Education Funding Arrangements

(2023/24)

Top Up Funding for Pupils with Education, Health and Care Plans in Mainstream Schools

Consultation Document

April 2023

ENFIELD Council

Contents

1. **Introduction**

2. **Schools Funding**

3. **High Needs Block**
   - General perspective
   - Funding arrangements for pupils with Education, Health and Care Plans in mainstream schools

4. **RESPONSE FORMS**

   Weblink for response form: https://forms.office.com/e/gWHtLLJH6g.

1. Introduction

This document sets out proposals for any changes to funding arrangements for maintained schools, academies, free schools and early years providers from September 2023. For convenience, any references to schools relate to all maintained schools, academies and free schools, unless otherwise stated.

The proposals have been derived following a review of the local and national requirements, as prescribed by the Government. The proposals have been developed in consultation with the Education Resources Group and the Schools Forum.

Copies of the document are available on the Enfield Council Website and the Hub (internal portal) for Headteachers, Chairs of Governors, Chairs of Finance Sub-Committees of all Local Authority Maintained Schools, Academies, Trade Unions, Professional Associations, Diocesan Boards, other local authorities and other interested parties to view. If a hard copy of the document is required or you have any other queries, then please contact Sangeeta Brown at Sangeeta.brown@enfield.gov.uk.

All financial information contained in this document is at 2022/23 prices and is subject to the annual budgetary process. Financial illustrations are based on October 2022 pupil data and may therefore not be entirely representative of future calculations.

Copies of the 2022/23 Section 251 Budget Statement can be found on the Enfield Website at www.enfield.gov.uk. Copies of the Scheme for Financing Maintained Schools and the Finance Handbook are available on the Hub.

You are invited to comment on the proposals by using this weblink https://forms.office.com/e/gWHtLLJH6g to complete and return the response form. This should be completed as soon as possible and no later than Friday 9 June 2023.

If you have any queries or require any other information, then please contact Sangeeta.brown@enfield.gov.uk.

Return to – Contents page

2.2 School Funding

School funding is provided to local authorities[1] through Dedicated Schools Grant (DSG). The DSG is split into four discrete blocks. These are Schools, High Needs, Early Years and Central Services Schools blocks with each block covering different aspect of education.

(a) Schools Block: funds 5 – 15 years old in mainstream primary and secondary schools. This includes all community, voluntary aided, academies and free schools.

(b) High Needs Block (HNB) funds CYP[2] with SEND[3] from 0 to 25 years old, who have EHCP[4] and require additional support above what is ordinarily provided by schools or educational setting / institutions.

(c) Early Years Block (EYB) funds free nursery education for pupils from 2-4 years of age in schools and private, voluntary and independent (PVI) settings and child minders.

(d) Central Services Schools Block (CSSB) was introduced in 2018/19 to fund statutory services provided by the Local Authority to schools, academies and free schools.

For financial year 2023/24, the total DSG received by Enfield was £401.09m and when the additional money the Chancellor announced in his Autumn Statement was added the total increased to £414.273. This was an overall increase of 6.3%. Table 1 below details how the total was allocated across the four blocks.

Table 1: DSG 2023/24

Block	2023/23 Total	Change from 2022/23	
	£m	£m	%
Schools	309.432	15.433	5.2%
High Needs	75.928	7.937	11.7%
Early Years	26.483	1.090	4.3%
Central Services Schools	2.430	-0.056	-2.2%
TOTAL	**414.273**	**24.405**	**6.3%**

The remainder of this document will focus on the High Needs block and the proposals for funding top ups for pupils with EHCPs in mainstream schools.

[1] LAs – Local authorities
[2] CYP = Children and Young People
[3] SEND = Special Educational Needs and Disabilities
[4] EHCP = Education Health Care Plans

HIGH NEEDS BLOCK

3 INTRODUCTION

3.1 As stated earlier, High Needs block supports CYP with SEND aged between 0 to 25, who have either an EHCP or require additional support above what is ordinarily provided by schools or educational setting / institutions. In order to support the wide range of needs, Enfield has a model in place with different level of provision to support and enable CYP with SEND to achieve their outcomes.

Table 2 details the different level of provision in place to meet the varying needs of pupils with SEND and the cost of which is met from the HNB.

