

## **APPENDIX A**

### **Tri-borough Education, Health and Care Assessment**

#### **Special Educational Needs Guidelines for Education Health and Care Plan Assessment**

**DRAFT**

##### **Who do these guidelines apply to?**

These guidelines have been written in accordance with paragraph 9:16 of the Special Educational Needs Code of Practice 2014 which provides:

“Local authorities may develop criteria as guidelines to help them decide when it is necessary to carry out an EHC needs assessment (and following assessment, to decide whether it is necessary to issue an EHC plan). However, local authorities must be prepared to depart from those criteria where there is a compelling reason to do so in any particular case and demonstrate their willingness to do so where individual circumstances warrant such a departure. Local authorities must not apply a ‘blanket’ policy to particular groups of children or certain types of need, as this would prevent the consideration of a child’s or young person’s needs individually and on their merits”.

Who these guidelines apply to:

These guidelines apply when considering requests for EHC Assessments. They do not apply to those children and young people with existing Statements of Special Educational Needs or Learning Disability Assessments at 1 September 2014.

##### **Why are we implementing these guidelines?**

These guidelines have been produced to assist the Local Authority in deciding whether it is necessary for the Local Authority to initiate an EHC Assessment. In addition to the guidelines, all requests for an EHC Assessment will be considered on an individual basis considering some or all of the following:

- (1) The views and evidence submitted by parents/carers
- (2) Where applicable, the views and evidence submitted by the young person
- (3) The evidence presented by the educational setting
- (4) The evidence presented by professionals
- (5) Any other relevant body with information about the child/young person

##### **How will we review the effectiveness of these Guidelines?**

During the next 12 months we will work closely with parents and Parent Representative Groups to review the effectiveness of the criteria and will consider amendments as required.

**The following guidance is for children aged 0-25 and specifically relates to the identification of whether a child/young person has Special Educational Needs.**

We recognise that there are also separate eligibility criteria for access to Children's Social Care, Adult's Social Care and Health Services and that each of these criteria will be referred to independently during the single assessment process. We have started a process of reviewing the criteria for each of these services and understanding how they can be aligned in order to simplify the overall assessment process. The government recognise that this is a significant task that all local authorities will need to undertake during the period of transition, which runs until April 2018.

### **Who can make a request for an EHC Assessment?**

A request for an Education, Health and Care assessment for a child or young person aged 0-25 years and with special educational needs and/or disabilities can be made by:

- The child's parent
- A young person aged 16-25 years
- A person acting on behalf of a school or post 16 institution
- Children and young people under 19 in youth custodial establishments have the right to request assessment for an EHC Plan.

Following a request for an EHC needs assessment or the child having otherwise been brought to its' attention, the Local Authority must determine whether an EHC needs assessment is necessary.

The Local Authority must make this decision and communicate the decision to the child's parent within six weeks of receiving the request.

### **Considering a Request for an EHC Assessment – The Legal Context**

The Children and Families Act defines whether a child/young person has special educational needs and requires an Education, Health and Social Care Assessment.

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

A child of compulsory school age has a learning difficulty if he or she:

- Has a significantly greater difficulty in learning than the majority of others of the same age or
- Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post 16 provision

A child of under compulsory school age has special educational needs if he or she is likely to fall within the definition above when he/she reaches compulsory school age or would do if special educational provision was not made for him/her.

In some exceptional circumstances, it may be possible for a combination of less severe special educational needs to have a cumulative effect on a child's educational progress. An EHC Assessment will be considered if the cumulative effect may call for special provision which cannot reasonably be provided within the resources normally available to mainstream settings

The four broad categories of needs as set out in the SEND Code of Practice 2014 form the basis for decision-making:

- Speech, language and communication
- Cognition and learning
- Social, emotional mental health
- Physical, sensory medical

In each of these areas the borough has produced guidelines to identify the significance of a child's difficulty and to identify whether there needs can be met through the resources that are available to mainstream school. The questions have been designed by professionals and they act as a guide only in deciding whether or not an EHC Assessment is necessary. The guidelines for each area will be completed by parents, the educational setting and professionals to identify the significance of the child's difficulties.

For each area of difficulty the child's parents/school/professional score the severity of the child's presenting difficulties. If the child reaches a certain score, the Council can use this information to determine whether the child's needs are significant to meet the criteria for an EHC Assessment. It is important to state that the guidelines are not a diagnostic tool and are simply used to weigh how the child's difficulties are reported to impact on their education. In addition to the guidelines the Tri-Borough will also consider the information which is gathered as part of the EHC Request for an Assessment process.

# Speech, Language and Communication

## Speech, Language and Communication Scales

Specific Criteria: Autistic Spectrum Disorders/Speech and Language Difficulties

Statutory Action	Social Communication	Social Interaction	Social Imagination	Receptive Language	Expressive Language	Motor/Organisational	
End of Foundation Stage	0 – 5 points	0 – 5 points	0 – 2 points	3 points or less	3 points or less	0 – 10 points	Working towards EYFS* levels 2 or more years below chronological age
End of KS1	5 points or less (where all ticks fall in the 'not at all', 'rarely' or 'sometimes' columns)	5 points or less (where all ticks fall in the 'not at all', 'rarely' or 'sometimes' columns)	2 points or less (where all ticks fall in the 'not at all' or 'rarely' columns)	7 points or less	11 points or less	10 points or less	At or below 2 <sup>nd</sup> centile speaking and listening P6 or below
End of KS2	15 points or less	15 points or less	10 points or less (where all ticks fall in the 'not at all', 'rarely' or 'sometimes' columns)	21 points or less	23 points or less	20 points or less	At or below 2 <sup>nd</sup> centile speaking and listening level 1C or below
End of KS3/4 and FE 14-25 years old	22 points or less	22 points or less	12 points or less (where all ticks fall in the 'not at all', 'rarely' or 'sometimes' columns)	24 points or less	28 points or less	24 points or less	At or below 2 <sup>nd</sup> centile speaking and listening level 2A or below

Pre-school	Working towards EYFS levels 2 or more years below chronological age and/or similarly recorded levels using alternative developmental checklists (e.g. Teaching Talking, Portage, PIP Checklist) in the area of language and communication skills.
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It is important to note the above relates to **specific criteria for statutory action** and that a request for statutory assessment additionally requires considerable evidence of process criteria being met.

