairment](#)
- [Supporting the achievement of deaf children who use English as an additional language \(EAL\) \(ndcs.org.uk\)](#)
- [Deaf-friendly education: Northern Ireland | Documents and resources \(ndcs.org.uk\)](#)
- [Creating good listening conditions | Information for professionals \(ndcs.org.uk\)](#)
- [Supporting Communication with Deaf Babies and Toddlers – YouTube](#)
- [Deaf-friendly early education | Documents and resources \(ndcs.org.uk\)](#)

Useful information:

- Case Study: [2018-02 MTP HI Case Study \(NatSIP Format\) v1.pdf](#)



Monitor, Evaluate & Review



At stage 3 the child will have a statement of Special Educational Needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision/s
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need(s).



Annual Review

The statement of educational need will be reviewed to determine the progress of the child. Input from educational professionals and/or Medical/Allied Health Professionals, the effectiveness of strategies, the impact of any previous interventions, appropriateness of school placement, new information or factors shared, to ensure the statement of educational need is meeting the needs of the child.



Views of the Child & Parent/s

Central to the monitoring evaluation and review process will be consideration of the input and views of the child and parent/s.

The child will continue at Stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Monitor, Evaluate & Review



In the case of a child with a sensory need consider:

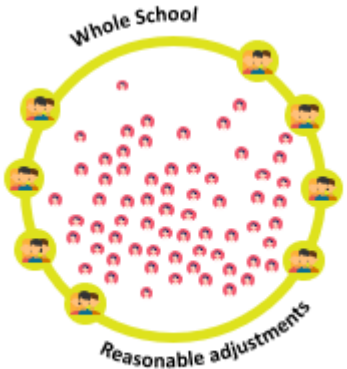
- The effectiveness of technology
- The accessibility of the subject content for example, checking if the pupil is able to understand the language and concepts used in lessons or establishing where and when the pupil may experience most difficulty in hearing what is said
- The child's success in communicating with others, socialising and forming friendships. For example, if there is a classroom assistant, providing sign support, are they able to interpret accurately and fluently what the teacher is saying?
- The pupil's self-evaluation of any support requirements
- The balance between access to learning and learning to access

- Attainment and progress in areas of communication, language, concept development, social skills, motor skills, orientation and mobility, independence skills and emotional development
- The ability to learn independently, manage equipment and articulate their needs and preferences

Where the child is not making the expected amount of progress, all aspects of the plan must be considered in detail as it is crucial to identify the source of difficulties and revise the plan.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Identify



Many children wear glasses/contact lenses to correct a refractive error, and for most, these will bring their vision to within “normal” or “near normal” limits.

A child has a **vision impairment** when glasses do not bring their level of vision within “normal” or “near normal” limits, or where there is a significant visual field loss or a cerebral vision impairment. A child with vision impairment may or may not wear glasses, depending on the cause of the vision loss.

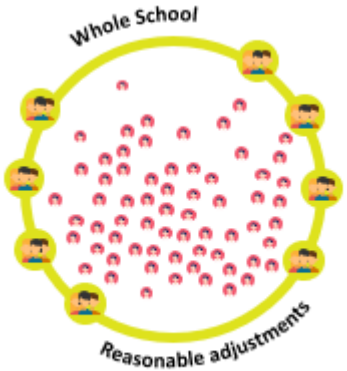
In **whole school educational provision**, the child’s needs can be managed well in a mainstream class with **appropriate differentiation** of task and **teaching style**.

Vision impairment can have an impact on all areas of development including:

- Gross and fine motor skills
- Language
- Cognitive skills
- Social and communication skills reduce the ability to make sense of the world and hence increase anxiety



Identify



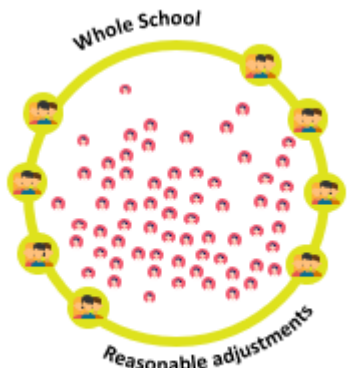
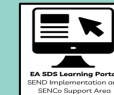
For the majority of children who have vision impairment, needs will already have been identified prior to starting in a setting and support plans will have been agreed.

However, if you suspect a vision impairment:

- Discuss any concerns that you may have with the family/carers/guardians. You should suggest that they ask their GP or Optician for a referral to Ophthalmology
- If prescribed, a child should wear glasses to support their vision impairment.



Plan and Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments)



The first response to a child not making expected progress should be high quality teaching targeted at their area of need including consideration/implementation of reasonable adjustments in the learning environment.

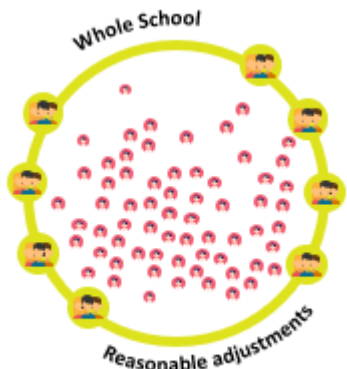
Individual children may require a range of strategies and interventions from one or all, of the following sections. These must not be used as a list to work through.

- Positive Eye has produced a useful audit for inclusive environments for all children (see Appendix in RA document for copy of the relevant audit)
- [SEND Educational Resources and activities from Positive Eye](#)
- [NatSIP - What Good Looks Like](#)

- Assistive technology plays a central role in enabling learners with vision impairment across the age and ability range to access the curriculum independently, avoiding the danger of over-reliance on adult support. This is known as 'learning to access', in contrast to being given 'access to learning'



Monitor, Evaluate & Review



Teacher monitoring including observations, assessments, evidence gathered and professional judgment along with **the views of the child and their parents** will all be taken into consideration when evaluating the **impact of whole school educational provision**.

The review should consider:

- Has progress been made?
- If progress has been made, what adjustments/strategies might further support the child?
- Next steps (formulated in conjunction with teachers, coordinators and parents).

Seeking the perspectives of all involved, to answer these key questions will help determine future planning.

A child with sensory needs, should be asked on a regular basis for feedback to monitor their access to lessons and to find out what is working well or needs adjustment.

Always seek advice from a Qualified Teacher for Vision Impairment (QTVI) to ensure that appropriate strategies are in place for individual pupils. This may form part of the school's ongoing monitoring, evaluating, and reviewing processes.



Special Educational Provision, Stage 1 - Sensory – Vision Impairment

Identify (Please also see [whole school](#))



At Stage 1, the child's needs should be managed in a **mainstream class with reasonable adjustments** and appropriate **differentiation** of task and **teaching style**.

We know vision impairment is associated with major obstacles to children acquiring and developing fundamental skills.

We also know these obstacles can be reduced, or removed, if children with vision impairment receive appropriate teaching input in an appropriate teaching environment.

The school sets PLP outcomes and employs strategies to support the child at stage 1 of the CoP.

Specialist qualified practitioners, including QTVIs and in some cases habilitation specialists, will lead on teaching essential specialist skills that children with VI need to develop to access learning with as much independence as possible and prepare for adulthood, such as use of assistive technology.

These skills are identified in the [Curriculum Framework for Children and Young People with Vision Impairment](#) (CFVI).

QTVIs can support classroom teachers in understanding a learner's vision impairment and its implications for their access to learning and wider development.

Always seek advice from a QTVI to ensure that appropriate strategies are in place for individual pupils.

Special Educational Provision, Stage 1 - Sensory – Vision Impairment

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) plan & action)



- If the child has mild vision impairment and nystagmus, please also refer to the Sensory Service nystagmus advice sheet: [Nystagmus \(eani.org.uk\)](http://Nystagmus.eani.org.uk)
- In most cases, these children do not require specialist interventions from a QTVI
- Remember to ensure that information about the child's vision is shared with new teachers before the beginning of each academic year
- Glasses should be worn all the time including at playtimes and for P.E. Glasses should be clean and children should be encouraged to take responsibility for cleaning them frequently throughout the day

Please also see Reasonable Adjustment guidance to support children with sensory impairments which should be viewed alongside plans and actions.

While these suggestions provide examples of best practice, they are not exhaustive.

The needs of children with a sensory impairment are diverse and adjustments should be made according to the needs of the individual child within the specific context.



Monitor, Evaluate & Review

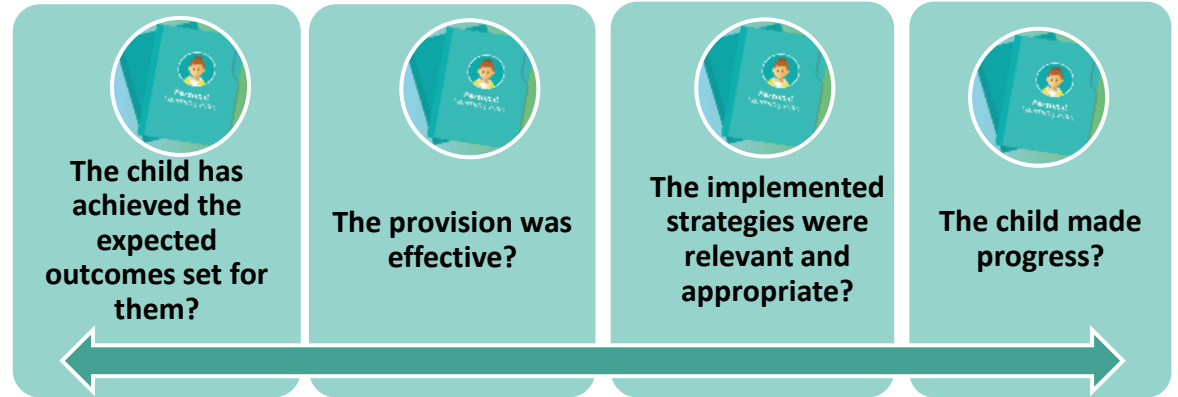


Some children may require **extra intervention and approaches additional** to those provided within whole school provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice.

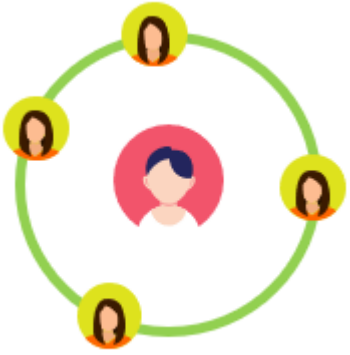
The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parents**.

A [Personal learning Plan \(PLP\)](#) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).

When reviewing, consider if:



Monitor, Evaluate & Review



This process of monitoring, evaluating and reviewing will help identify next steps in learning and provision for the child.

For a child who has sensory needs due to a **vision impairment**, an **assessment and review** may include:

- The child's self-evaluation of any support requirements
- Information on levels of attainment in line with peers
- The involvement of specialists such as a QTVI for ongoing advice as required

- The need for access to technology if required (as advised by QTVI)
- The child's success in communicating with others, socialising and forming friendships

Please also refer to the Department of Education: Flowcharts and Checklists(Nursery)

Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register. Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, a more intensive provision providing specialist support from the EA/or HSCT.

Identify (Please also see [whole school](#) & [stage1](#))



Some children **require additional targeted support** to mitigate potential barriers to progress and to identify the support that is needed to overcome these.

- The QTVI will support the school with understanding the practical implications of visual difficulties on a child's access to learning.
- The QTVI will assess needs, including if there is a need for any assistive technology and provide advice and information to all staff working with the child.

- Depending on the nature of their visual loss, any assistive technology they use and any other support they receive in lessons may require adjustments to your teaching/support style to ensure they are fully included in your lessons.



Special Educational Provision, Stage 2 - Sensory – Vision Impairment

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) & [stage 1 plan & action](#))



The school sets PLP outcomes and employs strategies to support the child at stage 2 of the CoP.

The challenges presented by a vision impairment suggest that, for many learners, their plan is likely to include targets and/or support strategies in the following areas:

- Measures to develop independence skills including working unsupported in the classroom, the ability to use and maintain equipment and self-advocacy/self-determination skills
- The provision and maintenance of assistive technology and training
- Low vision assessments and prescription of low vision aids/magnifiers

- The QTVI will advise on the appropriate strategies to enhance self-esteem, facilitate friendships, enable meaningful communication, and peer awareness of pupil's disability and associated needs (as appropriate and in agreement with the pupil/parents)
- The development of habilitation skills (for example, mobility and independence)
- Regular input from specialist staff such as QTVI and registered qualified habilitation specialists (RQHS) for advisory work
- The provision of support for the timely adaptation of resources
- Specific teaching strategies and resources to ensure access to teaching

Useful Links: The Royal National Institute for Blind (RNIB) has produced a useful resource: [Access to Education](#)

While these suggestions provide examples of best practice, they are not exhaustive. The needs of children with a sensory impairment are diverse and adjustments should be made according to the needs of the individual pupil, within the specific context.

Monitor, Evaluate & Review

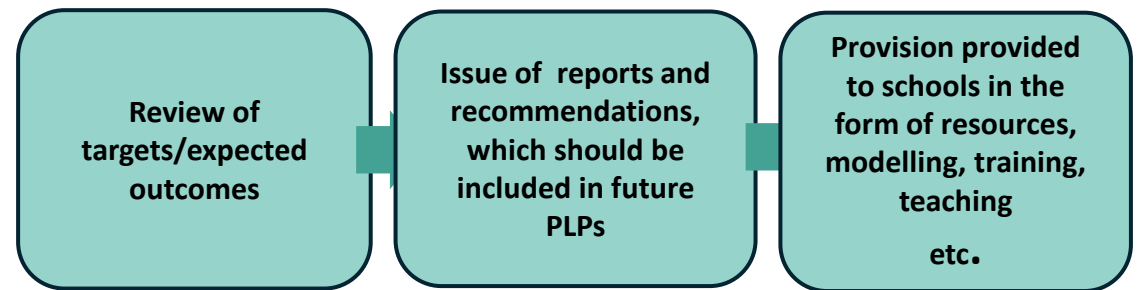


At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT - including a QTVI) for ongoing advice, as required, supporting the child's unmet need.

The **monitoring, evaluating, and reviewing** of the PLP by the school will take place in consultation with the external service, and include the child and their parent(s).

Together they will make informed decisions on the effectiveness of the targeted intervention/provision put in place.

To help measure this effectiveness of intervention, EA services may consider:



It is important that the advice and guidance provided by the EA Sensory Service or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

Monitor, Evaluate & Review



In the case of a child with a sensory need, consider the following:

- Information on levels of attainment
- The child's self-evaluation of any support requirements
- The need for access to technology if required (as advised by the QTVI)
- The child's success in communicating with others, socialising and forming friendships

Where the **stage 2 provision has made little or no impact** and the **needs of the child continue to be significant and/or complex** and impact on their learning/ability to access the curriculum effectively, a **more intensive approach** will be needed.