Table 2: Types of Provision to meeting varying level of need

Type of Provision	Management	Delivery	Funding Arrangements	
Mainstream Provision	Mainstream Schools		• Up to £6,000 by school* • Top up above £6,000 by LA[5]	EHCP
Intervention e.g. Nurture Groups	Dependent upon Commissioning arrangements			Lump sum
Mainstream ARP	Mainstream Schools		Agreed Place Funding	Place Plus **
Mainstream Special Unit	Mainstream Schools		Agreed Place Funding	Place Plus
Virtual School	Dependent upon Commissioning arrangements			Lump sum
Special ARP in mainstream	Special & Mainstream Schools		Agreed Place Funding	Place Plus
Satellite	Special Schools		Agreed Place Funding	Place Plus
Special - In-borough	Special Schools		Agreed Place Funding	Place Plus
Special – Independent	LA	Provider	Agreed Place Funding	EHCP requirements

* Mainstream schools: required to meet this support from their delegated budget. Local arrangements provide additional money to schools with above average number of pupils with EHCPs.

** Each place funded as follows: £6,000 if pupil on school roll or £10,000 base funding for each place and then an agreed amount of top up for the number of pupils on roll.

3.2 The proposal in this document will consider one element of the provision in place. This is the top up provided by the LA to mainstream schools for CYP with EHCP requiring support above £6,000.

4. Current Arrangements

4.1 The arrangements currently in place for funding the top up for CYP with an EHCP was not changed in line with the SEND Code of Practice and is based on an hourly funding model, which requires the school to support CYP with SEND up to £6,000. Where the support required is above £6,000, the school has to provide a provision map setting out spending over and above £6,000. As part of the assessment process, advice from professionals is sought and the allocation of provision is then re-calculated with the presumption it requires an EHCP.

4.1.1 For an EHCP to be considered, the determination is as follows;

£12.33 per hour x 12.5 hours x 39 weeks = more that £6,000

Where the determination indicates cost of support to be above £6,000, the issuing of an EHCP is considered and agreed by the SEN Panel.

If the determination is £6,000 or below, then the CYP does not meet the threshold and an EHCP would not be issued and the needs of the pupils must be supported by the school.

[5] LA – Local Authority

4.1.2 The proposed EHCP with an allocated top-up funding amount is sent to schools for a Formal 15-day consultation. The schools respond stating whether they can or cannot meet need.

4.1.3 Following feedback from schools that an hourly rate of £12.33 was not sufficient to pay for the cost of staff employed to support CYPs with an EHCP, it was agreed with the Schools Forum that the hourly rate and arrangements in place in determining the top up be reviewed.

4.1.4 In September 2020, an initial review took place and a funding calculator was piloted to determine if this could provide a more effective and appropriate methodology for allocating funding.

4.1.5 For any methodology used for funding purposes, the key principles are that it must be deemed to be fair, simple and reasonable.

4.1.6 The methodology was tested by piloting it with a number of schools and educational establishments. The findings from the pilot highlighted that the application of the Calculator to be subjective, which then resulted in inconsistencies, for example CYP with similar profile were allocated different hours of support. A further challenge was allocating the funding amount, which required clarity in provision identified in Section E and F of the plan and also the basic level of need that would be required for a specific amount of attuned support. If this information was not included clearly then it created tension between SEN Service and the school.

4.1.7 As a result of the findings, it was felt an alternative methodology was required because the Funding Calculator was not meeting the requirements of key principles of being fair, simple and reasonable.

5. Proposal

When developing an alternative methodology, the anticipated changes outlined in the Green Paper and also methodologies used by other LAs were initially assessed.

5.1 The Green Paper

5.1.1 Following the structural changes brought in by the DfE through the Children and Families Act 2014, the SEND Code of Practice 2015 and various subsequent Regulations, the DfE has undertaken a holistic review of the current practices in SEN across the country. The DfE have identified that the current system is not affordable.

5.1.2 Within the national context, the Government has made an increased level of investment in High Needs, with revenue funding increasing by more than 40% between the 2019/2020 and 2022-23 academic years. Yet, spending has year-on-year outstripped the funding made available. Two thirds of LAs have deficits in their Dedicated Schools Grant (DSG) budgets as a direct result of the High Needs cost pressures. By the end of the 2020-21 academic year, the national total deficit was over £1billion.