\* EYFS = Early Years Foundation Stage

## Specific Criteria: Communication and Interaction

Please refer to guidance notes before completing this form.

Name:	Age:	Date:
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<i>Observed behaviour</i>	Not at all	Rarely	Some-times	Fairly often
<b>SOCIAL COMMUNICATION</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
1. Responds when called by name.				
2. Follows verbal instructions in 1:1 setting.				
3. Follows verbal instructions in small group setting.				
4. Follows verbal instructions in whole class setting.				
5. Takes turn in conversations.				
6. Initiates conversation.				
7. Changes topic of conversation.				
8. Maintains an appropriate conversation.				
9. Shows awareness of the listener's needs.				
10. Gives appropriate non-verbal signals as a listener.				
11. Changes the topic or style of a conversation to suit the listener.				
12. Changes appropriately the volume and tone of voice.				
13. Recognises and responds to non-verbal cues eg: a frown.				
14. Understands implied meanings.				
15. Tells or writes an imaginative story.				
16. Relates a sequence of events.				
17. Gives a simple sequence of instructions.				

<b>SOCIAL INTERACTION</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
18. Uses gesture, body posture, facial expression and eye-to-eye gaze in 1:1 situation.				
19. Uses gesture, body posture, facial expression and eye-to-eye gaze in group interaction.				
20. Follows social cues in 1:1 situation with adults.				
21. Follows social cues in 1:1 situation with other children.				
22. Follows social cues in group interaction.				
23. Shares an activity with other children.				
24. Shares an activity with an adult.				
25. Develops peer friendships.				
26. Seeks comfort/affection when upset.				
27. Offers comfort/affection to others.				
28. Shares in others' enjoyment/pleasure.				
29. Imitates other children.				
30. Imitates adults.				

31. Shows different responses to different people in different situations.				
32. Responds appropriately to social praise.				
33. Responds appropriately to criticism.				

<b>Observed behaviour</b>	<b>Not at all</b>	<b>Rarely</b>	<b>Some-times</b>	<b>Fairly often</b>
<b>SOCIAL IMAGINATION &amp; FLEXIBLE THINKING</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
34. Has varied interests.				
35. Shares interests.				
36. Changes behaviour according to the situation.				
37. Accepts changes in rules, routines or procedures.				
38. Plays imaginatively when alone.				
39. Plays imaginatively with others.				
40. Accepts others' points of view.				
41. Generalises learning.				
42. Transfers skills across the curriculum.				
43. Plans an event or task.				
44. Suggests possible explanations for events.				
45. Uses inference and deduction.				

<b>RECEPTIVE LANGUAGE (listening and understanding)</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
46. Listens 1-1.				
47. Listens in a small group.				
48. Listens in classroom context without visual cues.				
49. Follows instructions to carry out an activity step by step without visual cues.				
50. Is able to retain information from one lesson to another.				
51. Shows understanding of an age-appropriate story/text told to a large group of pupils.				
52. Shows understanding of where/when/how questions.				
53. Shows ability to predict outcomes.				
54. Shows ability to make inferences.				
55. Understands abstract concepts of time and sequence.				
56. Shows an appropriate understanding of words.				
57. Can understand how words are linked in categories.				

<b>EXPRESSIVE LANGUAGE (spoken language)</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
58. Uses intelligible connected speech.				
59. Uses familiar vocabulary appropriately.				
60. Uses phrases and statements to comment on ongoing				

<i>activities.</i>				
<i>61. Finds words and joins them together with appropriate word order.</i>				
<i>62. Uses appropriate grammatical structures, taking into account local dialect.</i>				
<i>63. Recalls and describes in sequence activities that have been recently completed.</i>				
<i>64. Asks appropriate questions to obtain information.</i>				
<i>65. Gives meaningful instructions.</i>				
<i>66. Tells/retells a story or imagined events in chronological order.</i>				
<i>67. Contributes to discussion about behaviour or feelings in different situations.</i>				
<i>68. Gives an explanation of why events occur and predicts alternative endings/outcomes.</i>				
<i>69. Uses language appropriately in a variety of situations.</i>				

<b>MOTOR &amp; ORGANISATIONAL SKILLS</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
<i>70. Finds way around classroom.</i>				
<i>71. Finds way around school.</i>				
<i>72. Sits still.</i>				
<i>73. Sits amongst a small group.</i>				
<i>74. Sits amongst a large group eg: assembly.</i>				
<i>75. Finds and organises the equipment needed for a given task.</i>				
<i>76. Writes legibly and draws accurately.</i>				
<i>77. Gets changed without help eg: for PE.</i>				
<i>78. Organises movements for PE and games.</i>				