Consideration may be given to making a **request for a statutory assessment** at stage 2.

While the EA is considering whether to carry out a statutory assessment appropriate, the school should continue to implement, monitor, and review the child's PLP.



Special Educational Provision, Stage 3 - Sensory – Vision Impairment

Identify (Please also see [whole school](#), [stage1](#) & [stage 2](#))



The needs of some children cannot be met by whole school or targeted intervention and support approaches alone.

In these cases, their vision difficulties are likely to be significant and long term or have possible future deterioration.

Children at stage 3 will have a **statement of special educational needs** outlining their difficulties and the provision needed for supporting these difficulties in school.

They may have:

- Significantly reduced vision acuity
- Significantly reduced near vision requiring print above point 36
- Other diagnosed eye conditions seriously impacting on their ability to access the curriculum
- Require a high level of support in class and for preparation of resources as all materials need to be presented in an adapted form
- Significantly reduced near vision requiring print above point 36
- Significantly reduced fields of vision
- Learn through tactile means such as Braille
- Rely on specialist equipment to access the curriculum

Special Educational Provision, Stage 3 - Sensory – Vision Impairment

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#), [stage 1](#) & [stage 2](#) plan & action)



Children will require a higher level of adult support/intervention to follow classroom routines and learning or will rely on significantly modified/adapted resources.

They will require a highly personalised approach drawing on additional interventions and support from skilled classroom assistants with an understanding for the implications of the young child's vision impairment and access needs.

These may include some or all of the following:

- Access to the curriculum which has been adapted to meet vision needs such as Braille, tactile, enlarged resources
- Intervention teaching from QTVI to teach specialist skills alongside mainstream curriculum

- A need for regular assessments and monitoring of IT needs
- Formal ongoing instruction in the development of mobility and orientation skills and independence
- Require braille or MOON, tactile diagrams, 3D representations, concrete objects and experiences, and multi-sensory learning materials to access the curriculum
- Specialist classroom assistant support in class to facilitate access, inclusion, and independent learning opportunities

Useful Links:

[NatSIP - A place to start - Working with a child or young person with sensory impairment](#)

Accessing print is vital for learning. This Australian video summarises some options and the universal principles: [Supporting Students to Access Print: A Classroom](#)

[Teacher's Guide](#)

[Common misconceptions about vision impairment \(guidedogs.org.uk\)](#)

Monitor, Evaluate & Review



At **stage 3** the child/young person will have a **Statement of Special Educational Needs**. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust. Reviews of progress should include specific reference to vision targets detailing strategies and resources to facilitate the child's progress.

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision/s
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need(s).



Annual Review

The statement of educational need will be reviewed to determine the progress of the child. Input from educational professionals and/or Medical/Allied Health Professionals, the effectiveness of strategies, the impact of any previous interventions, appropriateness of school placement, new information or factors shared, to ensure the statement of educational need is meeting the needs of the child.



Views of the Child & Parent/s

Central to the monitoring evaluation and review process will be consideration of the input and views of the child and parent/s.

The child will continue at **Stage 3** and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Monitor, Evaluate & Review



Reviews should consider the [Curriculum Framework for Children and Young People with Vision Impairment](#) (CFVI).

In the case of a child with a sensory need consider:

- The pupil's self-evaluation of any support requirements
- The child will need access to documents in accessible formats, e.g. Braille/large print. The child will need a familiar adult to support them in communicating their views
- Information on levels of attainment in line with peers
- The views of parents/carers about appropriate provision
- The accessibility of the subject content
- The involvement of specialists such as a QTVI for ongoing advice as required
- The need for access to technology if required (as advised by the QTVI)

- Where appropriate reviews should involve input from external professionals
- The ability to plan and organise their learning and to manage transitions between activities and environments, including moving confidently around the school
- The ability to learn independently, manage equipment and articulate their needs and preferences
- The child's success in communicating with others, socialising and forming friendships
- The balance between access to learning and learning to access

Where the child is not making the expected amount of progress, all aspects of the plan must be considered in detail it is crucial to identify the source of difficulties and revise the plan.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Multi-Sensory Impairment (MSI)

Children with multi-sensory impairment (MSI) have impairments of both sight and hearing. Many children also face other challenges, such as medical conditions or physical disabilities. MSI is a very rare impairment, particularly in children. There are an estimated 4,000 children/young people with MSI in the United Kingdom (about 3 in every 10,000 children).

Impairments may range from mild to profound, may fluctuate or cause consistent loss, and may affect the reception or processing of sensory information. A very small number of children with MSI are totally blind and deaf, but most have some useful vision and/or hearing. It may not be clear at first how well a child can see or hear, especially if they have additional needs.

A huge range of conditions can cause MSI. There is no single or main cause.

Diagnosis can take time, and many parents/carers find this very difficult.

Understanding how their child's condition might progress in the future is very important.

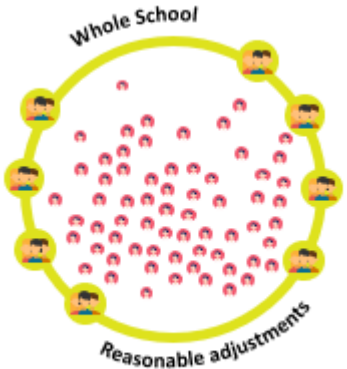
Deaf blindness is a unique disability. The two impairments of vision and hearing loss together increase the effects of each area. Deafblind children will experience difficulties in communication, independent mobility, orientation, and access to information.

A qualified teacher for multi-sensory impairment (QTMSI) working in conjunction with a qualified teacher of deaf children and young people and a qualified teacher for visual impairment can offer advice and support to families and educational settings regarding a child's MSI, with strategies to support access to the curriculum.

About 80% of children and young people with MSI have additional complex and physical needs. Children and young people with MSI need specialist support and approaches to teaching, learning, and developing independence.

For further information, please refer to recommendations detailed in the Deaf/Hard of Hearing and Vision Impairment sections.

Identify



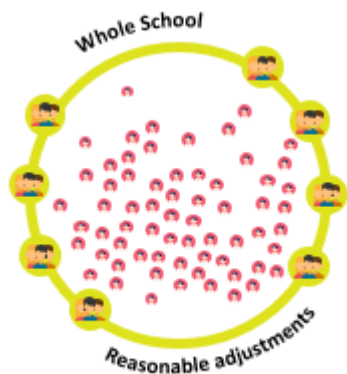
Many children wear glasses or contact lenses and there will be children who might have limited vision in one eye. They may need certain adaptations to support their access, but this does not in itself represent a special educational need. Many children have some degree of hearing loss at some point in their school years. This may affect one or both ears and may be fluctuating in its nature. If hearing loss is temporary and vision is corrected by glasses, then it should not be assumed that the child has SEN.

Multi-Sensory Impairment can be classified as follows:

- Mild multi-sensory loss - dual impairment with a mild loss in both modalities
- Moderate multi-sensory loss - dual impairment with a moderate loss in both modalities
- Severe multi-sensory loss - dual impairment with a severe loss in both or the most affected modality
- Profound multi-sensory loss - dual impairment with a profound loss in both or the most affected modality

It can affect both senses at the same time or initially affect one (e.g. hearing) and then progressively affect the other (e.g. vision).

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to support Children with sensory impairments)



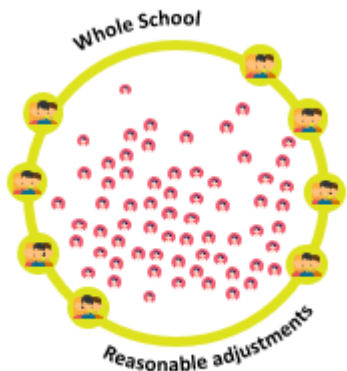
Please refer to recommendations detailed in the Deaf/Hard of Hearing and Vision Impairment sections.

A child who has been identified with MSI may require more than whole school strategies. Always seek advice from the Sensory Service to ensure that appropriate strategies are in place for individual pupils.

[NatSIP - What Good Looks Like](#)



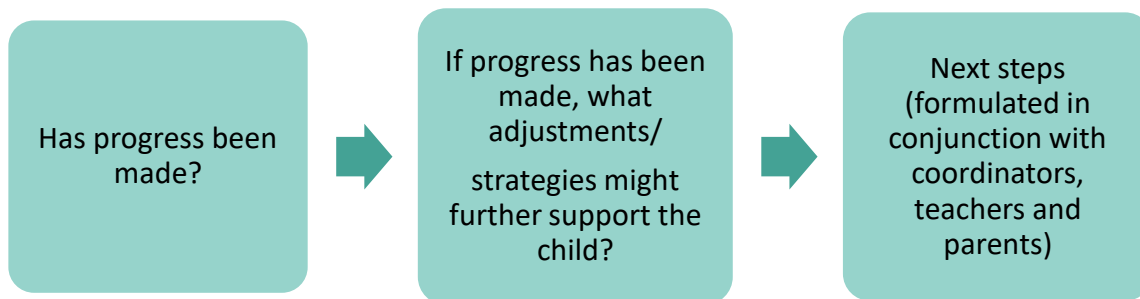
Monitor, Evaluation & Review



Teacher monitoring including observations, assessments, evidence gathered and professional judgment along with the views of the child and their parent(s) will all be taken into consideration when evaluating the impact of whole school educational provision.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#) to help with this process.

The review should consider:



Seeking the perspectives of all involved, to answer these key questions will help determine future planning.

A child with sensory needs, should be asked on a regular basis for feedback to monitor their access to lessons and to find out what is working well or needs adjustment. Always seek advice from a specialist teacher to ensure that appropriate strategies are in place for individual pupils. This may form part of the school's ongoing monitoring, evaluating, and reviewing processes.

Stage 1 Special Educational Provision - MSI

Identify (Please also see [whole school](#))



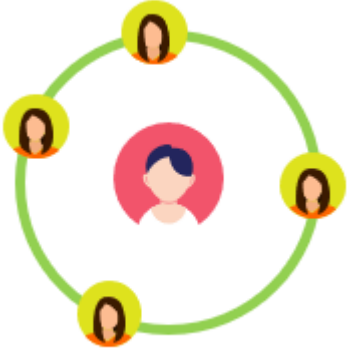
Some children may require additional school-based support to mitigate potential barriers to progress.

At Stage 1, the child's needs should be managed in a mainstream class with reasonable adjustments and appropriate differentiation of task and teaching style.



Stage 1 Special Educational Provision - MSI

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school plan & action](#))



The school sets PLP outcomes and employs strategies to support the child at stage 1 of the CoP.

In addition to the recommendations detailed in the Deaf/Hard of Hearing and Vision Impairment sections:

Every learner is an individual – speak to the learner, their families/carers/guardians, previous teachers, specialist teacher(s) and external agencies, to develop an understanding of the learner’s individual needs and strategies and interventions that can support their access to learning.

- Plan individual lessons, and the wider school day, with routine and consistency
- Provide opportunities for both pre-learning and over-learning
- Break tasks into manageable chunks with sensory breaks as needed
- Allow extra time for transitioning around the classroom and school



Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school plan & action](#))



Consider the needs of the learner when creating the classroom environment:

- The learner is seated in a place that best supports any useful sight and hearing
- The classroom is organised in a way that provides safe movement pathways, and is kept tidy and organised
- Background noise is kept to a minimum e.g. carpets, curtains and other soft furnishings absorb noise produced during daily activities
- The learner has access to assistive technology and tactile resources to support their learning (if required and recommended by the Sensory Service)

- Activities should be presented in a way which meets the learner's individual sensory needs
- Have a daily routine to check that glasses are clean and that hearing aids (if worn) are working, encouraging independence wherever possible
- Provide the learner with concrete experiences whenever possible as MSI learners miss out on incidental learning
- Be able to pre-empt fatigue and encourage short sensory breaks

While these suggestions provide examples of best practice, they are not exhaustive.

The needs of children with a MSI are diverse and adjustments should be made according to the needs of the individual child within the specific context.

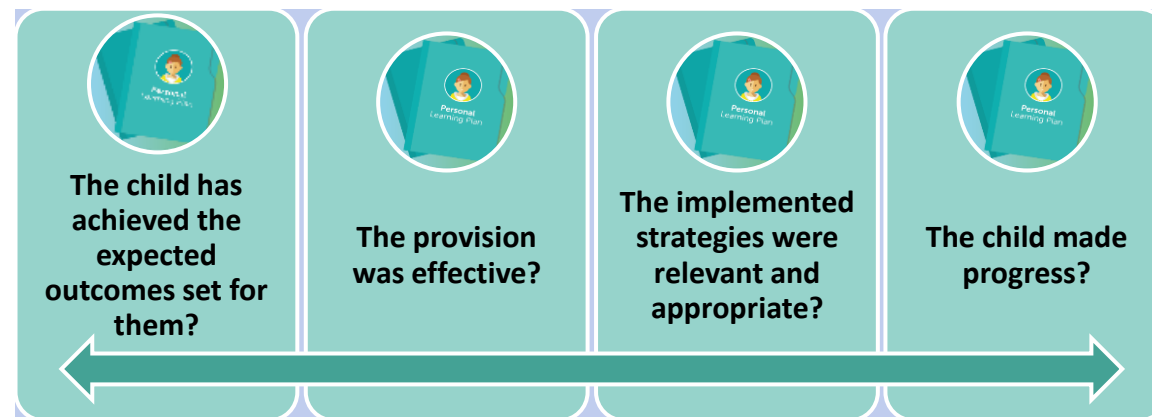
Monitor, Evaluate & Review



Some children may require extra intervention and approaches additional to those provided within whole school educational provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parent(s)**.

[A Personal learning Plan \(PLP\)](#) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).

When reviewing, consider if:



This process of monitoring evaluating and reviewing will help identify next steps in learning and provision for the child.

Monitor, Evaluate & Review



For a child who has MSI, the assessment and review may also include:

- School staff linking with advisory sensory support/specialists as part of the review process
- The need to access technology if required
- The child's success in communicating with others, socialising, and forming friendships

Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register.

Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA/or HSCT.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Identify (Please also see [whole school](#) & [stage 1](#))



The level of difficulty the child experiences will depend on the extent to which they have some useful hearing and vision.