5.1.3 The DfE is proposing a total funding reform through its publication of its Green Paper, which has concluded its consultation phase. The DfE intends to introduce a new national framework of banding and price tariffs for funding, matched to the levels of need and type of education provision set out in the national standards. How this new proposed national banding system would be initiated has not been established.

5.1.4 The Green Paper reports (SEND Review: Right Support, Right Place, Right Time) that most LAs were utilising a banding system to fund EHCPs, which are built upon local consensus about the type and levels of available provision and associated levels of funding.

5.1.5 The proposed national funding bands will look to establish a more consistent basis for the funding of Provision. It is envisioned that a national funding band system will address concerns about inconsistency in current local arrangements, e.g., for LAs having to adopt EHCPs relating to CYP who move-in from other parts of the countries and schools who may

have CYP with EHCPs from several LAs and each having different structures and price tariffs assigned on the EHCPs.

5.1.6 Given the current potential changes being proposed on a national level, which are based on local arrangements, it makes sense that Enfield changes its current funding structure to mirror a banding system. This would ensure that when the process to assimilate to the national banding model is more seamless and administratively simpler to implement with the SEND partners and local schools.

5.2 Benchmarking

5.2.1 information from three neighbouring LAs was assessed and it was re consulted regarding their own top-up funding system.

5.2.2 It was found all three LAs:

(a) Used a banding model to fund schools, where the bands were progressive in nature and provision at lower bands arranged in addition to that which is described.

(b) Each was satisfied with their banding model. They felt It was less time consuming, gave schools flexibility and easier for their SEN Team to administer. Their view was that when they had used a funding model determined by hours supported, this became combative.

(c) By defining funding levels for each of the top-up banding levels, their financial forecasting and budget planning to be a little more predictable and reduced some of the administrative burden associated in managing variable hourly rates.

(d) Each of their schools considered the amount provided through the hourly rate / banding was not sufficient.

(e) The SEN Service was able to easily identify a change in trend due to movement of CYP from band to another.

5.3 Proposal

5.3.1 Banding System: Based on the information gathered, the main consideration was to have a methodology, which was deemed to be fair, transparent and simple. Whilst you could consider both the use of hourly rate and banding system to some degree could be perceived to fair, transparent and simple with both having their pros and cons.

On balance, it was considered that a change to a five tier banding system might bring Enfield's arrangement in closer alignment to the suggestions included in the Green Paper and also mirror practice with the other LAs from whom information was sought.

5.3.2 Hourly rate: The other element, which schools raised was the hourly rate current used was sufficient to meet the cost of support for CYP with SEND. In assessing this, it was considered when establishing the banding model, the best way forward was to use an average cost across the range of staff used for supporting CYP with SEND. Using this approach, it was deemed the hourly rate be increase from £12.33 to £15.50 to be in line with the rates used in other outer London authorities.

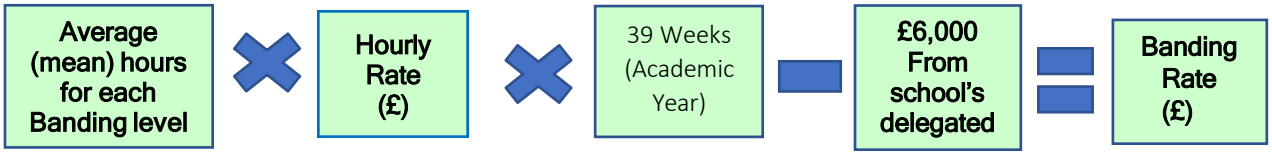
5.3.3 Process to inform the banding system: The five tier banding system will be informed by five levels ranging from A to E and will use the updated hourly rate of £15.50. There are two aspects to developing a banding system, firstly the differential of need to inform each level and then how funding would be allocated. Following a review of the current processes and data gathered from the benchmarking, it is suggested that:

(a) Need: The information gathered on need in the development of the Funding Calculator, together with other information such as special school and resource provision admissions guidance were reviewed and a similar guidance document was drafted to inform the varying levels of needs to be supported for pupils with SEND in mainstream schools. The aim was this document should as well as inform the funding arrangements, it should also strengthen the information available on the local offer for pupils with SEND in mainstream

schools. A copy of the SEND support for pupils with SEND in mainstream school has been sent to schools and is available through the SEND team.