	<b>SCORE</b>
<b>SOCIAL COMMUNICATION</b>	
<b>SOCIAL INTERACTION</b>	
<b>SOCIAL IMAGINATION &amp; FLEXIBLE THINKING</b>	
<b>RECEPTIVE LANGUAGE (listening and understanding language)</b>	
<b>EXPRESSIVE LANGUAGE (Spoken language)</b>	
<b>MOTOR &amp; ORGANISATIONAL SKILLS</b>	

**PLEASE ENSURE THAT THIS FORM IS COMPLETED AND RETURNED AS PART OF THE SUPPORTING EVIDENCE.**

**Special educational needs and disability code of practice: 0 to 25 years - 2014:**

*6.28 Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.*

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



# Cognition and Learning

## Threshold Criteria for Statutory Assessment of Children with Learning Difficulties

Age of pupil	Year group	Criteria for Learning Difficulties
5 years	R	Working towards early year foundation Stage Learning Goals 2 or more years below chronological age and/ or standardised assessment evidences progress towards developmental milestones within 2 <sup>nd</sup> Centile.
6 years	Y1	Working towards level 1 in all NC core subjects – P level 5 or below
7 years	Y2	Working towards level 1 in all NC core subjects – P level 6 or below
8 years	Y3	Working towards level 1 in all NC core subjects – P level 7 or below
9 years	Y4	Working towards level 1 in all NC core subjects – P level 8 or below
10 years	Y5	Mixture of working towards level 1 and working at level 1c in all NC core subjects
11 years	Y6	Mixture of working towards level 1 and working at level 1b in all NC core subjects
12 years	Y7	Level 1a in all NC core subjects
13 years	Y8	Mixture of level 1 and level 2c in all NC core subjects
14 years	Y9	Mixture of level 1 and up to level 2b in all NC core subjects
15 years	Y10	Working at 2a in all NC core subjects
16-25 years	Y11 - FE	Working at level 2a/3 in NC core subjects or Foundation Level 3

**Special educational needs and disability code of practice: 0 to 25 years - 2014:**

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

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

# Social, Emotional and Mental Health

## Threshold Criteria for Assessment for children with social, emotional and/or mental health needs

A small proportion of children will demonstrate severe and complex social, emotional difficulties over time despite appropriate interventions. These children will display a range of related behaviours to a severe degree, which would include at least three of the following:

- very poor social skills, including difficulties interacting with peers
- lack of self-esteem
- continual, high-level disruptive behaviour in the classroom
- poor concentration and organisation.

In addition, there would be evidence of at least two of the following:

- frequent, inappropriate challenging of authority, experienced as non-compliance
- regular confrontational interaction with adults
- violent or severely disruptive behaviour which is not confined to a particular teacher, class, task or set of circumstances
- regular aggressive or violent acts against people and/or property
- self-harming
- withdrawal, depressive or suicidal tendency.

The degree and complexity of these behaviours for any children will need to be assessed against:

- the inappropriateness of the presenting social emotional behaviour (particularly with regard to the age of the child and to the context in which the behaviour occurs)
- the frequency of the behaviour
- its intensity
- its duration
- its persistence over time

The evidence submitted with a request for an EHC assessment will need to demonstrate the degree to which a child's social emotional development has an effect on:

- access to the curriculum and learning
- the safety or welfare of the child or other children
- teacher attention and time

Since context can play a significant part in determining the extent of a child's social emotional difficulties, a child who has recently moved from another school should be given the opportunity to settle before a statutory assessment request is initiated.

Evidence from the previous school, if this can be obtained, would be relevant.

The child's social, emotional difficulties may be experienced by those who have contact with him or her as non-compliant, confrontational and potentially threatening and/or as mental health needs. The young person's targeted intervention programme will have been in place for a reasonable period of time and reviewed in consultation with all staff working with the child, as well as with his or her parents.

Provision maps and/or pastoral support plans with specific measurable targets which show evidence of reviewing strategies and/or interventions relevant to the child's social, emotional difficulties over time with parents must be provided.

**The evidence will also include completion of the Social Emotional Development Questionnaire with parents and evidence of tracking Well-being in response to intervention over time.**

**Children/young people would be likely to score 8 or less on any two parts of this scale and 14 or less on all three parts to meet the criteria.**

### **Tri-borough Social Emotional Development Questionnaire**

<b>Specific Criteria for EHC Assessment</b>
15 points or less where <b>all</b> ticks fall in the 'not at all' or 'rarely' columns.

#### **USING THE SCALE - INSTRUCTIONS FOR COMPLETION**

Each item is rated on a four-point scale from 'Not at all' to 'Fairly often' (0 – 3). When completing the assessment, an individual pupil's behaviour should be considered over the period of a term.

A practitioner who has worked closely with the child/young person should complete the form in liaison with the school's link EP, a specialist teacher and/or another specialist service. It would be expected that the school's SENCo would contribute to this process.

'**Not at all**' should be marked if the pupil has **not** shown the behaviour **at all** during the last three months.

**'Rarely'** should be marked if the pupil has demonstrated the behaviour on only **a few occasions** during the last three months. It is helpful if in discussion with parents there is agreement about the definition of 'sometimes' and 'fairly often'.

Account should be taken of the age of the pupil and consideration given to expectations of social, emotional behavioural regulation for that age group.