Difficulties may become apparent in the following areas:

- Ability to access the curriculum
- Social and emotional learning and development
- Ability to develop self-help strategies
- Ability to develop receptive and expressive communication skills

They may have:

- Assessed vision loss that cannot be corrected by glasses, reducing near or distance vision
- An identified hearing loss

Stage 2 – Special Educational Provision - MSI

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#) & [stage 1](#) plan & action)



In addition to advice and strategies for Deaf/HH and Vision Impairment:

Good management of the classroom environment will:

- Ensure access to auditory and visual information (see recommendations in Deaf/HH section)
- Use the learner's personal communication strategies as identified by the QTMSI to signal a clear beginning and end of the lesson
- Use appropriate compensatory strategies such as visual, auditory, and tactile prompts, cues and modelling to ensure the learner has enough information to work independently
- Include access to the curriculum which has been adapted to meet vision needs- this could be electronic, enlarged, or tactile resources

- Include breaking tasks into manageable chunks
- Include differentiation - pre-working, over-working or prioritising the tasks required of the learner to consider the slower rate of processing, the distorted or missing information that the learner is receiving
- Involve liaison and consultation with external agencies
- [Reasonable Adjustments in Schools \(guidedogs.org.uk\)](https://www.guidedogs.org.uk)

While these suggestions provide examples of best practice, they are not exhaustive. The needs of children with a MSI are diverse and adjustments should be made according to the needs of the individual pupil, within the specific context

Stage 2 - Special Educational Provision - MSI

Monitor, Evaluate & Review



At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child and their parent(s). Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

To help measure this effectiveness of intervention, EA services may consider:

Review of targets/expected outcomes



Issue of reports and recommendations, which should be included in future PLPs



Provision provided to schools in the form of resources, modelling, training, teaching etc.

It is important that the advice and guidance provided by the EA Sensory Service or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

You will need to consider:

- Information on levels of attainment
- The child's self-evaluation of any support requirements
- The need for access to technology if required (as advised by the advisory teacher)
- The accessibility of the learning activities
- The child's success in communicating with others, socialising and forming friendships
- The balance between access to learning and learning to access
- Effectiveness of communication support
- Any changes to the child's level of hearing

Monitor, Evaluate & Review



The [NDCS has produced a Quality Improvement Checklist for schools](#) which is useful for Monitoring, Evaluation and Review.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed.

Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment appropriate, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)



Stage 3 - Special Educational Provision – MSI

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Multi-sensory impairment affects all areas of development because most of the information used for learning comes through vision and/or hearing.

Each child with deafblindness/MSI will have a unique combination of needs and support will need to be highly individualised. Some information on appropriate learning environments, curriculum and teaching strategies can be found on the [SENSE website](#), but most adjustments will be decided by professionals from the school and sensory support services who know the individual pupil well.

Children with deafblindness/MSI often have multiple complex needs and considerable numbers of professionals involved with their support. Ongoing liaison and a shared understanding of the pupil's overall development is central to meeting the needs of the child.

Children at stage 3 will have a statement of special educational needs outlining their difficulties and the provision needed to support them in school.

The following aspects of learning are likely to be particularly affected:

- Access to information through hearing, vision, and other senses
- Communication and language development
- Development of abstract concepts
- Social interaction and relationships
- Executive function
- Processing time
- Transitions and unfamiliar events or contexts
- Incidental learning
- Generalisation of skills and concepts
- Independence skills
- Exploration and interaction with the physical environment
- Movement, mobility, and orientation
- Emotional development and self-esteem
- Sensory processing and integration

Stage 3 - Special Educational Provision – MSI

Plan & Action (Please refer to support strategies in Vision Impairment and Deaf/HH sections)



The challenges presented by multi-sensory impairment suggest that for many children with deafblindness/MSI their plan is likely to include expected outcomes related to the development of communication, language, concept development, social skills, motor skills, orientation and mobility, independence skills, emotional development, the support, and interventions required to achieve these outcomes.



A small number of children will require:

- Access to the curriculum which has been significantly adapted to meet their multi-sensory needs
- Significant additional support to ensure safe movement around school including support for managing transitions
- The provision of receptive and expressive communication support, including the routine use of alternative, adapted or augmented communication methods if appropriate
- Regular visits from specialist teachers and access to support from specialist staff such as QTMSI, QTOD, QTVI, speech and language therapists, occupational therapists, and habilitation officers
- Additional time to carry out normal classroom tasks and activities with adult support
- The provision and maintenance of any specialist equipment such as hearing and visual equipment, mobility aids, communication aids and other assistive technology (if appropriate and as recommended by the Sensory Service)

Stage 3 - Special Educational Provision – MSI

Plan & Action (Please view along with [Sensory Needs Reasonable Adjustments Guidance \(Graduated Response Folder\)](#) to Support Children with Sensory Impairments. Please also see [whole school](#), [stage 1](#) & [stage 2](#) plan & action)



- A highly personalised approach drawing on additional interventions and support
- Measures to develop independence skills including independence as a learner, the ability to use and maintain equipment and self-advocacy/self-determination skills
- A higher level of adult support/intervention to follow classroom routines and learning
- Ensuring staff are aware of the needs of the child with deafblindness/MSI and of what can be done to overcome barriers to learning and participation

Useful Links:

Case Study: [NatSIP - Multi-sensory Impairment Case Study](#)
[Resources for education and early years professionals - Sense](#)

[You can find the guidance for England, Scotland, and Wales on the Guide Dogs website.](#)

- Any support required to improve self-esteem and social skills
- Specific teaching strategies and resources to ensure access to teaching and learning
- Any adjustments needed to meet additional physical, medical, or other needs, such as the involvement of a specialist speech and language therapist to help with eating difficulties
- If appropriate, orientation and mobility training under the guidance of a habilitation officer
- Details of who is responsible for the overall co-ordination of the plan, who is responsible for delivering key aspects of the provision and how liaison between the range of professionals and parents will be managed.

While these suggestions provide examples of best practice, they are not exhaustive. The needs of children with a MSI are diverse and adjustments should be made according to the needs of the individual pupil, within the specific context.

Stage 3 - Special Educational Provision – MSI

Monitor, Evaluate & Review



At stage 3 the child will have a Statement of Special Educational Needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision/s
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need(s).



Annual Review

The statement of educational need will be reviewed to determine the progress of the child. Input from educational professionals and/or Medical/Allied Health Professionals, the effectiveness of strategies, the impact of any previous interventions, appropriateness of school placement, new information or factors shared, to ensure the statement of educational need is meeting the needs of the child.



Views of the Child & Parent(s)

Central to the monitoring evaluation and review process will be consideration of the input and views of the child and parent(s).

The child will continue at Stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

Monitor, Evaluate & Review



Assessment and review should include:

- The child will need access to documents in accessible formats, e.g. Braille/Large Print. The child will need a familiar adult to support them in communicating their views
- Information on levels of attainment in line with peers
- Attainment and progress in areas of communication, language, concept development, social skills, motor skills, orientation and mobility, independence skills and emotional development
- The accessibility of the subject content - for example, checking if the child is able to understand the language and concepts used in lessons or able to sustain attention until the end of a lesson with high visual or auditory demands

- The effectiveness of technology and other equipment
- Any changes to the child's level of hearing, vision, motor skills or other areas of development
- The success in communicating with others, socialising and forming friendships
- The ability to learn independently, manage equipment and articulate their needs and preferences
- The ability to plan and organise their learning and to manage transitions between activities and environments, including moving confidently around the school
- The involvement of specialists for ongoing advice as required
- The balance between access to learning and learning to access
- Where appropriate reviews should involve input from external professionals

Where the child is not making expected amount of progress, all aspects of the plan must be considered in detail as it is crucial to identify the source of difficulties and revise the plan.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Physical Needs

The Graduated Response



Physical Needs

Physical disability is a generic term that encompasses a wide range of conditions. The condition may be congenital such as Spina Bifida, Muscular Dystrophy or Cerebral Palsy or a condition acquired at any stage including post-accident, tumour, or stroke. A physical disability can be described as long term, usually lasting a lifetime, and is seldom static, therefore needs should be reviewed often.

Some children can access the curriculum and learn effectively without additional educational provision. They may have a disability and require reasonable adjustments but do not have a special educational need. These children/young people should **only be recorded on the Medical Register**.

For others, the impact on their education may be more significant. Children with a medical diagnosis or a physical condition impacting on their physical needs will also be recorded on the SEN Register if special educational provision is required in school. In these cases, children should be recorded on the **Medical Register and the SEN Register**, as per Article 3 2b of the Education (Northern Ireland) Order 1996.

Some children require special educational provision because they have a disability identified by **medical** practitioners which prevents or hinders them from making use of the educational facilities generally provided by schools. Some children with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers. Certain adaptations may be needed to support access to learning and social opportunities, but this does not in itself represent a special educational need.

These difficulties, physical or medical can be age related and may change over time. Therefore, it is important to maintain close liaison with all professionals involved in the care and education of the child.

Physical Needs

Physical Needs (PN)

There are a wide range of physical disabilities affecting pupils within the whole ability range:

- Acquired Brain Injury
- Brittle Bone Disease
- Cerebral Palsy
- Abnormalities: Congenital, Lower Limb, Upper Limb, Traumatic
- Muscular Dystrophy
- Spina bifida – with Hydrocephalus
- Spina bifida – without Hydrocephalus



Medical Diagnoses

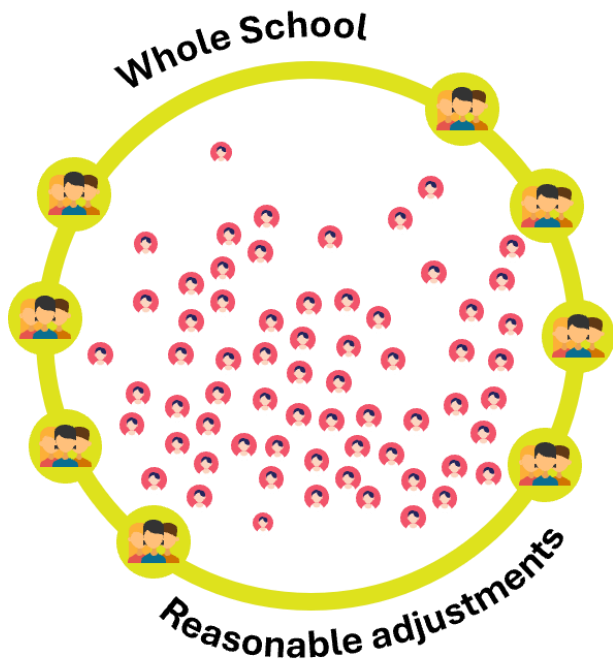
Some examples of medical diagnoses commonly identified and agreed by the Department of Health which occur within the school population include:

- Anaphylaxis
- Asthma
- Diabetes
- Epilepsy
- Other Medical Condition/Disorder
- Physical Disability
- Significant accidental injury

A more extensive list of diagnoses can be found on:

[DE SEN/Medical document](#)

Identify



Schools need to be informed about any physical/medical needs a child has, if they are undergoing assessment, or when they develop a physical/medical condition. Children vary in their reaction to a particular physical/medical condition, and this involves schools responding to health care needs on an individual basis.

Unlike identifying learning difficulties, neither teachers nor educational psychologists are qualified or responsible for diagnosing a child's physical/medical condition.

Where there is evidence from a registered health professional or from the HSCT that a child has a physical/medical condition, the school, in addition to recording them on a medical register, should be alert to any potential negative impact on their learning and participation in school.



Plan and Action

The first response to a child not making expected progress should be high quality teaching targeted at their area of need including consideration/implementation of reasonable adjustments in the learning environment. **See Guidance Documents in the [WEP/SpEP Folder in the SEND Implementation and SENCo Support Learning](#)**



Plans and Actions may incorporate:

Provision Mapping with Reasonable Adjustments at Whole School. Staff must take all steps from the school's provision map to put reasonable adjustments and provisions in place. ***Example of a reasonable adjustment:** for pupils who attend hospital appointments on a regular basis, special arrangements may be necessary, for example, catch up sessions using google classroom.*

Whole School Policies/Procedures/Processes should be appropriate for supporting children with physical and/or medical needs (and must reflect current guidance and best practice). School policies should be applied uniformly but not inflexibly or insensitively. A school should have a suite of Pastoral Care Policies, Attendance Policy, First Aid Policy (and trained First Aiders) and an Administration of Medication Policy in line with [DE Supporting child/young person with Medication Needs](#).

Risk Assessment Training. The concept of risk assessment is recognised as an effective means of controlling risk and keeping pupils safe.

[Risk Assessment staff training link](#)

Health Care Training. Schools need to identify most relevant training to support their child with physical/medical needs. Awareness presentations of different medical conditions should be completed annually by all staff (teaching and non-teaching).

[Health Awareness Training](#)

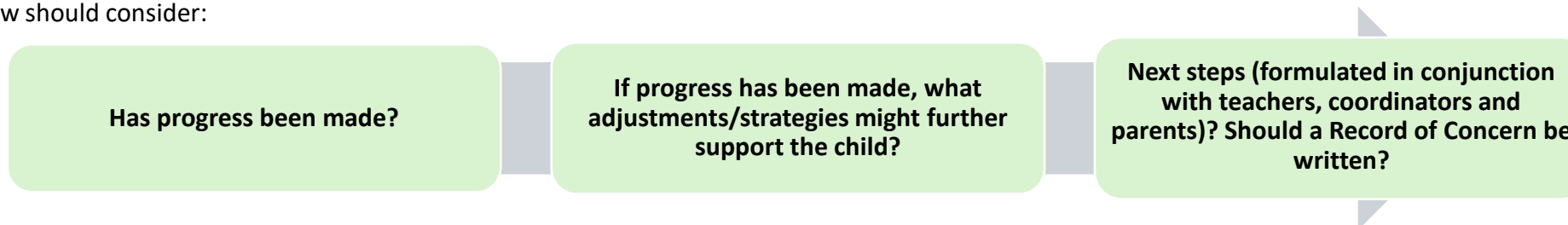
Accessibility Planning. An accessibility plan must be in place. The duty to make relevant and purposeful reasonable adjustments is an anticipatory, proactive, and reactive one. Please refer to: EA [Accessibility Planning Guidance](#)

Useful Resources: <https://send.eani.org.uk/support-services/medical-needs/useful-resources-and-links>

Monitor, Evaluate and Review

Teacher monitoring including observations, assessments, evidence gathered and professional judgment, along with the views of the child and their parents, will all be taken into consideration when evaluating the impact of the whole school educational provision as part of ongoing assessment within a designated timeframe in school.

The review should consider:



Progress is evaluated through an ongoing cycle of **Identify, Plan, Action, Monitor, Evaluate and Review**. Participation of school staff, child and parent(s) should be included in the 6-part cycle.

Setting staff will monitor, evaluate, and review the effectiveness of policies, procedures, processes, adjustments, and provision put in place by the educational setting at least annually and in line with school improvement and budget planning if applicable.

Recommended best practice is termly monitoring of respective plans and an end of year evaluation and report to the Board of Governors.

