Hugh Joicey CE Aided First School Special Educational Needs and Disability (SEND) Policy

School/setting beliefs and values around SEND

- To ensure that every child has an opportunity to participate in all aspects of school life, irrespective of race, gender or special need.
- To provide equal access to the national Curriculum and to plan for and provide a curriculum which is accessible to all the needs of the pupils.
- To raise staff awareness of the need to differentiate work effectively and to provide regular training, coaching and development for all staff.
- To establish good home school communication and maintain regular contact with parents, working in partnership to meet targets set for their child.
- To involve the pupils wherever possible in the planning and target setting of their programme of work.
- To monitor and review individual needs regularly and to maintain clear records of any intervention or action taken.
- To review needs and provision termly, allowing for budgeting, planning and resourcing SEN provision.
- To identify as early as possible those pupils with SEN and the nature of their needs.

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SEND Policy

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SEND Policy

Introduction

Our School, Hugh Joicey C of E First School, Ford, promotes high standards and all pupils, regardless of their particular needs, are offered inclusive teaching, which enables them to make the best possible progress and develop as valued members of our school community.

We offer a range of provision to support children with communication and interaction, cognition and learning difficulties, social, mental and health problems or sensory or physical needs. We have high expectations of all children and staff and we believe that it is the entitlement of all children to have the opportunity to achieve their full potential.

COMPLIANCE

This policy complies with the statutory requirement laid out in the SEND Code of Practice0-25 (July 2014) and has been written with reference to the following guidance and documents:

- Equality Act 201: advice for schools DfE Feb 2013
- SEND Code of Practice 0-25 (July2014)
- Schools SEN Information Report Regulations (2014)
- Stautory Guidance on Supporting pupils at school with medical conditions (April 2014)
- Safeguarding Policy
- Accessibility Plan
- Teachers Standards 2012

The main changes from the SEN Code of Practice (2001) are as follows:

- ✓ Now covers 0-25 year olds and includes guidance relating to disabled children and young people as well as those with SEN
- Focuses on the participation of parents, children and young people (CYP) in decision making
- ✓ Focuses on high aspirations and improving outcomes for children
- Gives guidance on joint planning and commissioning to ensure close cooperation between education, health and social care.
- ✓ Gives guidance on publishing Local Offer for support
- Gives guidance for education on a graduated approach to identifying and supporting CYP with single Special Educational Needs (SEN) Support - replacing School Action and School Action Plus
- ✓ For children with more complex needs a coordinated assessment process and the new 0-25 Education, Health and Care plan (EHC plan) replace statements and Learning Difficulty Assessments (LDAs)
- There is a greater focus on support that enables those with SEN to succeed in their education and make a successful transition to adulthood

Definition of 'SEND'

The Special Education and Disability Code of Practice: 0-25 years (2014) states:

- Xiii A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for
- him
 - or her.
- Xiv A child of compulsory school age or a young person has a learning difficulty or disability if he or she:
 - has a significantly greater difficulty in learning than the majority of others of the same age, or
 - has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions

The definition of disability in the Equality Act (2010) states children with '...a physical or mental impairment which has a long-term (more than 12 months) and substantial adverse effect on their ability to carry out normal day-to-day activities'. This includes children with sensory impairments as well as long-term health conditions such as asthma, diabetes, epilepsy and cancer.

It also states that schools must make reasonable adjustments, including the provision of auxiliary aids and services, to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers.

Broad Areas of Need (See Appendix 1)

There are four broad areas of need:

- Communication and Interaction
- Cognition and Learning
- Social, Emotional and Mental Health Difficulties
- Sensory and/or Physical Needs

When children are assessed and identified with SEND, we ensure that their needs are met and additional support is given where required, either within school or in collaboration with specialist external agencies. Children with SEN are taught and managed sensitively with a view to promoting their inclusion in all school activities as far as this can be reasonably arranged as well as promoting independence.

• All children have access to a challenging curriculum, which is broad, balanced, relevant and differentiated.

When additional specialist advice and support, beyond what is offered in school, is necessary, we contact the appropriate external agencies and work closely with them to

promote the child's well being and development. Our Local Offer provides further information about the agencies we work with.

Identification of 'SEN'

A key principle under the Code is that there should be no delay in making any necessary SEN provision in early years as delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. The Code states that:

"Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life".

Some children arrive at our school with identified SEN, in which case the SENCO will liaise with the previous school, nursery or setting to ensure there is a smooth transition and continuity of provision.

If, during a child's time at our school, teachers have concerns about pupil progress or attainment, parents will be contacted to discuss these concerns so they can share their views. There is a period of monitoring and review, including an analysis of the child's progress compared with peers, national data and expectations of progress. Following this, and in consultation with all relevant staff at school the child (if appropriate) and the child's parents, a child may be identified as having SEN and appropriate provision will be made.

If parents have any concerns about their child they should contact their class teacher in the first instance. Alternatively, they may make an appointment to see the SENCO or the Head teacher.

Many children may be subject to this period of monitoring and review for a short time, receiving time-limited and targeted interventions until they have progressed sufficiently to work at age-related expectations.

SEN Support

Where a child is identifies as having SEN we work in partnership with parents to establish the support the child needs. Once a child's needs have been discussed by relevant parties they are recorded and decisions made about the desired outcomes, including the expected progress and attainment for that child. The views and wishes of the child and their parents are central to these discussions.