Please note: When a member of school staff and/or parent makes a request to the Local Authority to carry out an EHC single assessment of special educational needs for a child/young person with Social Emotional Mental Health Needs it would be expected that:

- The nature and severity of the child/young person's needs would meet criteria and that this would be evident from completion and submission of the Tri-borough Social Emotional Development Questionnaire
- The evidence of school-based, health and care intervention was matched to the child's identified need and had been reviewed regularly

When requesting single assessment of a child in the Early Years Foundation Stage it would be expected that evidence would be provided of EYFS assessment of personal, social, and emotional development showing a developmental gap of two or more years below chronological age.

Alternatively age appropriate checklists showing a similar social, emotional behavioural developmental pattern, such as Portage and/or PIP could be submitted as evidence, providing these have been shared with parents.

## Tri-borough Social, Emotional Development Questionnaire

Please refer to guidance notes before completing this form.

<b>Name:</b>	<b>Age:</b>	<b>Date:</b>
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<b>OBSERVED Social Responses</b>	Not at all	Rarely	Some-times	Fairly often
	0	1	2	3
<b>1. Behaves respectfully towards teacher/practitioner</b> Eg respects teacher/practitioners and answers teacher/practitioners demonstrating age appropriate understanding of behavioural expectations, does not interrupt or deliberately annoy, does not show verbal aggression.				
<b>2. Shows respect to other children/young people</b> Eg interacts with other children/young people demonstrating age appropriate understanding of expected behaviour and does not tease, call names, swear, use psychological intimidation.				
<b>3. Only interrupts and seeks attention appropriately</b> Eg behaves in ways warranted by the classroom/setting activity. Does not disrupt unnecessarily, or distract or interfere with others, does not pass notes, talk when others are talking. Is not attention-seeking.				
<b>4. Self-regulates social response</b> Eg is not physically aggressive, avoids fights, is pleasant to other children/young people, is not cruel or spiteful, does not strike out in temper.				
<b>5. Respects property</b> Eg values and looks after property, does not damage or destroy property, does not steal.				
<b>EMOTIONAL Response</b>	0	1	2	3
<b>6. Has empathy</b> Eg is tolerant of others, shows understanding and sympathy, is considerate.				
<b>7. Is socially aware</b> Eg interacts appropriately with others, is not a loner or isolated, reads social situation well.				
<b>8. Is happy</b> Eg has fun when appropriate, smiles, laughs, is cheerful, is not tearful or depressed.				
<b>9. Is confident</b> Eg is not anxious, high self-esteem, relaxed, does not fear failure, is not shy or afraid of new things, is robust.				
<b>10. Is emotionally well-regulated and shows self control</b> Eg moods remain relatively stable, does not have frequent mood swings. Patient, not easily flustered, able to maintain emotional regulation. Can delay gratification (e.g. wait until finished activity)				
<b>BEHAVIOUR for Learning</b>	0	1	2	3
<b>11. Is attentive and has an interest in schoolwork/activities</b> Eg not easily distracted, completes work, keeps on task and concentrates, has good motivation, shows interest, enjoys schoolwork/activities.				
<b>12. Good learning organisation</b> Eg works systematically, at a reasonable pace, knows when to move onto next activity or stage, can make choices, is organised.				
<b>13. Is an effective communicator</b> Eg speech is coherent, thinks before answering.				
<b>14. Works efficiently in a group</b> Eg takes part in discussions, contributes readily to group tasks, listens well in groups, works collaboratively.				
<b>15. Seeks help where necessary</b> Eg can work independently until there is a problem that cannot be solved without the teacher/practitioner's intervention.				

	<b>SCORE</b>
<b>Social Response</b>	
<b>Emotional Response</b>	
<b>Behaviour for Learning</b>	
<b>TOTAL</b>	

Please return this form as part of the supporting evidence.

## Guidance: using the Tri-borough Social, Emotional and Development Scale (TSEDS)

Parents/Teacher/practitioners/keyworkers are asked to focus on positive aspects of children/young peoples' social emotional development to effect change. It is only for speed and accuracy of assessment that the examples of negative behaviours are included below.

<b>Social Response</b>	
<b>1. Prosocial behaviour /practitioner</b>	
Positive	Negative
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ respects the teacher/practitioner and is cooperative and compliant, responding positively to instruction</li> <li>§ does not talk back to the teacher/practitioner or aim verbal aggression at the teacher/practitioner</li> <li>§ interacts politely with the teacher/practitioner</li> <li>§ will not be quarrelsome or deliberately try to annoy the teacher/practitioner</li> <li>§ will not interrupt or answer the teacher/practitioner rudely.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>responds negatively to instruction</i></li> <li>§ <i>is uncooperative with the teacher/practitioner</i></li> <li>§ <i>aims verbal violence at the teacher/practitioner</i></li> <li>§ <i>answers the teacher/practitioner rudely</i></li> <li>§ <i>is quarrelsome with the teacher/practitioner</i></li> <li>§ <i>appears to deliberately annoy the teacher/practitioner.</i></li> </ul>
<b>2. Prosocial children/young people</b>	
Positive	Negative
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ respects other children/young people and uses appropriate language, for example, not swearing or calling them names</li> <li>§ treats other children/young people as equals and does not dominate them with the use of intimidation or abuse</li> <li>§ respects the views or rights of other children/young people and avoids bullying or intimidation.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>aims verbal violence at other children/young people</i></li> <li>§ <i>uses psychological intimidation</i></li> <li>§ <i>shows social aggression</i></li> <li>§ <i>tries to dominate</i></li> <li>§ <i>uses unethical behaviour</i></li> <li>§ <i>uses inappropriate sexual behaviour</i></li> </ul>
<b>3. Has effective strategies for seeking attention – does not disrupt inappropriately</b>	
Positive	Negative
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ does not seek to attract inappropriate attention in the classroom/setting;</li> <li>§ acts in a manner appropriate to the classroom/setting situation and does not play the fool, try to make the class laugh, shout out smart remarks or show off in the classroom/setting;</li> <li>§ does not display attention-seeking behaviour;</li> <li>§ does not unnecessarily disrupt or interrupt other children/young people who are working;</li> <li>§ does not verbally disrupt the class and keeps unauthorised talking to other children/young people to a minimum;</li> <li>§ does not disrupt other children/young people using physical disruption such as nudging or poking.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>is verbally disruptive</i></li> <li>§ <i>throws things about during lessons</i></li> <li>§ <i>climbs on things</i></li> <li>§ <i>runs around classroom/setting</i></li> <li>§ <i>shouts in class</i></li> <li>§ <i>eats, sucks or drinks inedible substances</i></li> <li>§ <i>is hyperactive and/or excitable</i></li> <li>§ <i>shows concern for immediate rewards</i></li> <li>§ <i>needs excessive adult contact</i></li> <li>§ <i>does dangerous things without thinking</i></li> </ul>