(b) Allocation of funding: To inform the allocation of the funding, the national arrangements currently in place were used to confirm the overarching methodology to inform level of funding for the top up rate for each band, which would be allocated for an individual CYP with an EHCP in a mainstream school. Diagram 1 describes how the process to be used to determine the appropriate banding rate for top-up funding. In essence, this outlines formulaic calculation using the key variables, namely the identified/averaged hours of support, the hourly rate, the length of the academic year and the £6,000 of support ordinarily provided by the school.

Diagram 1: Process for calculating the banding rate for top-up funding



To ascertain the average hour to inform each band, the hours currently allocated for individual EHCPs were assessed and grouped equally into five ranges to reflect the proposed five tier banding system. The average mean value was calculated from range of hours identified for each band. Table 2 details the range of hours and subsequent mean value for each of the bands and the impact the change would have if funded using the current hourly rate of £12.33 and proposed hourly rate of £15.50.

Table 3: Details and impact of hours used for each band

Band	Range of hours of support	Mean value for range of hours	Per Pupil allocation based on £12.33 per hour	Per Pupil allocation based on £15.50 per hour	Difference in funding (£)
A	15 to 18.5	16.75	£2,054.57	£4,132	£2,077
B	18.6 to 22	20.25	£3,737.61	£6,243	£2,505
C	22.1 to 25.5	23.3	£5,204.27	£8,057.40	£2,853
D	25.6 to 29	27.3	£7,127.75	£8,896.90	£1,769
E	32.5	32.5	£9,628.27	£13,635.22	£4,007

6. Impact and comments received on the proposed the change

6.1 Comments: The proposals outlined above were discussed with the Education Resources Group and Schools Forum to gauge their views and comments. On the whole, the both groups supported the change, however they did raise a concern in relation to those pupils who may not reach the lower threshold (Band A) for support or conversely those pupils requiring support in excess of upper threshold (Band E). Both the suggestions were considered to assess how they may align with the proposed model and other arrangements in place. Therefore, it is proposed:

(a) Pupils requiring support below the lower threshold: In considering arrangements for support for pupils below the threshold, in the first instance, it may be that they would receive support from one of the early intervention services, such as Enfield Communication and Speech Service, Enfield Advisory Service for Autism, etc. that have been developed. Where a service providing an early intervention is not appropriate, it is proposed, the request for support is presented to the SEND Panel for consideration and approval.

(b) Pupils requiring support above the upper threshold: It is proposed, in line with other requests, where support is required above the upper threshold these requests are presented to the SEND Panel for consideration and approval. However, these

arrangements are reviewed on an annual basis to assess if they need to be continued to be supported at the higher level.

6.2 Impact: As will have been noted, the move to a banding system and increase in the hourly rate will lead to an increase in the funding when fully implemented. The cost of current EHCPs within the range of hours in each band was identified and compared with the cost of the proposed banding system. Table 3 summarises the financial impact.

Table 4: Summary of Financial Impact

Band	Range of hours of support	Mean value for range of hours	Per Pupil allocation based on £15.50 per hour	Total allocation based on £15.50 per hour	Amount of Increase in funding required (£)
0	Up to 14.9	Discretionary based on presenting need			
A	15 to 18.5	16.75	£4,132	£396,981	£125,201
B	18.6 to 22	20.25	£6,243	£3,925,063	£749,912
C	22.1 to 25.5	23.3	£8,057.40	£4,067,945	£394,651
D	25.6 to 29	27.3	£8,896.90	£339,851	£69,477
E	32.5	32.5	£13,635.22	£2,899,257	£646,608
F	Above 32.5	Discretionary based on presenting need			

6.3 Band Criteria: for each band a set of descriptors have been devised. The descriptors describe the support and resources that might be required for a pupil to have their identified needs in their EHCP to be addressed. Appendix A provides detail of each descriptor.

6.4 Implementation: If these proposals were implemented, then they will cost in the region of £2m. This change and will have a significant impact on the High Needs block which is already under considerable financial pressure. To manage the change and the pressure on the High Needs block, it is recommended that a phased approach is taken to implement the changes. The first phase would begin in September 2023 with new EHCPs that have been agreed and also those that have been reviewed as part of the annual review process or where a review of an EHCPs has been instigated due to changes in circumstance.