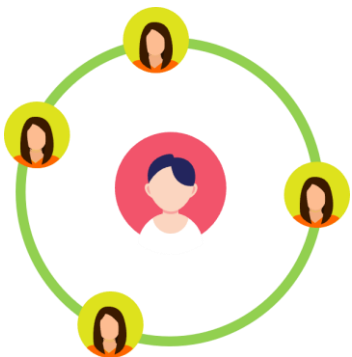
The Risk Management Plan (RMP) in place should be reviewed by school staff as required, including for example, post significant incident to include lessons learnt. Attendance monitoring is another example.

Seeking the perspectives of all involved, to answer these key questions will help determine future planning.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#) to help with this process.

Stage 1 – Special Educational Provision

Identify (Please also see [whole school](#))



Despite whole school educational provision and reasonable adjustments being made, the progress in learning for the child is at a slower rate due to the impact of their condition.

The child is identified as needing provision, which is **additional to, or otherwise different from**, their peers. They are placed on the school's SEN register at stage 1, in consultation with parent(s). A Personal Learning Plan (PLP) will be implemented for the child.

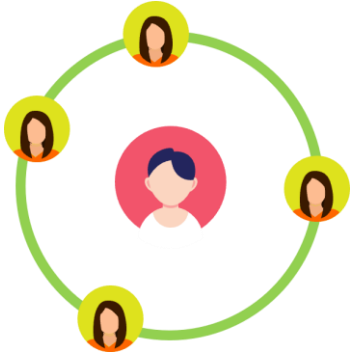
The school will use their **special educational provision map** to identify stage 1 strategies/provision that are available to help the child.

Further indicators of need because of the impact of the physical/medical difficulties may include:

- Lack of concentration or ability to remain fully motivated, because of medication or the nature of the physical or medical difficulty
- Aspects of self-care, such as toileting, feeding and dressing
- Not making academic progress in line with their peers
- Difficulties with large/fine motor skills and/or self-help skills
- Participation in setting/classroom activities and undertaking certain tasks that impacts significantly on the pace of work in comparison to peers
- Concerns regarding social inclusion
- Needing minor adaptations to access the curriculum and setting environment
- Low self-esteem and confidence due to physical/medical needs

Stage 1 – Special Educational Provision

Plan and Action (Please also see [whole school](#))



A PLP is prepared to reflect the SEN category (or categories), outcomes are written to include provision and strategies to support the child at stage 1 of the Code of Practice.

Plans and actions may include:

- **Provision Mapping** - Class teachers to liaise and plan with school LSC to agree specific outcomes for the PLP, linked to the child's need/s, supported by stage one provision as outlined in the school's provision map.

- **Risk Assessment/Risk Management Planning** - Reviewing and monitoring of the Risk Assessment and Risk Management plan is recommended in line with the child's increasing needs. The School Risk Management Plan is central to the management of the child's health and safety within the school, needs to be consistent and should indicate the control measures which will be actioned in implementing the individual healthcare plan. A Parental signature on the agreed plan is at the discretion of the school/Board of Governors.
- Agreement between parents and school relating to the administration of any prescribed medication stated within the **Health Care Plan** and who will administer the medication. For example: if parents are solely responsible or if there are staff who volunteer to administer medication (school nurse/medical coordinator) or if there is an agreed arrangement for self-administration.
- For children with conditions that require medication regularly or require emergency medication, an individual Medication/Care Plan (or equivalent) is required which also needs to be consistent.

Stage 1 – Special Educational Provision

Monitor, Evaluate and Review

Some children may require extra intervention and approaches additional to those provided within whole school educational provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the **child and their parents**. [A Personal Learning Plan \(PLP\)](#) will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and parent(s).

When reviewing, consider if:



This process of monitoring, evaluating and reviewing will help identify next steps in learning and provision for the child.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#). Where they have made good progress, they may return to whole school educational provision and their name be removed from the school's SEN register. Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA and/or HSCT.

The Care Plan is provided to the education setting and parents by the AHPs involved in the healthcare of a pupil, and details the care required whilst in the education setting. AHPs are responsible for reviewing/updating a pupil's Care Plan. AHPs are autonomous practitioners which means they assess, diagnose, treat, and discharge which will impact review dates.

Stage 2 – Special Educational Provision

Identify (Please also see [whole school](#) & [stage 1](#))



Some children will not make progress with whole school and stage 1 provision. They will require further specialist support from external services within the Education Authority and/or HSCT.

Intensive stage 2 support indicators are child centred. They are used to assist in considering the level of support which may be required at the time of review.

Indicators take account of the following:

- Available medical advice
- Date of diagnosis/confirmation of recent diagnosis
- Critical/significant adverse incident
- Child's competency levels
- Individual circumstances

Indicators are not considered in isolation but form part of an integrated approach to the allocation of support to the setting. Resourcing is allocated to supplement provision already being made by the school. Support is provided on a needs-led basis.

Where a setting or parent identifies additional learning in addition to medical needs, advice should be sought from the relevant professionals.



Stage 2 – Special Educational Provision

Plan and Action (Please also see [whole school](#) & [stage 1](#))



The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision. At stage 2, there will be close involvement between the [EA SENIS \(Medical Needs\)](#) and the school. The child will remain at stage 2 while the school makes full use of the range of strategies and support drawn from the school's special educational provision map supplemented by EA support/HSCT to achieve progress.

Provision mapping: School will continue to draw on their provision map whilst the primary responsibility for meeting the child's medical needs remains with the setting. Intensive stage 2, including **temporary funding**, may be provided by EA SENIS Medical Needs to a setting, where appropriate, to fund general assistance.

This temporary resource allocation with review, is made to the school, building on reasonable adjustments and provision already in place and facilitating inclusion for named children who, for example, are not yet independent in their medical care.

Risk Assessment/Risk Management Planning It is recommended that the school continue with or put in place a suitable Risk Assessment and sufficient Risk Management Plan, (made site or risk specific by school staff if required.) The information in the plan provided by the healthcare professional will be used by school staff to inform the Risk Management Plan.

Intensive stage 2 support may include providing temporary resourcing to assist schools to implement the healthcare plans for children whose needs are exclusively of a medical nature, without a statement of Special Educational Needs.

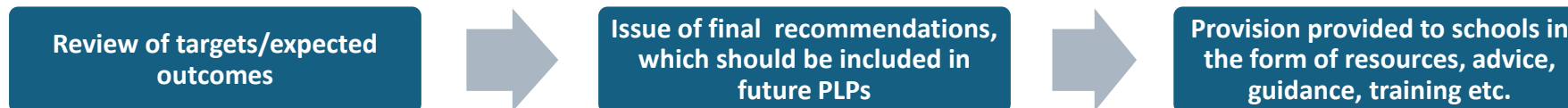
<https://send.eani.org.uk/support-services/medical-needs>

Stage 2 – Special Educational Provision

Monitor, Evaluate and Review

At stage 2 of the Code of Practice there will be **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child, and their parent(s). Together they will make informed decisions on the effectiveness of the targeted interventions/provisions put in place.

To help measure this effectiveness of intervention, EA services may consider:



The **health care plan** may need updated/reviewed by the AHP, with stage 2 provision from the EA being timely and responsive to any changing need. Provision may need to be adjusted to respond to:



If the child demonstrates increased independence in managing their care, for example, as evidenced in the individual healthcare plan, the EA funded allocation is incrementally reduced. Many pupils will make progress with the delivery of stage 2 provision and following a period of support will no longer need external provision from the EA or HSCT and will return to stage 1 of the CoP.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed. Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment is appropriate, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Stage 3 – Special Educational Provision

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Where a request for a statutory assessment is made and the outcome is that the EA issues a **statement of special educational needs**, the child will be identified as being at stage 3 of the Code of Practice.

Indicators of need - when the evidence supplied by Allied Health Professionals/HSCT indicates that:

- The child's difficulties are significant and/or complex and/or multiple
- It may affect the child's ability to take part in particular classroom activities and/or aspects of school life
- Physical/medical needs may impair their progress in educational, social, or emotional development

- The child's needs have not been met by relevant and purposeful measures taken by the school and external specialists
- Additional special educational provision is required which cannot be provided within the resources normally available to mainstream schools



Stage 3 – Special Educational Provision

Plan and Action (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



The PLP is updated to record that the child is now at stage 3. The content of the PLP should:

- reflect the content of the statement
- be based on the objectives of special educational provision
- include any EA/HSCT provision and
- include any additional school provision or modifications to the curriculum, as itemised in part three of the statement.

Strategies and provision may include:

- The **plans** and **actions** that may be on offer from external provision to further supplement school delivered special educational provision, including any recommendations contained within the statement of Special Educational Needs

- The statement of SEN should outline the specific requirements for the child
- Stage 3 will document the continued close involvement between the EA, Medical/Allied Health Professionals, and the school
- Parent/carers to attend meetings with school staff and any specialists involved, providing an opportunity to share information and to develop a consistent and co-productive approach
- Advice, training, guidance sought from [EA SENIS \(Medical Needs\)](#) and/or HSCT on request
- Support to access the curriculum from designated or shared SEN classroom assistant if required.

Risk Assessment/Risk Management Planning

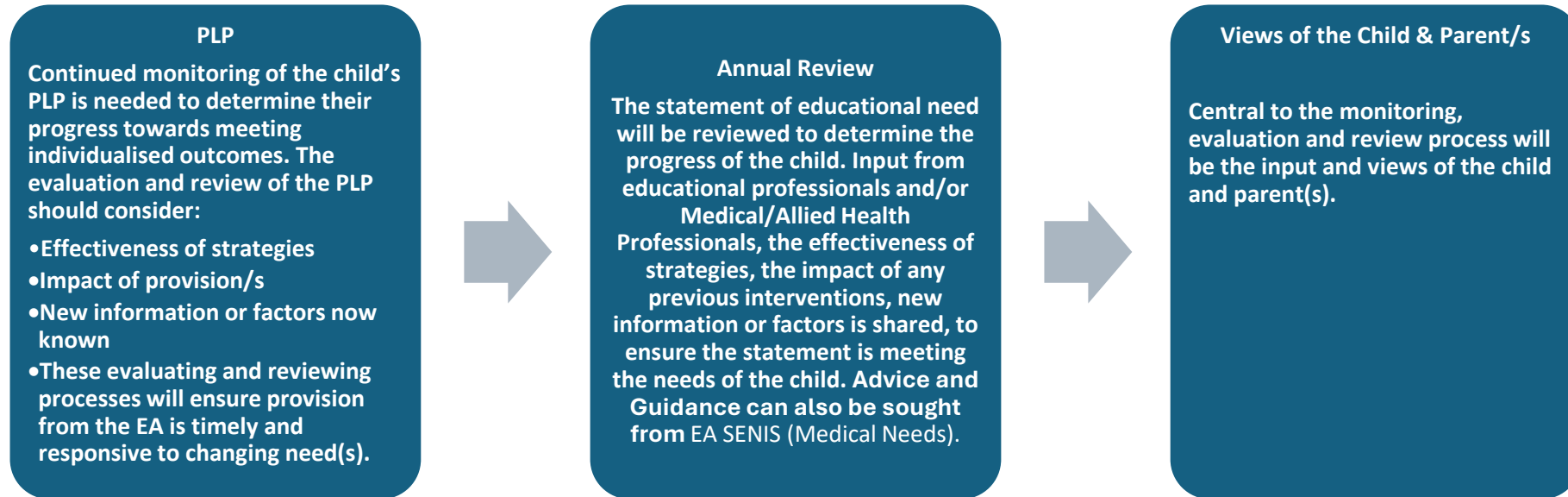
It is recommended that the school continue with, or put in place, a suitable Risk Assessment and sufficient Risk Management Plan, made site or risk specific by school staff.

The information in the plan provided by the healthcare professionals will be used by school staff to inform the Risk Management Plan.

Stage 3 – Special Educational Provision

Monitor, Evaluate and Review

At stage 3 the child will have a statement of Special Educational Needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation, and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.



The health care plan should be reviewed and adjusted if required to respond to:

- the child's changing medical needs
- the child's developing competencies
- critical/significant adverse incidents

Useful links and resources: <https://send.eani.org.uk/support-services/medical-needs/useful-resources-and-links>

Please also refer to the Department of Education: [Checklists and Flowcharts\(Nursery\)](#)

Autism

Social, Behavioural, Emotional and Wellbeing and/or Speech Language and Communication Needs associated with Autism

The Graduated Response - Early Years



Autism – Early Years

“Autism is a lifelong, developmental disability which affects how people communicate and interact with the world” (National Autistic Society, 2024, p1) The ‘dyad of impairments’ is the term used to describe the two areas of difference that occur together in children with autism. The ‘dyad’ forms the diagnostic criteria for autism and is comprised of differences in social interaction and communication, and repetitive and restricted behaviours, including sensory sensitivities. These needs may impact on an autistic child’s social skills, in making and maintaining relationships with those around them, and in understanding and appropriately expressing emotions in different situations. Sometimes the child may have social skills that appear to be socially immature to peers of a similar age. Some children may externalise their emotions, while others may internalise their emotions and this may be displayed through behaviour. For example, displaying behaviours of concern, appearing withdrawn, self-injurious behaviours etc. We must all remember that any behaviours expressed are a form of communication. If these behaviours continue to be observed, over a period of time, it may indicate a need which requires support. Parents and Early Years Practitioners should have the opportunity to work together to identify a child’s changing needs e.g. social interaction, attendance, behaviour, etc and in return implement a **graduated response** to support them. Meeting these needs are the responsibility of all staff in educational settings.

You may hear Autism referred to as Autism Spectrum Disorder, the medical or diagnostic term for Autism. Everyone has unique personalities, skills and abilities and it is recognised therefore that individuals and families will have personal preferences as to the terminology and language used around autism. In this document the terms used will include autism spectrum disorder, autism, autistic and children with autism.

Note: SENCo/LSC and teachers should be precise when determining if a pupil with a medical diagnosis of ASD also has an associated SEN and only those who require special educational provision should be recorded on the SEN register. If a child’s social, behavioural, emotional and wellbeing and/or speech, language and communication needs are related to a medical diagnosis such as autism, and the difficulties are significantly impacting them accessing the curriculum, the pupil should be recorded as having SEN in this category in addition to recording any appropriate diagnosis on the Medical Register.

[See links to Child and Adolescent Autism Services below:](#)

<u>Belfast Trust</u>	<u>Southern Trust</u>	<u>Northern Trust</u>	<u>Western Trust</u>	<u>South-Eastern Trust</u>
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In this section, the term “schools” refers to all mainstream schools and educational settings, including playgroups and nurseries and the term “parents” refers to all parents/carers and guardians.