## Emotional Response

### 4. Is physically self regulated

#### Positive

The child/young person:

- § does not show physical aggression towards adults or other children/young people
- § does not physically pick on others
- § is not deliberately unkind or hurtful to others
- § avoids getting into fights with others
- § does not strike out in anger, have temper tantrums or aggressive outbursts.

#### Negative

The child/young person:

- § fights
- § aims physical violence at other students
- § often loses their temper
- § yells and throws things
- § bullies
- § aims physical violence at teacher/practitioners
- § forces other students to do things against their will
- § is deliberately cruel
- § is spiteful.

### 5. Respects property

#### Positive

The child/young person:

- § respects the property of others – this may be seen by the child/young person taking good care of property
- § does not take part in acts of wilful damage or destruction
- § does not steal from others.

#### Negative

The child/young person:

- § has poor respect for property
- § destroys their own things
- § destroys others' things
- § damages school property
- § steals things.

### 6. Has empathy

#### Positive

The child/young person:

- § is tolerant and considerate towards others
- § understands how others are feeling and tries to act in a way appropriate to the situation
- § may try to comfort someone who is upset or hurt
- § displays emotions appropriate to the situation and is not emotionally detached
- § does not laugh at someone who is upset or injured.

#### Negative

The child/young person:

- § is intolerant of others
- § is emotionally detached
- § has no awareness of others' feelings.

### 7. Is socially aware

#### Positive

The child/young person:

- § is conscious of, and understands, the social interactions happening around them
- § interacts appropriately with other people both verbally and non-verbally
- § is not socially isolated and does not spend long periods of time sitting or standing alone
- § has friends among their peers, and is not a loner

#### Negative

The child/young person:

- § is inactive
- § is passive
- § is aloof
- § is out of touch with reality
- § is withdrawn and unresponsive to stimulation
- § does not participate in class activities



<ul style="list-style-type: none"> <li>§ is not frequently daydreaming and staring into space</li> <li>§ is actively involved in activities within the classroom/setting</li> <li>§ does not seem aloof, inactive, passive or withdrawn.</li> </ul>	<ul style="list-style-type: none"> <li>§ <i>lacks accurate perceptions of others</i></li> <li>§ <i>says or feels they do not have any friends</i></li> <li>§ <i>stares blankly</i></li> <li>§ <i>is listless</i></li> <li>§ <i>shows bizarre behaviours</i></li> <li>§ <i>lacks self-awareness.</i></li> </ul>
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**8. Is happy**

<b>Positive</b>	<b>Negative</b>
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ appears happy by smiling and laughing when appropriate</li> <li>§ is able to have fun</li> <li>§ is generally cheerful and not tearful and upset</li> <li>§ is not discontented, sulky, morose or miserable.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>is depressed</i></li> <li>§ <i>is discontented</i></li> <li>§ <i>is unhappy</i></li> <li>§ <i>is distressed</i></li> <li>§ <i>talks about not wanting to live</i></li> <li>§ <i>is prone to emotional upset</i></li> <li>§ <i>is unable to have fun</i></li> <li>§ <i>is self-harming</i></li> </ul>

**9. Is confident**

<b>Positive</b>	<b>Negative</b>
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ is not anxious and is confident in most situations, while not showing bravado, recklessness or unrealistic expectations of their competence</li> <li>§ is not afraid of new things and does not fear failure when taking on new tasks</li> <li>§ is not self-conscious or shy in most situations and does not feel inferior to other children/young people</li> <li>§ is willing to read out loud in class and put their hand up to answer or ask appropriate questions</li> <li>§ is typically forthcoming in group/class discussions.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>acts as if extremely frightened to the point of crying</i></li> <li>§ <i>is anxious, tense or fearful</i></li> <li>§ <i>is upset by new people or situations</i></li> <li>§ <i>lacks confidence</i></li> <li>§ <i>fears failure</i></li> <li>§ <i>has feelings of inferiority</i></li> <li>§ <i>is negativistic</i></li> <li>§ <i>is afraid of new things</i></li> <li>§ <i>lacks self-esteem</i></li> <li>§ <i>is overly submissive.</i></li> </ul>