7. Recommendations

7.1 The Authority recognises that a change in the hourly rate is required and moving to a banding system may align local arrangements closer to those anticipated nationally as part of the wider changes associated with the SEND Reforms.

7.2 The Authority would like your views on:

Areas	QUESTION
Hourly Rate	Do you agree with the proposal to increase the hourly rate from £12.33 to £15.50?
Banding System	Do you agree with the proposal to: • Move a prescribed five tier banding system • Use an average mean to inform the hours to be funded in each band • Include as part of changes discretionary allocation of funding: – For on SEND support below Band A – For exceptional circumstances above Band E
Implementation	Do you agree with a phased and managed approach to implement the changes?
Any other comments	

To provide your views to these proposal, please use the following weblink **https://forms.office.com/e/gWHtLLJH6g** to complete the response form and submit at the latest by Friday 9 June 2023.

Appendix A

BANDING DESCRIPTORS

To ensure transparency and consistency across all education settings, a set of descriptors for each banding level is set out below. This describes the support and resources that might be required for a pupil to have their identified needs in their EHCP addressed.

The Banding systems sets out Five Levels of funding classified as Bands A to E.

Each Band describes incremental levels of learning and support needs for each pupil with an EHCP. It is envisaged that the lower bandings would be more commonly used, and the subsequent bands will relate to pupils with higher or more complex needs. So, for example, a pupil at Banding Descriptor A, would require less attuned support, some weekly group intervention, short-term bespoke interventions, and infrequent check in-times; whereas a pupil at Band E would require more attuned level of support, a highly differentiated curriculum, frequent sensory breaks, lots of repetition/consistency, small classes and periodic input from therapists.

To allocate the funding Banding, the SEN Panel made up of multi-agency professionals, will agree the Banding based on the criteria below and on the advice received from professionals. This Panel includes SENCO representation.

The funding band has been calculated to include the current costs of teaching assistants, additional support, specialist teachers, therapies and equipment. It does not consider the notional funding as this has already been applied prior to the EHCP being agreed.

Band A: Profile of the Pupil

Pupils at this level will primarily be working on modified curriculum tasks (by presentation, activity, pace and/or outcome changes to schemes of work, materials and alternative ways of recording) with some attuned support, some check in's as and when appropriate, some use of social stories.

They may require assessment and consultation advice accessed through referral to external specialist services. Individual or very small group intervention will be with a trained TA working with the young person under the guidance of the class teacher and SENCo.

Quality First Teaching (QFT), clearly demonstrating an inclusive ethos that supports learning and wellbeing of all pupils, flexibly adapting the core offer to meet the needs of all pupils.

This group of pupils are likely to require:

- assessment and advice accessed through referral to specialist services e.g., Speech and Language Therapy (SLT), Occupational Therapy, Physiotherapy or SPLD at times of perceived challenge (e.g., pupils who require transition support) or at when outcomes have been achieved and clinical needs still require further advice/support
- School level risk assessment to be considered
- An agreed Care Plan/ may need to be drawn up in conjunction with parents and/or the school nurse
- Teaching/support staff to access training opportunities to support outcomes

Cognition and Learning Descriptors:

1. Working below level of peers.
2. Can achieve with some differentiation and occasional support.
3. Attainment levels are lower than most peers even with additional support.
4. Concentration and attention difficulties, even with differentiation.
5. Presents with difficulties when measured using standardised tests across some areas.
6. Progress is at a delayed rate than age related peers.
7. Some levels of disorganisation.
8. Mild short-term memory difficulties and weak attention span.

9. Some difficulty retaining and applying information.
10. Some difficulty with abstract concepts.
11. Weak processing skills.
12. Up to 2 years behind peers.
13. Recommended strategies to be implemented by the teaching staff and integrated within the delivery of the curriculum.
14. Pupils may require access to assisted technology or other learning aids
15. Interventions to consist of small achievable steps with links established between new and prior learning with pre teaching, over learning and multisensory approaches as well as the generalisation of skills.
16. Younger children may need help with developing self-help skills, e.g., dressing, toileting, social skills, language skills, early concepts.
17. More time to be given for consolidation and practice of skills being taught.