Sensory Processing

Sensory processing is how we use the information provided by all the senses within our body and from our environments. Our senses help us to respond to sensations e.g. we will take off the itchy woollen jumper or we may take a deep breath to smell the flowers.

Children with sensory processing differences however may have to work harder to understand what is happening inside and outside their bodies. They may require support to make predictions about sensory input.

"I'm sensitive to sounds. Loud sounds. Sudden sounds. Worse yet, loud, and sudden sounds I don't expect. Worst of all, loud and sudden sounds I do expect but cannot control - a common problem in people with autism. Balloons terrified me as a child because I didn't know when they were going to pop. I've heard a lot of people with autism say that if they can initiate the sound, they're more likely to be able to tolerate it. The same is true if they know the sound is coming."

Temple Grandin (2014)



Sensory differences can affect physical milestones such as toileting and eating development. These can cause high anxiety in the child and those who care for them.

Autistic children may find it difficult to communicate how they feel and may struggle to process the ever-changing sensory stimuli in an unpredictable world.

Sensory Processing.....

Examples of Sensory Differences

Unusual over or under responsiveness to sensory stimuli e.g. touch or noise which may affect access to everyday events or activities e.g. circle time.

May show signs of delayed hand/eye co-ordination and/or fine/gross motor skills or display unexpected body movements such as toe walking, tics, or unusual stimming behaviours such as flapping, finger flicking, spinning or rocking.

May eat inedible objects 'pica'.

May display unexpected responses to the sensory environment, particularly at times of heightened stress.

All staff should have a knowledge and understanding of a child's communication and interaction needs. All Early Years Practitioners need to make adjustments that enable children not only to cope and function in unpredictable environments, but also to allow the children in our settings to have fun and reach their full potential. Many reasonable adjustments are inexpensive. It is changes in practice and awareness of differing preferences and learning styles, rather than the provision of expensive pieces which can make a big difference.



Sensory Processing

Environmental Adaptations

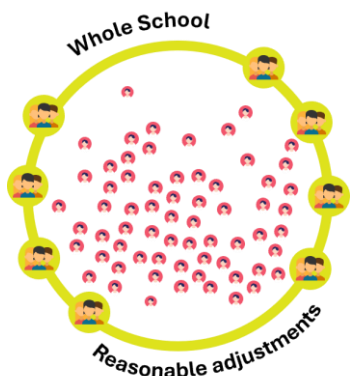
For some children, it may be the sense of uncertainty and unpredictability that initiates sensory overload. A way to reduce uncertainty could be to try and **adapt** the school environment by:

- Thinking about transitions during the day to avoid sensory overload e.g. allowing the child to leave the setting first/last to avoid busy corridors or cloakrooms or allowing them to be first/last in line depending on their sensory preferences and needs
- Introducing a quiet, or distraction free area within the setting for individual work
- Modifying lighting, ensure that flickering bulbs are replaced and consider dimming lights for transitions
- Ensuring children have a clear view of the practitioner to pick up non-verbal cues e.g. during circle time
- Using individual carpet spots to increase predictability, provide structure and communicate where the child needs to be at a certain time or for a certain activity
- Introducing individual work/activity area(s) which are modified for the child e.g. quiet/minimal distractions, visual aids, work basket system
- Providing frequent, planned movement breaks and access to a sensory area or tools to help the child regulate their emotions
- Making appropriate adaptations for children at lunch if applicable e.g. honouring food preferences
- Ensuring spaces are uncluttered with minimal décor and wall displays
- Adaptations to school uniform, short breaks from situations that cause stress e.g. story and rhyme time

Children's Therapy Services (OT) can signpost to resources and materials and training.



Identify – Social, Behavioural, Emotional & Wellbeing Needs (SBEW) & Autism



When supporting children with Social, Behavioural, Emotional and Wellbeing (SBEW) and/or Speech, Language and Communication Needs (SLCN) arising from their diagnosis of autism, there are common identifiers, plans and actions associated across both needs and others that will only be seen if one of the needs is present.

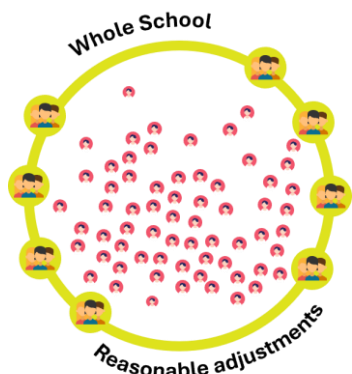
These will be present in the majority of early years children in the first month – six weeks in a new setting, particularly if they have just come from home.

When children in the early years move into their first educational setting, it is important that a 'settling in' period is facilitated to allow the children to become familiar with the rules and routines in the setting. They will need time to develop their self-esteem, build relationships with key, trusted adults and to understand the structure of their day and the choice on offer.

After this time, an autistic child with SBEW may continue to present with the following behaviours:

- Butterfly/flit between activities
- Sensory issues around play
- Seek opportunities for movement and deep pressure
- Engage in behaviours that have an impact on their ability to access the curriculum
- Engage in stimming behaviours
- Sometimes have difficulties communicating their feelings or asking for help
- Sometimes present as passive, withdrawn or isolated
- Sometimes have poor concentration and can appear distracted
- Have some issues with organisation
- Have some challenges with sharing and turn taking
- Present as emotional e.g. tearful or angry
- Restrictive and repetitive patterns of behaviour

Identify – Speech, Language and Communication Needs (SLCN) & Autism

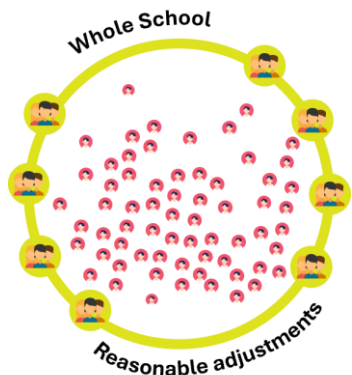


An autistic child with speech language and communication needs (SLCN) may present with:

- Challenges following and understanding routine
- Literal interpretation of language
- A lower-than-expected use of either expressive language (verbally or non-verbally) or receptive language (understanding). This may include challenges reading body language and facial expression or difficulty following simple instructions, reducing the potential for effective two-way communication
- A good level of vocabulary, however this can lead others to overestimate the child's true level of understanding

- Challenges processing verbal language and instructions, needing adults to simplify their language
- Limited vocabulary impacting on understanding
- An interest in peers but has difficulty making friends or joining in
- Challenges with the social use of language i.e. social greetings
- A strong interest in the same object or activity
- A limited range of interests or talk about the same subject
- A need for sameness and have strong preferences for the same routines, needing support when established routines change
- Challenges around the use and understanding of non-verbal communication such as eye-contact, body language, gestures, hand leading, pointing
- Challenges using language to connect, through sharing thoughts, feelings, and experiences

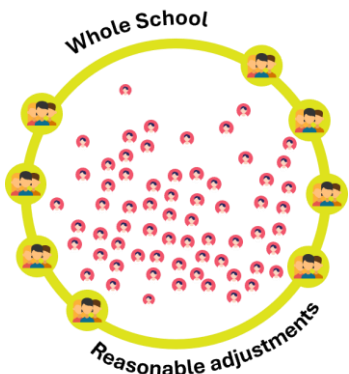
Identify – Speech, Language and Communication Needs (SLCN) & Autism



- Needing additional/alternative prompts and cues to carry out everyday activities and learning tasks, including, objects of references, True Object Based Icons (TOBIs), photographs etc.
 - May find it challenging being part of a group without additional support or structure
 - May find it challenging to making meaningful choices
 - Requires support to participate in activities or situations which may include sitting, engaging, and playing alongside others
- May have limited functional and social communication skills
 - Challenges in using language flexibility in communication
 - May need support to respond as expected e.g. responding to their name
 - May find it challenging to ask for help
 - May find it challenging at times to allow other children to join in an activity
 - Challenges providing tangible responses to questions



Plan & Action



Settings should provide regular reviews of each child's progress in communication with the parent(s). This should follow the settings' assessment cycle for reviewing the child's attainment and progress.

Communication with parent(s) should be open and easy, building trust and confidence, so that parent(s) will be able to share important information about the child's life at home, such as significant events.

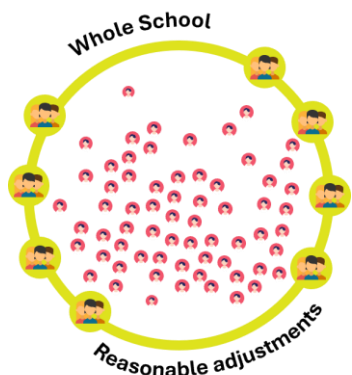
Setting staff are encouraged to avail of the AAIS online early years training programme: professional learning opportunities, advice and guidance which is freely available through the EA Local IMPACT Teams.

Provision of a clear, physically structured, communicative environment which promotes predictability and thus reduces anxiety. This will include:

1. Visually communicating what is expected in the environment
2. Reducing distractions
3. Routines which are represented visually using photographs or symbols
4. Providing concrete hands-on materials and experiences
5. Using the outdoor environment effectively as an extension of the classroom and used throughout the day.



Plan & Action

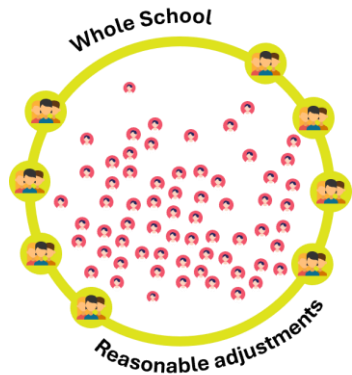


Plans and Actions should be a shared approach with all Early Years practitioners and should incorporate the following:

- Completion and implementation of strategies from [AAIS Online training programme](#)
- Continued monitoring of provision in place for the child by early years practitioners
- Access to a visual timer and aids to support transition such as a visual countdown strips, sand timers, 5 finger countdown, and audible indicators for change such as special music, songs or tambourines
- Developing a whole setting approach to teaching children about emotional regulation
- [Calm Plan](#)
- [RISE Training](#)

- Use of visual supports within the setting (including timetables) located in an area clearly visible to the child
- Establishing daily routines, ensuring that the learning environment is visually presented and provides a physical and visual structure, with clearly defined areas/spaces
- Preparing the child for change in advance, either visually, written or verbally. The use of visual supports will help to develop independence and visually teach about change, e.g. visual timetables, task breakdowns
- Integrating a child's interests into the day and including as an integral part of their activities can help to motivate and engage a child in a learning task. Interests may also be used as a tool for calming, relaxation and as motivators
- Regular positive contact with parents/carers via an established method, e.g. home/school communication book, daily conversations with staff, Seesaw, Class Dojo.

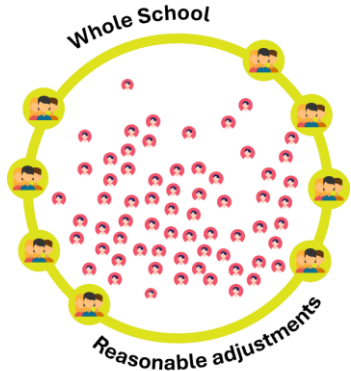
Plan & Action



- A specific whole school approach to teaching emotional understanding and regulation e.g. social communication groups, Theraplay, learning through play, small group work, focused programmes
- All staff recognise indicators of social communication, interaction and behaviour difficulties associated with autism and can make social and environmental adjustments to support the child, such as selecting appropriate methods and materials to promote engagement and learning
- Whole school ethos and teaching approach that is consistent e.g. celebrating and acceptance of a diverse range of needs, equality and respect. A policy that focuses on increasing the expertise of practitioners in supporting the needs of an autistic child
- Staff in your setting understand that autistic children can present with an uneven or spiky profile of strengths and challenges
- Setting gathers information about strengths and challenges from parents/carers and professionals already working with the family
- Staff understand the sensory environment and the strategies and structure required.



Plan & Action



- Reinforce key routine activities such as toileting and washing hands and snack, using visual cues and objects of reference
- Provide specific expectations using positive language, e.g. what to do rather than what not to do
- Follow child's lead, allow for low demand interactions by copying their intonations, words and behaviours
- Use of song and rhymes to support transitions and participation in routine activities
- Use of visual supports to express feelings, for example an emotional thermometer or feel-o-meter

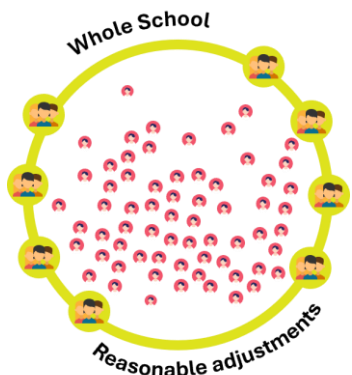
- Teach the child how to ask for help using visuals and other non-verbal methods of communication
- Provide opportunities for adult support during social times, e.g. adults as play partners developing buddy systems and teaching pro-social behaviours, such as turn taking, sharing, and waiting

Other helpful resources and information:

- [Middletown Centre for Autism](#)
- [Autism NI](#)
- [Education Authority](#)
- [National Autistic Society](#)
- [RISE NI](#)



Plan & Action



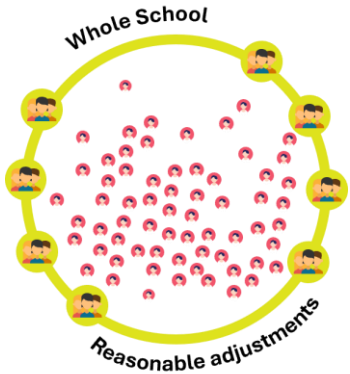
Additional plans and actions to support an autistic child with social, behavioural, emotional and wellbeing (SBEW) needs may include:

- Provide opportunities to share their ideas and opinions with staff and/or peers
- Offer alternative ways to communicate e.g. non-verbal cues, photos, pictures and symbols
- Use of fidgets or sensory toys
- Use of play to enable the child to communicate their feelings
- Providing group-based programmes to develop social connection and social skills. Strategies-such as using social stories, joint attention activities
- Regular, timetabled access to a sensory/calm space to allow opportunities for the child to regulate throughout the day.

Additional plans and actions to support an autistic child with speech, language and communication needs (SLCN) may include:

- Consistent use of language amongst **all** staff
- Use of simple, concise and appropriate language used in conjunction with visual cues, as appropriate, that reflects the child's level of understanding
- Calling the name of child before giving instructions and checking for understanding
- Use of observation methods to identify how a child communicates and engages
- Repeating, modelling and extending language the child uses in a setting
- Keeping instructions simple and allow processing time before repeating instructions, remember the 10 second rule
- Use of visual cues to support understanding of core language, for example 'all done', 'wait' or 'help'
- Creating a communication-friendly environment that includes establishing a range of systems to support the needs of each individual autistic child. These may include objects, pictures, or signing
- Being able to access a safe place in the school environment, especially when the child is dysregulated. It is important to ensure that a safe space is always available
- Using de-escalation strategies.