**10. Demonstrates effective emotional regulation**

<b>Positive</b>	<b>Negative</b>
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ remains relatively emotionally stable and does not frequently swing from positive to negative moods</li> <li>§ soon returns to a stable frame of mind after being upset, shows good emotional resilience and is not moody</li> <li>§ shows good self-control and is able to manage their feelings and actions to suit the situation</li> <li>§ is not easily frustrated or flustered and does not show signs of being touchy or uneasy</li> <li>§ is able to delay gratification when required, and can wait for rewards or pleasurable items for prolonged periods of time.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>displays inappropriate emotional reactions</i></li> <li>§ <i>has difficulty expressing needs and feelings</i></li> <li>§ <i>has frequent or strong mood changes</i></li> <li>§ <i>is unable to delay gratification</i></li> <li>§ <i>has little self-respect</i></li> <li>§ <i>over-reacts to normal situations</i></li> <li>§ <i>does not accept punishment or praise</i></li> <li>§ <i>instigates poor situations</i></li> <li>§ <i>is unable to accept responsibility for his/her actions.</i></li> </ul>

## Behaviour for Learning

### 11. Is attentive and has an interest in schoolwork/activities

#### Positive

The child/young person:

- § listens to the teacher/practitioner and is not easily distracted from the task in hand
- § does not find it difficult to work when others around are talking at a reasonable level
- § shows an interest in most schoolwork/activities
- § gets started on tasks without delay and has the motivation to carry them through
- § generally gets enjoyment from tasks and consequently completes them without complaint.

#### Negative

*The child/young person*

- § *has trouble paying attention*
- § *finds it hard to sit still*
- § *does not concentrate on tasks*
- § *has a short attention span*
- § *is easily distracted*
- § *has a negative approach to schoolwork/activities in general*
- § *responds negatively to school*
- § *is frequently absent or arrives late at lessons*
- § *arrives late at school*
- § *is not keen to achieve.*

### 12. Good learning organisation

#### Positive

The child/young person:

- § competently copes with individual learning situations
- § produces tidy work, at a reasonable pace
- § seems to have a good grasp of how to organise learning tasks so that they can be successfully completed.

#### Negative

(This item deals with organisation deficits, which significantly hamper the learning of the individual, rather than motivational deficits.)

*The child/young person:*

- § *is forgetful*
- § *has trouble organizing schoolwork/activities*
- § *rushes into things without thinking*
- § *appears confused about learning tasks*
- § *worries about things that cannot be changed*
- § *is occupied overly with one activity*
- § *is easily frustrated*
- § *has difficulty in making choices*
- § *complains of not being able to cope with schoolwork/activities.*

### 13. Is an effective communicator

#### Positive

The child/young person:

- § shows good communication skills
- § is able to communicate effectively with adults and peers
- § is coherent
- § knows when it is appropriate to speak
- § is able to alter voice pitch and tone appropriately and uses non-verbal signals effectively, for example, eye contact, stance, distance
- § is able to organise communication in both individual and group situations.

#### Negative

*This item refers to using or ignoring social communication and not medical problems, for example, stuttering.*

*The child/young person:*

- § *does not use language to communicate*
- § *has repetitive speech*
- § *has incoherent speech*
- § *avoids looking others in the eye*
- § *has difficulty communicating*
- § *has a speech difficulty*
- § *has limited non-verbal support of speech*
- § *has difficulty planning behaviour and feedback and responding to feedback*
- § *has limited non-verbal communication of attitudes and*

	<p><i>emotions</i></p> <ul style="list-style-type: none"> <li>§ <i>talks constantly.</i></li> </ul>
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<b>14. Works efficiently in a group</b>	
<b>Positive</b>	<b>Negative</b>
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ works well in a group situation</li> <li>§ works collaboratively with others and is an effective communicator in group discussions</li> <li>§ listens to what others have to say and consequently adds positively to group discussions</li> <li>§ is willing to take on responsibilities in a group context.</li> </ul>	<p><i>The child/young person:</i></p> <ul style="list-style-type: none"> <li>§ <i>refuses to share with another student</i></li> <li>§ <i>has trouble waiting their turn</i></li> <li>§ <i>refuses interactive games or tasks</i></li> <li>§ <i>is not willing to work collaboratively.</i></li> </ul>
<b>15. Seeks help where necessary</b>	
<b>Positive</b>	<b>Negative</b>
<p>The child/young person:</p> <ul style="list-style-type: none"> <li>§ seeks attention from the teacher/practitioner when appropriate</li> <li>§ works independently unless a problem arises that cannot be solved without the teacher/practitioner's help.</li> </ul>	<p><b><i>The child/young person</i></b></p> <ul style="list-style-type: none"> <li>§ <i>is unable to work independently</i></li> <li>§ <i>constantly seeks help</i></li> <li>§ <i>makes excessive demands</i></li> <li>§ <i>does not seek information appropriately</i></li> <li>§ <i>does not ask relevant questions.</i></li> </ul>

### Using the scale - Instructions for completion

Each item is rated on a four-point scale from 'Not at all' to 'Fairly often' (0 – 3).

When completing the assessment, children's social emotional development should be considered over a period of at least a term.

An appropriate practitioner such as a teacher or TA should complete the form in discussion with the child's parents..

'**Not at all**' should be marked if the pupil has **not** shown the social emotional response **at all** during the last three months.

'**Rarely**' should be marked if the pupil has demonstrated the response on only **a few occasions** during the last three months.

Account should be taken of the age of the pupil and consideration given to expectations of social, emotional behavioural regulation at that age.