Communication and Interaction Descriptors:

1. Moderate to severe language delay in expressive and/or receptive language at a low level, i.e., around 5th percentile.
2. Requires support for: organising expressive language and making meaning clear; difficulties in making themselves understood
3. Difficulties in engaging in the classroom/learning activities.
4. Delayed social communication and interaction.
5. Social vulnerability around recognising and communicating emotions; forming and maintaining friendships with peers.
6. Requires support for: social interaction/skills; transition/unstructured times.
7. May have some rigid thinking/behaviours, empathy, support for inclusion and managing anxiety.
8. May have repetitive activity.
9. Requires interventions to support the outcomes that are implemented by teaching staff and then integrated within the delivery of the curriculum.
10. Environmental Modifications to be considered, such as sitting at the front of the classroom.
11. School to access additional specialist advice at times of perceived challenge (e.g., transition); or, when outcomes have been achieved and clinical needs still require additional specialist advice/and or strategies.
12. For some pupils, support staff will model therapeutic input and some individualised programme to be implemented.

Social, Emotional and Mental Health Descriptors:

1. Unable to manage in unstructured situations or requires alternative activity at break/lunch times.
2. Daily interventions from an adult are required to sustain peer relationships.
3. Requires support for making and maintaining friendships.
4. May present with low self-esteem; disengagement, frustration; attention-seeking; behaviour regulation/ mediation. Occasional support needed for behaviour regulation.
5. Experiences anxiety in busy or unfamiliar environments/new situations. Occasionally tearful/withdrawn.
6. Setting of outcomes to be implemented by support staff and integrated within the delivery of the curriculum.
7. OT modifications of the school environment e.g., change in schedules for lunchtime as pupil does not respond well to busy environments and adapting activities in PE lessons.
8. For some pupils there is the need to provide an individualised programme (written advice plan) which is implemented within their educational context and as part of their daily routine, by teaching/support staff after modelling by a specialist services.
9. For some pupil there will be a need for a planned programme of personal and social development and/or a positive behaviour support plan with opportunities to access enhanced adult support to encourage positive behaviour choices. This should be developed in consultation with support services and involve enhanced adult contact/supervision, teaching or counselling.
10. For some pupil there will be a need for specific interventions and explicit teaching around social understanding.
11. In addition, some pupil may require specialist intervention to support their communication differences and emotional regulation needs to enhance good mental health and well-being.

12. Pupils encouraged to use an area of the school, staffed by appropriate staff, at unstructured times. This should offer opportunities for peer interaction or for individual reflection and quiet time.

Physical Difficulties and Sensory Impairment Descriptors:

1. Mild disability e.g., mild paralysis because of Cerebral Palsy, balance issues or slight stiffness.
2. Gross and fine motor delay/motor co-ordination, difficulty affecting function, may be in line with learning difficulty.
3. Requires support with taking medication.
4. Delays in self-help skills.
5. Visual impairment likely to present with visual acuity of 6/24 to 6/48 and /or have a mild field loss e.g., hemianopia.
6. Extra adult assistance may be required e.g., to help the child/young person in managing health and hygiene needs or in adapting materials and approaches.
7. Specific impairments, such as language, sensory (HI/MSI/VI) or motor impairment may require programmes recommended by therapists/specialist teachers
8. Regular support may be needed for the manipulation of tools/equipment, to ensure safety and access in P.E., or for catheterisation, etc.
9. Support to reinforce health professional programmes and health care plans.
10. The student may show signs of tiredness during the school day.
11. The medical condition may impact on the student's emotional wellbeing and social relationships.
12. Opportunities to access an area of the school, staffed by appropriate staff, at unstructured times. This should offer opportunities for peer interaction or for individual reflection and quiet time.
13. They will require generic and specialist access equipment and/or adapted learning materials to access the curriculum.
14. The pupil with vision impairment will require adult support to source, organise and access electronic texts and visual learning materials.
15. For the pupil with motor delay or difficulties individual physiotherapy advice on maximising gross motor skills and ensuring positioning is optimum for learning may need to be incorporated.
16. SCERTS/Sensory Support – Supporting a pupil to recognise when they might need to engage in activities that help them to manage their regulation. When at an early stage, the adult will need to support them and to help them develop co-regulation approaches i.e., to help them recognise their feelings and then to go to the objects/activities that help them manage their feelings.