Monitor, Evaluate & Review



Practitioners monitoring including observations, assessments, and professional judgement along with the views of the child and their parents will all be taken into consideration in helping to evaluate the impact of whole school educational provision.

Setting staff should provide regular, time-framed reviews in order that the child, parents and medical/allied health professionals (if required) can discuss learning and agree appropriate provision. This may form part of the settings ongoing monitoring, evaluating, and reviewing processes.

Seeking the perspectives of all involved, answering these key questions will help determine future planning:

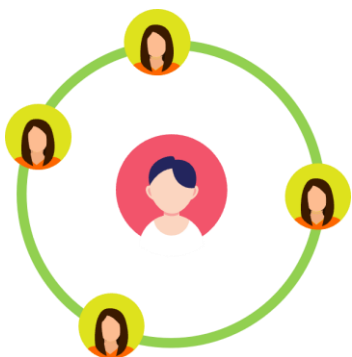
- What's working well?
- What's not going well?
- What's helping?
- What else could we try?

Please also refer to the Department of Education: [Flowcharts and Checklists \(Nursery\)](#)



Stage 1 - Special Educational Provision - Autism – Early Years

Identify (Please also see [whole school](#))



The child is identified as needing provision, which is **additional to, or otherwise different from**, their peers. They are placed on the school's SEN register at stage 1, in consultation with parent(s). A Personal Learning Plan (PLP) will be implemented for the child. The school will use their **provision map** to identify stage 1 strategies/provisions that are available to help the child.

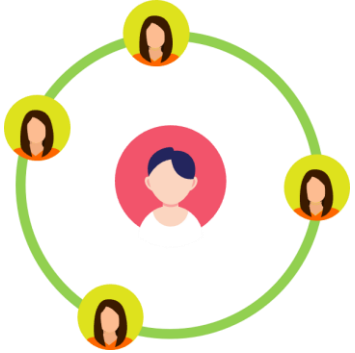
Despite whole school provision and reasonable adjustments being made, an autistic child who presents with social behavioural, emotional and wellbeing (SBEW) needs and/or speech, language and communication needs (SLCN) may also have:

- Difficulty with communicating their feelings
- A presentation that is passive, withdrawn, or isolated
- Difficulty building a relationship with a key adult

- Difficulty starting tasks/sustained and purposeful play and interaction
- Reduced concentration and can appear distracted
- Challenges with organisational skills
- A spiky profile between developmental and chronological age
- Low confidence, holding back, reluctance to try new activities or find it difficult to participate
- Tendencies to play alone or be withdrawn/uncommunicative
- Challenges engaging within a small group of peers and/or adults without additional support or structure
- Presenting as having a lack of interest and awareness of peers
- Challenges engaging in purposeful and functional play
- May find it challenging to sit and attend to adult led tasks
- May find it more challenging than peers to understand social expectations related to play and interactions such as sharing, turn taking and waiting
- Reduced participation in whole class activities, discussions, and conversations.

Stage 1 - Special Educational Provision – Autism – Early Years

Identify (Please also see [whole school](#))



Further indicators for an autistic child who presents with social, behavioural, emotional and wellbeing (SBEW) needs may also include:

- Engaging in behaviours that have an impact on their ability to access the curriculum
- Behaviours of concern resulting in harm to themselves and others
- Limited awareness of others
- Presenting with selective mutism.

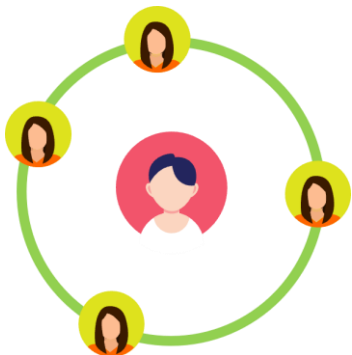
Further indicators for an autistic child who presents with speech, language and communication needs (SLCN) may also include:

- Being literal in their interpretation of situations and language
- Reluctance being part of a group without additional support
- Avoidance when presented with tasks or situations that include working or playing alongside others
- Being self-directed and find it challenging to follow-adult direction
- Difficulties processing age-appropriate language
- Requires support to carry out activities without additional prompts such as verbal or pictorial prompts.



Stage 1 - Special Educational Provision – Autism – Early Years

Plan & Action (Please also see [whole school](#))



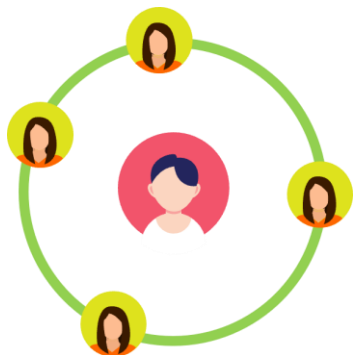
A PLP is prepared to reflect the SEN category (or categories), outcomes are written to include provision and strategies to support the child at stage 1 of the CoP.

In addition to the strategies implemented at whole school level, strategies and provisions implemented at Stage 1 may include:

- The Early Years practitioners liaising and planning with school SENCo/LSC to agree specific outcomes as outlined on the PLP linked to the child's need/s, supported by stage one provision as outlined in the school's provision map
- Completion of [AAIS Online training programme](#) and any further staff training needs identified, completed, and strategies implemented
- Increased levels of differentiation and use of reasonable adjustments to ensure access to the curriculum and increased independent learning opportunities
- Identifying and capitalising on the child's strengths and interests

- Accessing a range of support strategies to help a child access their environment and activities. These may include: an individual visual timetable, choice boards, first/then system, and other visual prompts
- Increased support for unstructured times in the school day
- Participation of setting staff, child and their parent/carer in the monitoring, evaluating, and reviewing of the child's needs
- Being able to access a pre-identified safe place in the school environment, for emotional regulation. It is important to ensure that a safe space is always available
- Where available, a sensory room or space should be used proactively to support children to remain regulated throughout the day: [AAIS sensory room training](#)
- Creating a safe place where an autistic child can feel calm e.g. a play tent in the room; a screened off, quiet area in the classroom; a quiet room; being in the company of a trusted member of staff, if appropriate
- Flexible approaches to whole school curriculum planning e.g. small group activity sessions, planned and timed appropriately at the level of development of the child; targeted support to meet the sensory needs presented
- A transition plan being developed specific to the child and their individual needs.

Plan & Action (Please also see [whole school](#))

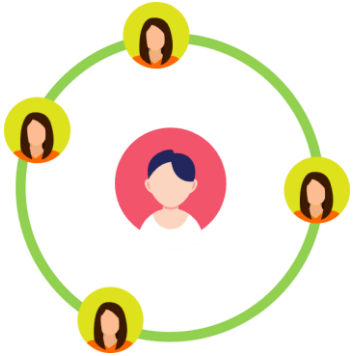


- Breaking down tasks/activities/instructions into manageable sections and ensuring all tasks have a clear start and finish using visual prompts
- Provide support and strategies that reflect the specific profile of an autistic child with emphasis upon the promotion of social communication, life skills, and emotional well-being of the child e.g. promoting self-esteem, pouring own drink or help with putting own coat on
- Provide a distraction free area with limited visual stimuli within the setting: [Middletown sensory resources](#)
- Ensuring transitions are carefully planned for and supported: [TRANSITION TRAINING](#)
- Explicitly teaching social skills and developing awareness of routines at a pace and level reflective of the child's understanding.

Additional Plans and actions to support an autistic child who presents with social, emotional, behavioural and wellbeing needs at stage 1 may include:

- Clear teaching and reinforcement around established routines including modelling and visuals to support
- Individual and/or small group support delivered by setting staff e.g. teaching emotional regulation or social skills
- Access to a key adult to check in with the child on a regular basis to enable co-regulation and provide support if required. The quantity of check-ins needs to be determined by the needs of the child e.g. at certain times of the day such as meet and greet, self-care tasks or during tabletop games
- Use of motivators/special interest boxes
- Individual programmes to develop social connection and attention and listening
- Supportive strategies such as using Intensive Interaction, social stories, joint attention activities, adult modelling of pro social behaviour, encourage play buddies and shared enjoyment
- Continued encouragement of the child to link physical feelings to emotions, developing an awareness of their own emotions and those of others.

Plan & Action (Please also see [whole school](#))



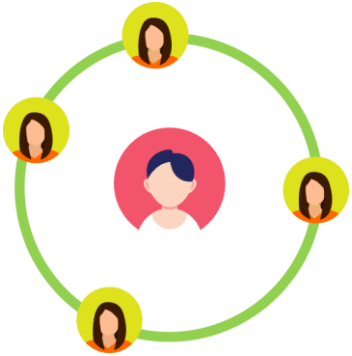
Additional plans and actions to support an autistic child who presents with speech, language, and communication (SLCN) needs at stage 1 may include:

- Using strategies to support children to express their preferences and to communicate their views
- Opportunities to develop social connections, independence and play skills
- Access to objects of reference, pictures, symbols to enhance their understanding
- Use of augmented and alternative communication systems such as Recordable Big Points or Proloquo2go on an iPad. Some children may require a visual communication system such as Picture Exchange Communication System (PECS), PIXON Communication boards or Makaton. Where necessary consult with HSCT services

- Opportunities for overlearning. Pre-teach key concepts and vocabulary before introducing to the whole class and re-teach key skills and vocabulary
- Prepare in advance for changes in displays in the room and for the introduction of new play equipment
- Opportunities for adult/child engagement through Intensive Interaction
- Use mirror play and modelling to develop play skills, extend interest in others and promote social engagement
- Additional support during group work in lessons via differentiation of resources and outcomes
- Attention Autism can be used to support the development of attention and listening skills whilst engaged in an adult led activity
- Providing a distraction free work/activity 1:1 teaching area with limited visual stimuli either in class or outside of the classroom space.



Monitor, Evaluate & Review



Some children may require extra intervention and approaches additional to those provided within whole school educational provision which can be delivered through the school's special educational provision at **stage 1** of the Code of Practice. The Code of Practice sets out the need for this provision to be **regularly monitored, evaluated, and reviewed** by the school in consultation with the child (if appropriate) and their parent(s).

A **Personal Learning Plan (PLP)** will be used by the school which will outline the provision the school is using with the child which is additional to the provision being provided at whole school level. It will detail planned expected outcomes, and these should be tracked and reviewed regularly, **at least 2 times per year** by school staff in consultation with the child and their parent(s).

When reviewing, consider if:

- The child has achieved the expected outcomes set for them?
- Was the provision effective?
- Were the implemented strategies relevant and appropriate?
- Has the child made progress?

This process of monitoring, evaluating and reviewing will help identify next steps in learning and provision for the child.

Where they have made good progress, they may return to whole school provision and their name be removed from the SEN register. Where the child has made little or no progress despite the full application of the range of strategies and approaches in the school's special educational provision map, consideration may be given to making a request for external provision, **a more intensive provision** providing specialist support from the EA Local IMPACT Teams and/or HSCT.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Identify (Please also see [whole school](#) & [stage 1](#))



Some children will not make progress with whole school and stage 1 provision. They will require further specialist support from external services from the EA and/or HSCT.

If a child has been identified at school level, a referral has been accepted by the EA's Local IMPACT Teams as meeting their criteria for external support, and the specialist support is provided to the child, they then will be identified as being at stage 2 of the CoP.



In addition to the whole school approach and stage 1, an autistic child who has SBEW and SLCN needs may present with:

- Separation difficulties which persist over a prolonged period
- Significant sensory seeking/avoiding behaviours that impact the child's ability to engage within the early years' environment
- Needing significant adult support to sustain concentration and build relationships with adults and/or peers
- Continued difficulties in establishing attachment with significant adults
- Continued difficulties coping with planned and forewarned changes to routine or unfamiliar transitions
- Increased isolation within the educational setting due to lack of social engagement
- Intense, increasing repetitive behaviours or special interests leading to fixation throughout the day
- Engagement in self-directed actions, which may lead to significant challenges following adult direction
- Presenting as dysregulated for prolonged periods requiring frequent co-regulation with a key adult.

Identify (Please also see [whole school](#) & [stage 1](#))



In addition, an autistic child presenting with social behavioural, emotional and wellbeing (SBEW) needs may also present with:

- The need for ongoing, targeted adult support to enable emotional regulation
- Significant difficulty in engaging with routine or activity by withdrawal or by exhibiting behaviours of concern despite the use of over teaching and visual supports
- Significant difficulty recognising rules
- Significant difficulties around attendance due to anxiety, distress or unhappiness
- Significant ongoing emotional and/or behavioural difficulties

In addition, an autistic child presenting with speech, language and communication needs may also present with:

- Behaviours in accordance with a significantly lower developmental stage than their chronological age
- Misinterpretation of situations which impact on social responses and interactions with adults and/or peers
- Significant challenges with expressive and receptive language
- Significant challenges when carrying out activities without significant additional prompts



Plan & Action (Please also see [whole school](#) & [stage 1](#))



The PLP is updated to reflect that the child is now at stage 2 and should document the external provision being put in place to supplement school delivered special educational provision. At stage 2, there will be close involvement between the EA Local IMPACT teams and the school. The child will remain at stage 2 while the school makes full use of the range of strategies and supports within the school's special educational provision map supplemented by EA support to achieve progress.

In addition to the strategies implemented at whole school level and stage 1, strategies and provisions implemented at stage 2 for the child with SBEW and/or SLCN needs may include:

- Collaboration with the EA Local IMPACT Teams to develop PLP outcomes and employ strategies to support the child at stage 2 of the CoP
- Participation of setting staff, child and their parent in the monitoring, evaluating, and reviewing of the child's needs using the PLP
- Completion and implementation of strategies from AAIS Early Years trainings
- Specific training and advice for staff and parents as advised by specialists e.g. HSCT Speech and Language Therapist, Occupational Therapist, and EA staff etc.
- Multidisciplinary/MAST meetings
- Solution focused hubs
- Targeted training support for the setting from the EA Local IMPACT Teams to help them meet the unmet need/s of the child.

Plan & Action (Please also see [whole school](#) & [stage 1](#))



Targeted support for the child from the EA Local IMPACT Teams to help them make progress. This support may come in the form of:

- Advice and guidance to early years practitioners and/or parents to help build capacity
 - Advice and guidance from multiple specialists where several needs/co-occurring difficulties are identified
 - Intervention support
 - Modelling of support strategies to be used in educational settings
- Flexible planning and continued adjustments to the pre-school curriculum to help support engagement. This may include alternative work/activity spaces e.g. 1:1 teaching spaces and individual workstation
 - Offering tasks which are visually clear and organised. These tasks should communicate a clear beginning, middle and end e.g. use of principle of TEACCH/shoebox tasks.