***Special educational needs and disability code of practice: 0 to 25 years - 2014:***

*6.32 Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.*

*6.33 Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour so it does not adversely affect other pupils. The Department for Education publishes guidance on managing pupils' mental health and behaviour difficulties in schools – see the References section under Chapter 6 for a link.*

# Physical Sensory Medical

## SENSORY AND/OR PHYSICAL NEEDS

Most children with significant sensory and/or physical needs will be identified through developmental assessment pre-school. Children with severe sensory and/or physical disabilities are likely to require on-going adaptations to ensure curriculum and/or physical access.

These may take the form of:

- specialist equipment
- curriculum material modification
- teaching of specialist skills
- specialist support (eg. communicator/ brailist /intervenor)
- mobility training
- adaptation of environment

National Curriculum levels can be significantly affected in some or all areas. However, the key indicator will be that the child's sensory or physical need has long term and significant implications for access and learning. Where a child has a sensory or physical disability, the school should consider whether it has made appropriate adaptations under the Disability Discrimination Act (2005) before making a request for a single EHC assessment.

### **Special educational needs and disability code of practice: 0 to 25 years - 2014:**

*6.34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health (see the References section under Chapter 6 for a link).*

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

## Hearing Impairment

Children with significant hearing impairment are likely to be identified pre-school and their needs met early. Hearing impairment describes a continuum of difficulty with widely differing implications for a child's communication and access to learning. Children will only be considered for a statutory assessment if their diagnosis of hearing impairment is, or is likely to be, ongoing and/or permanent and it has long term, significant implications for access and learning affecting five or more of the following areas:

- communication
- interaction (attention and concentration)
- speech discrimination
- speech intelligibility
- comprehension
- expression
- independence
- interpersonal skills
- curriculum access
- attainment
- social inclusion

Evidence may also include:

- a significant discrepancy between language abilities and other abilities
- difficulties with spoken and written comprehension, and with communicating thoughts and feelings to others
- specific examples of the hearing impairment placing the child under stress, with associated withdrawn or frustrated behaviour.

Children who have significant hearing impairment may require:

- provision of specialist equipment
- modification of the classroom in order to improve the acoustic environment
- teaching strategies which take into account the impact of the child's hearing impairment on his or her learning.

### **Sensory and Physical Development (Hearing Impairment): Criteria**

**A child is eligible for single Education Health and Care assessment if most of the following usually apply:**

- Inability to make progress within the curriculum (or, for the very young child, to develop within expected/predicted milestones) without extensive amplification of hearing and the support of visual means of communication (e.g. lip-reading; signed support)
- Significant speech and language difficulties restricting communication with peers and teachers/practitioners and inhibiting language use in the curriculum

- Difficulties in making and sustaining peer relationships leading to concerns about social isolation, the risk of bullying and growing frustration
- Emotional and/or behavioural difficulties including periods of withdrawal, disaffection and reluctance to attend school/setting
- Significant difficulties in maintaining and sustaining concentration in the classroom/setting leading to problems in completing work;
- A need for adapted materials and a level of support beyond that which is realistic through an SEN Support resourced plan. .

### **Deaf blindness/Dual Sensory Impairment**

Most children with impairment of both vision and hearing will be identified at pre - school stage and their needs met early. However, some severe deteriorating conditions may become evident in later life and require fast track intervention and support. Some may acquire a second sensory impairment later in life, either expectedly or unexpectedly, and need additional and changed support. Children with deaf blindness may have multiple disabilities.

Children will be eligible for single EHC assessment if their diagnosed impairments of hearing and vision are, or are likely to be, ongoing and/or permanent and they have significant, long term implications for access and learning in five or more of the following areas, at least one under each of the headings below: Information

#### **Sensory access to the curriculum**

- perceptual skills (ability to uses senses to understand the environment)
- incidental learning (learning that is not directly taught or made explicit but that happens as a result of experiencing something)
- development of concepts (the ability to make links between experiences, develop a better understanding of them and apply this understanding in future situations)

#### **Communication**

- development of receptive and expressive communication
- development of interactive skills
- use of alternative and augmentative means of communication
- use of alternative access to printed and spoken material
- enhanced requirement for personal experience of concepts

#### **Orientation**

- motor and movement skills

- independence skills
- mobility and orientation
- involvement in the community
- social isolation and adaptability
- self esteem and self confidence
- safety

**Evidence may also include:**

- underdeveloped perceptual skills
- difficulties with behaviour or social isolation
- difficulties in attainment, learning and cognition due to, or in addition to, sensory impairment
- difficulty in concentration and attention

**Children with significant dual sensory impairment/ deaf blindness may require:**

- provision of and training in the use of, specialist equipment
- modification of the classroom to include visual and auditory access
- provision of specialist teaching programmes
- modification and adaptation of visual materials
- augmentative or alternative means of communication
- modification of communication
- perceptual skills training
- mobility and orientation advice or training

**Visual Impairment**

Children with a visual impairment are likely to be identified pre-school and their needs met early. However, some deteriorating conditions are not necessarily evident in pre-school children and will require proactive intervention and support. Visual impairment describes a continuum of difficulty taking many forms with widely differing implications for a child's education. In some cases visual impairment is one aspect of multiple disabilities.

Whatever the cause of the child's visual impairment, the major issue in identifying and assessing the child's SEN will relate to the degree and nature of functional vision and the child's ability to adapt socially and psychologically, as well as to progress in an educational context.

Children will be eligible for single EHC assessment if their diagnosed visual impairment is, or is likely to be, ongoing and/or permanent and it has a long term, significant implications for access and learning affecting five or more of the following areas:

- concept development
- communication (verbal and non verbal)



- visual skills and strategies
- mobility skills
- orientation skills
- interpersonal skills
- independence
- curriculum access
- attainment
- social and emotional development

**Evidence may also include:**

- under or partially developed visual skills
- specific examples of the visual impairment placing the pupil under stress, with associated withdrawn or frustrated behaviour.