An Intervention and Support Plan is written. This is aimed at removing barriers to learning and putting effective special provision in place that is implemented and reviewed termly at least termly. Parents are invited to discuss this plan; their child's progress and the support and targets. *Class teachers and the SENCo are available for further discussion by appointment through the school office.*

We adopt a graduated approach with four stages of action: assess, plan, do and review this means:

- Assess in identifying a child as needing SEN support, the early years practitioner/ class teacher, working with the SENCO, the child (if appropriate), and the child's parents, carries out an analysis of the child's needs. This assessment draws on the teacher's assessment and experience of the child, their previous progress and attainment, as well as any other available (rate of progress, attainment, and behaviour etc.). This assessment should be reviewed regularly. In some cases, outside professionals from health or social services may already be involved with the child. With the agreement of the parents, these professionals should liaise with the school to help inform the assessments.
- Plan Where it is decided to provide additional / SEN support, and having formally notified the parents, the practitioner / class teacher and the SENCO agree, in consultation with the parent, the desired outcomes. Interventions and/or support are put in place, the expected impact on progress, development or behaviour, and a clear date for review recorded. All teachers and support staff who work with the child are made aware of their needs, the outcomes sought, the support provided and any teaching strategies or approaches that are required .This should also be recorded on the school's information system.
- Do The early years practitioner/ class teacher remains responsible for working with the child on a daily basis. With support from the SENCO, they oversee the implementation of the interventions or programmes agreed as part of additional / SEN support. Where the interventions involve group or one-to-one teaching away from the main class teacher, they should still retain responsibility for the child. The SENCO should support the practitioner /class teacher in assessing the impact of the action taken, in problem solving and advising on the effective implementation of support.
- Review The effectiveness, impact and quality of the support / interventions is reviewed, in line with the agreed date, by the practitioner / class teacher and SENCO, taking into account the child's parents and the child's views. This should feedback into the analysis of the child's needs. They revise the support in light of the child's progress and development, deciding any changes to the support and outcomes. Parents should have clear information about the impact of the support and interventions provided, enabling them to be involved in planning next steps.

This cycle of action is revisited. At agreed times parents are engaged with the setting, contributing their insights to assessment and planning. Intended outcomes are shared and reviewed with the child (if appropriate) and parent as well as the school.

Our school's graduated approach to SEN

Level 1: Quality First Teaching (QFT)

Children receive inclusive quality first teaching (QFT) which may include the provision of differentiated classwork. Some children at this level may be on a monitoring list, their progress being carefully tracking and reviewing.

Level 2:

Additional School Intervention

Continued or increase concern may lead to children receiving additional, time-limited and targeted interventions to accelerate their progress to age-related expectations. These interventions may involve group or one-to-one teaching. The SENCo and class teachers will work closely with any support staff to plan and assess the impact of the support and interventions and to link them to classroom teaching. At this stage children from other agencies may be sought.

Level 3:

High Need

Where a child continues to make less than expected progress, despite interventions, they receive highly personalised interventions to accelerate their progress and enable them to achieve their potential. When appropriate, specialist outside agency support this. The SENCo and class teachers work with specialists to select effective teaching approaches, appropriate equipment, strategies and interventions in order to support the child's progress. If support is not impacting on the child's progress and this is still of significant concern, the school, after consultation with parents and other professionals, will request an Education, Health and Care Needs Assessment from the Local Authority. Parents can also request an EHC Needs Assessment.

Home School Partnership

• At our school we recognize that parents know their children best. Parents are always welcome to discuss their child and their views are respected and their concerns are taken into consideration at all stages of the SEN procedure.

• All parents and /or carers are invited to meet with their child's class teachers termly as well as receiving an annual report.

• Parents of children identified as having SEN are also invited to a further consultation once a term at which their child's progress, Intervention and Support Plan detailing the additional support, interventions and targets are discussed and agreed.

Pupil Views

• Children's views matter to us.

• All children are aware of their termly targets and are encouraged to self-review against these. As part of the review process, SEN pupils, are also asked about their views on their strengths, the areas in which they feel they would like to develop and the support they would like to receive.

• For their annual review children with Statements of SEN or EHCPs are asked more formally about their views, their learning, their targets and the support and interventions they are given by a member of the Inclusion Team.

Staff Development/ SENCo training:

The school is committed to providing INSET and staff development and SEN is a regular part of this. We monitor, review and develop all teachers and support staff's understanding of strategies to identify and support pupils with 'SEND'.

Conclusion:

Our intention is to provide the opportunity for all children, including those with SEND, to progress towards achieving their full potential. The partnership between home and school is highly valued and children's views are listened to.

Related policies

This policy should be read in conjuncture with other school policies particularly:

- Admissions Policy
- Behaviour Policy
- Health and Safety Policy
- Looked After Children Policy
- Complaints Policy

¹Reviewed September 2017

A copy of this policy was agreed by the Governing Body

Date Completed: 28 / 6 / 16.

Signed: _____J.Dalrymple_____ Date: 28.6.16

Signed: _____R. Wailes-Fairbairn_____ Date:

Appendix 1 Broad areas of need From Code of Practice (0-25) 2014

Communication and interaction

- . 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

- 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 difficulties

- 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.

Sensory and/or physical needs

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.