Monitor, Evaluate & Review



At stage 2 of the Code of Practice there will **close involvement** between **school** and the **external service** (EA/HSCT) supporting the child's unmet need. The monitoring, evaluating, and reviewing of the PLP by the school will take place in consultation with the external service, and include the child, and their parents. Together they will make informed decisions on the effectiveness of the targeted intervention/provision put in place. It is important that the advice and guidance provided by the specialist teams within the EA Local IMPACT Teams or HSCT is evident in the outcomes and approaches applied in PLP planning for the child.

The level, type or intensity of the stage 2 provision may need to be changed throughout this process if new need/s or more prevalent needs become apparent. Close collaboration between the school and the EA Local IMPACT Teams and/or HSCT will help determine if the provision is being effective or needs changed.

Many pupils will make progress with the delivery of stage 2 provision and following a period of support will no longer need external provision from the EA Local IMPACT Teams or HSCT and will return to stage 1 of the CoP.

Where the stage 2 provision has made little or no impact and the needs of the child continue to be significant and/or complex and impact on their learning/ability to access the curriculum effectively, a more intensive approach will be needed. Consideration may be given to making a request for a statutory assessment at stage 2. While the EA is considering whether to carry out a statutory assessment appropriate, the school should continue to implement, monitor, and review the child's PLP.

Please also refer to the Department of Education: [Flowcharts and Checklists\(Nursery\)](#)

Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



Even though consistent approaches have been applied at whole school, stage 1 and 2, the child continues to experience significant difficulties in accessing the curriculum within the pre-school environment. Staff may notice a sustained increase in the difficulties that a child is experiencing in the environment which result in stage 2 outcomes not being met. As a result of this, the school or parent has applied for a statutory assessment of the child's needs. Where a request for a statutory assessment is made and the outcome is that the EA makes a **statement of special educational needs**, the child will be identified as being at stage 3 of the CoP.

Further Indicators of need may include:

- Significant and persistent difficulties evidenced in detailed school monitoring and reviewing over time, despite access to appropriate support opportunities, targeted interventions, and a graduated response in supporting the child
- Accessing the curriculum without significant adult help to support them in the classroom. They may:
 - have ongoing difficulty engaging in learning
 - Continue to have difficulty in understanding and following adult direction or instruction
- Continued difficulties around developmentally appropriate relationships with adults and other children
- Significant difficulties learning or playing alongside peers
- Showing little or no awareness of contextually expected behaviours.



Identify (Please also see [whole school](#), [stage 1](#) & [stage 2](#))



- Emotionally Based School Non-Attendance
- Sensory needs that may have a significant impact on everyday life e.g. avoidance, distress, or inability to focus
- Being highly self-directed and struggling to engage in any activities that are not of their choosing at that time Change, even expected change, causing significant distress and high anxiety
- Repetitive motor mannerisms. These repetitive behaviours may limit access to the curriculum or daily activities
- Rigid need for routine and predictability.

In addition, an autistic child who presents with speech, language and communication needs(SLCN) may also present with:

- Deviation from the standard use of language, such as echolalia, learnt jargon, repetition in phrases and sounds. Use of single words
- Gestalt Learning (Language learned in larger units of words first, rather than single words)
- Concerns around recognising non-verbal signals of communication
- The need for adult prompts to elicit a response
- A preverbal communication profile- may benefit from signing and augmentative and alternative communication systems
- Significant difficulties in gaining and sustaining joint attention
- Significant speech and language processing delay, requiring adult guidance and visual support to communicate needs
- Limited spontaneous communication when in the company of peers or adults
- Trouble with functional communication skills
- High dependence on visual, gestural, or adult prompt to engage or follow directions
- Monotropic thinking style (tendency for their interests to pull them in).

Plan & Action (Please also see [whole school](#), [stage 1](#) & [Stage 2](#))



The PLP is updated to record that the child is now at stage 3 and the content of the statement is reflected in the setting of expected outcomes based on the objectives of special educational provision.

Plans and actions should be a shared approach with all school staff and may incorporate the following in addition to whole school, stage 1 and stage 2 plans and actions:

- Additional support to the school from SARS (Statutory Assessment and Review Service) to help with inclusion for the child so they may access the curriculum. The type of support will be specified by SARS. Examples of this support may include designated or shared SEN/general classroom assistant if required

Continued monitoring by Early Years practitioners and SENCo:

- Ongoing cycle of monitoring, evaluating, and reviewing of the personalised learning plan (PLP) including participation of the child and their parents

Advice, training, guidance sought from the EA Local IMPACT Teams on request:

- Modelling from specialists to support staff development e.g. running a schedule (Links to EY training)
- Pupil specific whole school training and advice for staff and parents as advised by specialists e.g. HSCT staff, EA staff etc
- Activities and support that promotes independent learning skills
- School staff to deliver teaching around incidents that may have occurred
- Regular observations conducted by staff to look at behaviour, patterns and triggers within the school environment i.e. the use of ABC Charts

Monitor, Evaluate & Review



At stage 3 the child will have a statement of special educational needs. The PLP will continue to be implemented and is subject to regular monitoring, evaluation and review. The PLP will form the key basis of the educational information to inform the annual review of the statement. The school retains responsibility for the day-to-day learning of the child, sharing responsibility with the EA and, where appropriate, the HSC Trust.

The child will continue at stage 3 and receive support until such time as the EA determines that it is appropriate to cease to maintain the statement.

PLP

Continued monitoring of the child's PLP is needed to determine their progress towards meeting individualised outcomes. The evaluation and review of the PLP should consider:

- Effectiveness of strategies
- Impact of provision
- New information or factors now known
- These evaluating and reviewing processes will ensure provision from the EA is timely and responsive to changing need.



Annual Review

- The statement of educational need will be reviewed to determine the progress of the child. With input from educational professionals and/or medical/allied health professionals, the effectiveness of strategies, the impact of any previous intervention, new information or factors is shared, to ensure the statement is meeting the needs of the child.



Views of the Child & Parents

Central to the monitoring, evaluating and reviewing process is the input and views of the child and parent(s).

Seeking the Views of the Child

The Graduated Response



This section aims to assist schools in developing good practice in listening to the views of children and young people with SEND and supporting them to participate in making decisions which can enable them to manage their own educational experience. It introduces the ideas of children and young people's views and participation and contains links and references to more comprehensive guidance and resources that have been developed in recent years to support schools.

Seeking the views of the child should be regarded as an integral component of teaching and learning reaching across all aspects of a child's educational life and forms a critical part of teaching professional competency. [1](#)

Background Legislation and Guidance:

The importance of seeking the views of children and young people with SEND, and supporting their participation in decision-making, is underpinned by both international and domestic legislation and guidance. Two of the most relevant are:



Special Educational
Needs and Disability Act
(Northern Ireland) 2016

[Special Educational
Needs and Disability Act
\(Northern Ireland\) 2016
\(legislation.gov.uk\)](#)



CONVENTION
ON THE RIGHTS OF THE CHILD

[The UN Convention
on the Rights of the
Child \(UNCRC\)](#)

The SEND Act (2016) states that:

- a) "so far as reasonably practicable, **seek and have regard to the views of that child**;
- b) have regard to;
 - i) the importance of the child **participating in decisions**; and
 - ii) the importance of that child being provided with the **information and support** necessary to enable participation in those decisions."

Article 12.1 states that, "Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child."

Draft Code of Practice (CoP)

The Draft SEN Code of Practice outlines the importance of seeking the views of the child/young person and supporting participation.

"seek and have regard to the views of individual children ... to enable a particular child's participation in decisions that affect them."

(Statutory Assessment, draft CoP)

"where possible, pupils should be encouraged to provide their own account of their views, for example about their progress and any difficulties they have encountered."

(Annual Review of a Statement, draft CoP)

"...schools should seek and listen to [children's] views about how they learn effectively..."

(Identification, Assessment and Provision by Schools, draft CoP)

"Inclusive schools have...clear strategies to seek and listen to the views of children to help inform how best to meet their needs."

(Inclusion of Children with SEND, draft CoP)

"Schools should take all reasonable efforts to ascertain the child's views about their strengths, learning difficulties and education..."

(Identification, Assessment and Provision by Schools, draft CoP)

"...encourage and help the child over compulsory school age to participate as fully as possible in the determination of what would be in the child's best interests."

(Children over Compulsory School Age, draft CoP)

Views of Children and Young People

This can be defined as the right for children/young people to:

- express opinions;
- participate in making decisions regarding their education; and
- receive support from those who can influence decisions.

Children and Young People may

- feel more valued and respected
- develop a sense of responsibility and ownership for their learning
- strengthen their relationships with school staff
- feel empowered and supported

Teachers can

- gain insight into what children and young people with SEND think and feel
- tailor their lessons to suit the child's needs
- adapt teaching strategies based on their preferences
- use children and young people's views to help identify concerns at an earlier stage

Schools will

- create a more positive and inclusive school ethos
- experience better engagement between children and young people and staff
- use feedback to develop an experience that aligns with their interests
- create a culture of openness and respect

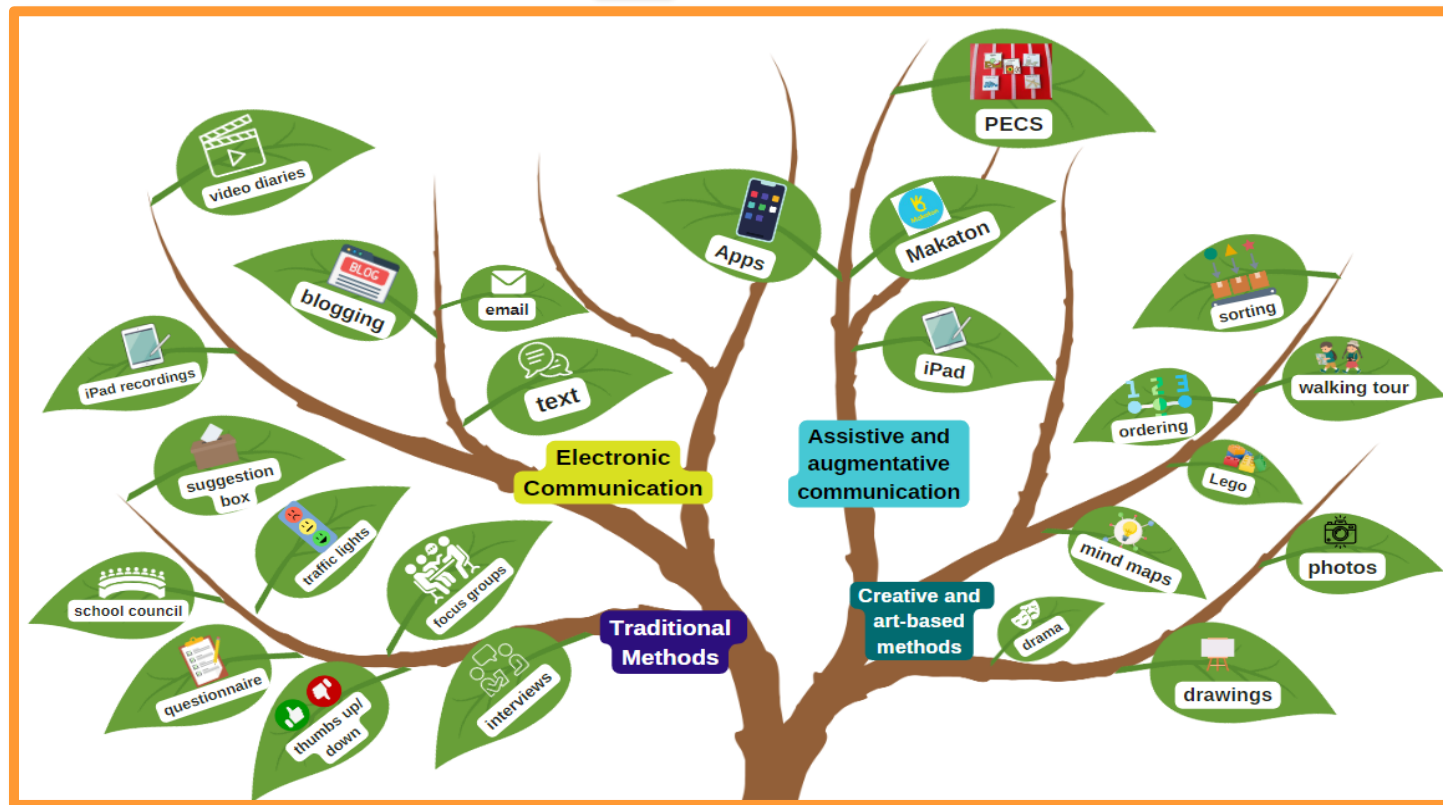


Methods for Seeking views

Many children and young people, particularly those with SEND, can find it difficult to articulate their views and participate in making decisions.

Teachers and other education support staff should demonstrate creativity, flexibility, and adaptability, using a range of traditional and technologically assisted methods, when seeking views of children and young people. This is especially important when views may not be able to be elicited verbally.

Section 4 in the **Personal Learning Plan** guidance documents (for Nursery, Primary and Post-primary) contains a range of strategies and methods that can be used to help seek the views of children and young people.



Children and Young People's Participation

Participation extends the definition of 'view'. As well as listening to the child's thoughts and feelings about a particular issue, it involves providing them with the necessary advice or resources to enable them to develop their skills to participate in situations where decisions are required to be made.

Models of participation can help schools to identify how they currently involve children and young people, including those with SEND, in decision-making, and can highlight areas for improvement.

The Useful Links section of the [Views of the Child Booklet](#) includes some tools and strategies which might help to ensure that we are gathering the child/young person's views and giving them a voice.

Matching strategies to the child/young person's strengths, interests and communication, interaction and developmental level is important when determining the model of participation.

Hart (1992) Ladder of Participation

- Non-participation
- Partial Participation
- Full Participation

Shier (2001) Pathways to Participation

- Openings
- Opportunities
- Obligations

Lundy (2007) Model of Participation

- Space
- Voice
- Audience
- Influence



Strategies and Resources to Support Participation

The [Views of the Child Booklet](#) contains a comprehensive list of suggested tools and strategies to support participation in Appendix 7 (**Pg 38**). It also contains links to numerous other useful resources to both help elicit views and encourage participation of children and young people.

The booklet also contains a sample audit document to help schools determine where they are in relation to seeking the views of children and young people, and supporting their participation in the management of their SEND (Appendix 8, Pg. 42).

Further Useful Links:

[highland-council-psychological-service-tools-for-gathering-the-views-of-children-and-young-people-may-2020.pdf \(education.gov.scot\)](#): comprehensive list of strategies, pages 5-16

[Involve Me: Practical guide \(mencap.org.uk\)](#): for children and young people with profound and multiple learning disabilities (PMLD)



Specialist Provisions

The Graduated Response



What is a Specialist Provision?