**Children who have significant visual impairment may require:**

- provision of, and training in the use of, specialist equipment
- modification of the classroom and school environment to improve the visual access
- provision of specialist teaching programmes
- teaching strategies to enable access to the curriculum
- supervision on health and safety grounds in some practical lessons
- significant medication and adaptation of normal print and other teaching materials
- tactile modification for the educationally blind and Braille user
- training in appropriate mobility and orientation
- a safe and accessible environment for travel and learning

**Sensory and Physical Development (Visual Impairment): Criteria**

The level of visual loss alone does not determine the degree of difficulty that the child/young person experiences in the school/setting. It has to be set alongside other indicators more directly related to the teaching and learning environment. In order to ensure that the child/young person with the most severe visual impairment maintains

adequate progress, the parents and/or young person may request that the LA undertake and the LA/Health may become actively involved through single EHC assessment when;

The child or young person is blind or has a severe visual impairment that causes substantial and extensive barriers to learning and to the development of social relationships

**For a child to be eligible for a single EHC assessment, most of the following criteria would be likely to apply:**

- Inability to make progress within the curriculum (or, for the very young child, to develop within expected/predicted milestones) without the use of specialist materials and equipment
- Mobility problems impacting significantly on participation in school and classroom activities
- Difficulties in making and sustaining peer relationships leading to concerns about social isolation, the risk of bullying and growing frustration
- The visual impairment leads to significant difficulties in maintaining and sustaining concentration in the classroom and in completing work
- Emotional and/or behavioural difficulties including periods of withdrawal, disaffection and reluctance to attend school/setting;
- A need for adapted materials and a level of support beyond that which is available through an SEN support resourced plan.

### **Physical impairment**

Children with severe physical impairment are normally identified at pre-school stage and their needs met early. However, some severe deteriorating conditions are not necessarily evident in pre-school children and will require additional intervention and support. Condition such as:

- Duchenne Muscular Dystrophy
- other Muscular Dystrophy
- Friedrich's Ataxia
- Juvenile Arthritis

Physical impairment describes a continuum of difficulty. There will be some children, without significant learning difficulties, who have a marked physical impairment and require the environment or some occasional additional adult support in order to gain access to the curriculum. Special teaching strategies may be required occasionally which take into account the impact of the child's disability on his or her learning. It is expected that schools will provide for these children from the notional SEN budget. In some instances a medical condition will affect a child's performance and progress intermittently, whilst others will be affected on a continuous basis throughout their school career. A medical diagnosis or a disability does not necessarily imply special educational needs. It may not be necessary for a child or a young person with a particular diagnosis or medical condition to require any significant form of additional educational provision. It is the child's educational needs rather than a medical diagnosis that must be considered. Children will be considered for EHC single assessment if their diagnosed physical impairments is, or is likely to be, ongoing and/or permanent and it has long term and significant implications for access and learning affecting four or more of the following areas:

- perceptual skills
- fine motor skills
- mobility
- communication
- independence
- interpersonal skills
- curriculum access
- curriculum attainment
- emotional regulation
- social inclusion

**Evidence may also include:**

- difficulties with spoken and written comprehension, and with communicating thoughts and feelings to others
- specific examples of the physical impairment placing the child under stress, with associated withdrawn or frustrated behaviour

**Children who have significant physical impairment may require:**

- provision of specialist equipment
- modification of the site in order to improve access
- teaching strategies which take into account the impact of the child's physical impairment on his or her learning
- provision of specialist teaching programmes

**Sensory and Physical Development (Physical and Medical Difficulties): Specific Criteria**

Some children/young people who experience physical or medical difficulties have no difficulties in accessing the curriculum and learning effectively. Simply having a medical diagnosis, therefore, does not imply that a child/young person has special educational needs.

In order to ensure that the child/young person with the most complex physical needs maintains adequate progress, the LA may need to become more actively involved if:

The child or young person has a permanent, severe and/or complex physical disability or serious medical condition that causes substantial and extensive barriers to learning and to the development of social relationships.

**For a child to be eligible for a single EHC assessment it is likely that, most of the following criteria would apply:**

- Inability to make progress within the curriculum (or, for the very young child, to develop within expected/predicted milestones) without the extensive use of specialist materials, aids, equipment, furniture and/or adaptations to the physical environment of the school/setting
- Difficulties in making and sustaining peer relationships leading to concerns about social isolation, the risk of bullying and growing frustration
- Social, emotional and/or mental health difficulties including periods of withdrawal, disaffection and reluctance to attend school/setting
- Significant difficulties in maintaining and sustaining concentration in the classroom/setting leading to problems in completing work
- A need for adapted materials and a level of support beyond that expected of an SEN support resourced plan ;
- Attainment levels in most tasks and curriculum areas significantly depressed by irregular attendance brought about by the nature of the physical difficulty and/or the need for regular therapy.

## Notes

### 1. *Speech, Language and Communication*

Communication and Interaction scales were developed by working groups of education and health professionals. The association between scores gained and age related criteria for statutory assessment are included in the document.

### 2. *Cognition and learning*

### 3. *Social, Emotional Development*

The *Social, Emotional Development Scale* is adapted for use with individual children/young people from *Supporting School Improvement – emotional and behavioural development* (QCA 2001).

Instructions for completion of the scale are included in the document itself.

### 4. *Physical sensory medical*