Who are Specialist Provisions for?

Specialist Provisions are predominantly for children and young people with a statement of special educational need(s) which indicates that specialist teaching within a small group setting is most appropriate to meet their needs. The Statutory Assessment and Review Service (SARS) will offer placements in consultation with the school and parents. These provisions cater for pupils with a range of special educational needs for example, Cognition and Learning Needs, Down Syndrome, Autism, Social, Behavioural and Emotional Well-being Needs, Complex medical needs, and Global Developmental Delay.

Each provision is resourced with its own full-time teacher and full-time classroom assistant(s) to provide an extra level of support for pupils depending on need. Pupils follow the Northern Ireland Curriculum at a level which suits their individual needs and abilities. Each child's educational journey is based on assessment of need, involving professional advice and input from the school, parents, and carers. In particular, the views of children and young people must be given serious consideration.

One of the key benefits of Specialist Provisions is the ability to facilitate mainstream integration of pupils who secure a place in the Specialist Provision Class for periods of time in line with their development and ability. The school can also use the expertise that develops within the Specialist Provision setting to support mainstream pupils through peer support for teachers or reverse integration of mainstream pupils into the Specialist Provision setting for short periods of time for targeted support.

For more information on an overview of Specialist Provisions, please click the [video link](#).

What support is available for Specialist Provisions?

Where specialist provisions are set up, it is extremely important that the staff are provided with high quality specialist professional learning and support.

The Specialist Setting Support Team (SSST) is a regional multi-service team providing integrated support for specialist provisions. SSST staff work across multiple schools to provide professional learning opportunities, advice and on the ground support to leaders, teachers, and classroom assistants.

The model is designed to complement current service delivery models and ensure a connected approach across EA services to streamline support for settings.

The team work in partnership with existing services and draw on best practice from established settings.

Support is provided before and after setting up a new specialist provision including support for both school staff and parents as well as specialist support for children and young people.



What support is available for Specialist Provisions?



For more information click below:

[Supporting Specialist Provisions](#)

For Further information and support for mainstream schools with Specialist Provisions or those who may wish to establish a new specialist provision – please click [here](#).

Link Support

Each Specialist Provision will be allocated an Advisory Teacher as a point of contact with the team for support, signposting, and advice.

Professional Learning Development

A comprehensive professional learning and development programme is available, delivered by SSST both online and in person for senior leadership, teachers, classrooms assistants and parents across all phases (Early Years, Primary and Post Primary), designed to support settings with curriculum and assessment, quality of provision, staff development and leadership.

Teachers in Specialist Provisions may access specific [professional learning](#).



Psychology Service

The Graduated Response



The Educational Psychology Service

The Educational Psychology Service (EPS) undertakes a range of work aimed at promoting progress, psychological well-being and inclusion for children and young people.

The EPS supports children and young people, from pre-school age to post-primary education, with Special Educational Needs (SEN) arising from difficulties in the following SEN Categories:

- Cognition and Learning (C&L)
- Social, Behavioural, Emotional and Well-being (SBEW)
- Speech, Language and Communication Needs (SLCN)
- Sensory (SE)
- Physical Needs (PN)

For school-aged children and children in statutory nursery settings, requests for EP involvement come from the child's school. For other pre-school children with complex needs, the EPS is the single point of entry into the EA and referrals are agreed at triage in consultation with health trust colleagues, particularly Consultant Paediatricians.

EPs work collaboratively with children and young people, parents/carers, educational staff, EA colleagues and other professionals with the aim of bringing about positive change for children and young people.



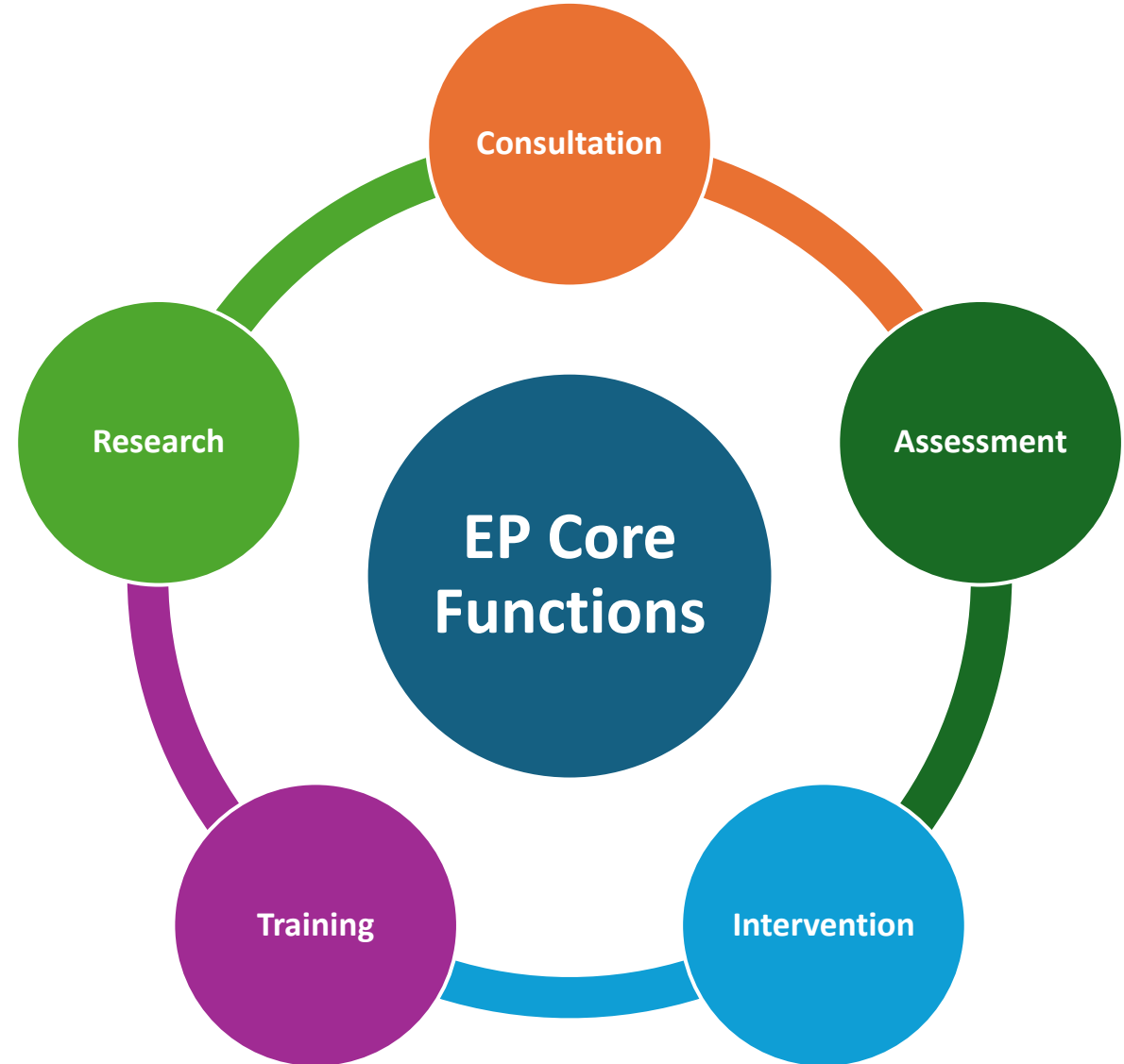
The work of the Educational Psychologist

In line with the Graduated Response, the EPS offers a continuum of support. The EPS offers psychological input across all stages of the Code of Practice, delivered through the core EP functions.

EPs can provide support at different systemic levels depending on the purpose of their involvement.

An EP may provide support:

- to an individual child or young person
- at a group level (to meet the needs of a wider number of children whilst building capacity)
- at a whole school or strategic level (such as staff training and development work, action research and project-based work).



EPS delivery in context of the Graduated Response

Consultation

Effective consultation, using well-researched psychological frameworks and approaches, is at the core of Educational Psychology service delivery at all levels of the graduated response. Educational Psychologists have specific training, skills and expertise which they can use in consultation with education staff, parents/carers, children and young people, and other professionals to achieve positive and practical outcomes.

The consultation model used by the Educational Psychology Service aligns well with the six-part cycle of **identify, plan, action, monitor, evaluate and review (IPAMER)** outlined in the Graduated Response framework, as the EPS consultation model is focused on:

- Joint investigation
- Joint problem-solving emphasising a 'solution- oriented' stance
- Joint planning and intervention
- Joint evaluation, review and reflection



Some of the ways in which EPs use **consultation** are as follows:

- Engaging in planning discussions and consultation with SENCos and school senior management
- Using a consultative, problem-solving approach to support casework with children and young people.
- Facilitating psychologically informed group process consultation with groups of staff to help them to reflect on and explore the best way forward in relation to issues causing concern.
- Consultation and collaboration with other professionals within the EA and partner agencies, such as Health Trust staff, to help inform decision making in relation to children/young people with SEN.

EPS delivery in the context of the Graduated Response

Assessment and intervention

Assessment and intervention are core elements of EPS service delivery, carried out with children and young people. **Assessment** typically takes place following an initial consultation where it is agreed that there is a clear rationale for EP assessment.

EP assessment builds on information already available and is based on the needs of the child and the professional judgement of the EP. Assessment can include a range of activities such as psychological consultation, observation, psychometric testing, gathering information from other professionals involved with the child, data gathering and analysis via checklists or rating scales and direct work with the child or young person.

Assessment of children and young people is inextricably linked to **intervention** as the assessment process leads to psychological formulation which informs recommendations about how situations can be improved.



Following assessment, and depending on the support required, EPS staff may undertake a time bound intervention with a child or young person, or they may recommend specific strategies or interventions to be delivered by school staff to support progress.

EPS staff may deliver, or support school staff to deliver, interventions at a group or whole class level e.g. to address issues around anxiety, to support emotional regulation skills or to promote psychological wellbeing.

In developing, delivering, and advising on interventions, EPS staff draw on psychological knowledge, experience and evidence-based practice. EPs may draw on therapeutic psychological approaches such as cognitive behavioural therapy or solution focused brief therapy approaches. EP staff may co-design interventions with school staff or others.

In line with best practice, and in accordance with the graduated response, EPs will ensure that intervention outcomes are appropriately monitored, evaluated and reviewed. In all assessment and intervention activities, Educational Psychologists adhere to the guidance provided in the Code of Ethics and Conduct provided by the British Psychological Society (BPS) and the Standards of Practice of the Health and Care Professions Council (HCPC).

Training, Staff Development & Capacity Building

EPS may be involved in developing and delivering bespoke training or staff development to address training/development needs identified through planning, discussion and consultation with schools.

In line with the graduated response, this can support whole school provision, inclusive practice, high quality teaching, and school-delivered special educational provision. Any training or professional development provided by the EPS will be based on psychological theory and research evidence.

Examples of training available:

- **Emotionally Based School Avoidance (EBSA)**
- **Acquired Brain Injury**
- **School staff wellbeing training**

Through strategic projects, the EPS has established teams of EPs who work closely with special schools, nurture settings and early years settings to assist in building the capacity of staff to support children with significant and complex needs.

Research and Strategic development

A growing area of Educational Psychology Service core work is that of research, contributing to an evidence base for educational practice and informing policy and strategy.

EPs have specific knowledge and skills in research design and analysis and are trained to take a constructively critical stance to research findings.

EPs can support schools to evaluate strategies and approaches and can provide advice about research and evidence-based interventions and strategies.



Collaboration and Multi-Disciplinary Working

EPs work with other professionals within the EA and partner agencies such as Health Trust staff to help inform decision making in relation to children and young people with SEN.

In line with DE/EA guidance, EP representation (typically Senior or Principal EPs) is mandatory on decision making panels for:

- **Education Other Than at School (EOTAS) - Placement at Primary & Post Primary**
- **Exceptional Teaching Arrangements (ETA)**
- **Statutory Assessment Decision Process (SADP)**
- **Preschool Triage**
- **Language & Community Provision**

EPS Senior management link with DE workstreams in relation to SEN. At a strategic level EPS Senior management is involved in the DE-led Academic Professional Advisory Group (APAG)



A

AAIS - Autism Advisory Intervention Service

AHP – Allied Health Professional

AR Portal - Annual Review Portal

B

BD - Blind

BoG - Board of Governors

C

CA - Classroom Assistant

CoP - Code of Practice

CoSCA - Children over Compulsory School Age

CSID - Communication and Social Interaction Difficulties

D

DARS - Dispute Avoidance and Resolution Service

DDA - Disability Discrimination Act

DE - Department of Education

DENI - Department of Education, Northern Ireland

DLD - Developmental Language Disorder

DoH - Department of Health

DYC - Dyscalculia

DYL - Dyslexia

E

EA - Education Authority

EOTAS – Education Other Than At School

EP – Educational Psychologist

EPS – Educational Psychology Service

ESaGS – Every School a Good School

ETI – Education and Training Inspectorate

EWD – Emotional and Well-being Difficulties

G

GPG – Good Practice Guidelines

GR – Graduated Response

H

HQT – High Quality Teaching

HSCT – Health and Social Care Trust

I

IEP – Individual Education Plan

INSET – In-Service Training

IPAMER – Identify, Plan, Action, Monitor, Evaluate, Review

L

LD - Language Disorder associated with a differentiating biomedical condition

LSC – Learning Support Coordinator

M

MAST - Multi-Agency Support Team

MLD – Moderate Learning Difficulties

MMHI – Mild/Moderate Hearing Impairment

MSI – Multi-Sensory Impairment

P

P – Primary setting

PLP – Personal Learning Plan

PM - Provision Mapping

PMLD - Profound & Multiple Learning Difficulties

PN - Physical Needs

PP – Post Primary Setting

PS – Partially Sighted

R

RA – Reasonable Adjustments

RoC – Record of Concern

S

SA - Statutory Assessment

SBD - Social and Behavioural Difficulties

SCB - Severe Challenging Behaviour associated with SLD or PMLD

SEN - Special Educational Needs

S

SENCO- Special Educational Needs Co-ordinator

SEND - Special Educational Needs and Disability

SENDIST - Special Educational Needs and Disability Tribunal

SENDO - Special Educational Needs and Disability Order

SENIS - Special Educational Needs Inclusion Service

SpEP - Special Educational Provision

SEP - Senior Educational Psychologist

SLD - Severe Learning Difficulties

SMS - School Management System

SMT - Senior Management Team

SPHI - Severe/Profound Hearing Impairment

SpLD - Specific Learning Difficulty

W

WEP – Whole School Educational Provision