Band B: Profile of the Pupil

Pupils requiring this level of support will continue to make slower progress than expected and experience a moderate level of difficulty(ies). Pupils at this level will have attainments well below expected levels in all or most areas of the curriculum, despite appropriate interventions being put in place.

Pupils have much greater difficulty than their peers in acquiring basic literacy and numeracy skills and in understanding concepts. They may also have associated speech and language delay, low self-esteem, low levels of concentration and underdeveloped social skills. Pupils within this band may be described as having moderate learning needs (MLD) or global development or generalised learning difficulties, potentially 3 years below age related expectation.

Quality First Teaching (QFT), clearly demonstrating an inclusive ethos that supports learning and wellbeing of all pupils, flexibly adapting the core offer to meet the needs of all pupils.

This group of pupils are likely to require:

- Presents with low cognitive range and weak processing skills which may require support with independence and organisation
- An agreed Care Plan/ may need to be drawn up in conjunction with parents and/or the school nurse
- Teaching/support staff to access training opportunities to support outcomes.
- For some pupils, there is the need to provide an individualised programme (written advice plan) which is implemented within their educational context and as part of their daily routine,

by teaching/support staff after modelling by a specialist service such as Occupational Therapy.

Cognition and Learning Descriptors:

1. Recommended strategies to be implemented by teaching staff and integrated within the delivery of the curriculum.
2. Learning objectives closely matched to the stage at which the pupil has reached and to continue to scaffold on what they already know, understand, can do i.e., set objectives that offer challenge and are ambitious to the pupil.
3. Low but persistent difficulties across all areas of the curriculum, independence and organisation.
4. Working well below level of peers (>3yrs below).
5. Increasing literacy and/or numeracy difficulties (>3yrs below ARE)
6. Mild to moderate short-term memory difficulties
7. Some difficulty retaining and applying information
8. Weak processing skills
9. Poor memory School level risk assessment to be considered

Communication and Interaction Descriptors:

1. Modifications of the learning environment (e.g., visual support and teacher talk) to be integrated into Quality First Teaching.
2. Teaching/support staff to access training opportunities to support outcomes.
3. School to access additional specialist advice at times of perceived challenge (e.g., transition); or when outcomes have been achieved and clinical needs still require some additional specialist advice/and or strategies.
4. For some pupils individualised programme to be implemented by teaching/support staff after modelling by SLT.
5. For some pupils SLT led intervention with modelling to teaching/support staff for implementation at other specified
6. Severe difficulties with understanding of spoken language typically, at 2nd % or lower on receptive language and using a range of simple grammatically correct structures.
7. Requires support with speech production which impact on intelligibility and literacy skills. Struggles to follow instructions/listen.
8. Sessions to develop communication, interaction and concentration skills.
9. Pre-teach key vocabulary, topic and technical keywords.
10. Language modelling and verbal expression from the child and adult
11. Motivating activities for communication
12. Conversational skills practice
13. Cued spelling support
14. Clicker technology or Docs Plus – reading/literacy/numeracy support

Social, Emotional and Mental Health Descriptors:

15. Anxiety intervention such as Think Good, Feel Good - Links between thoughts, feelings and behaviour and challenging negative thoughts.
16. Homework to practise skills learnt in sessions, adult who can remind pupils to use strategies at other times
17. Attuned support for attachment, relationship and regulation needs

1. Building peer relationships with adult facilitation.
2. For some pupils OT led modification of the environment with modelling to teaching/support staff for implementation at other specified times.
3. For some pupils there is the need to provide an individualised programme (written advice plan) which is implemented within their educational context and as part of their daily routine, by teaching/support staff after modelling by a specialist services.
4. The pupils will need a planned programme of personal/social development and/or positive behaviour plan, developed in consultation with specialist services. For some pupils, regular opportunities to access enhanced adult support to encourage positive behaviour choices.
5. CBT Intervention for Anxiety Requires access to a trained professional who has the capacity to work with the pupil over a long period of time. Requires pre- and post- assessment/measure of effectiveness

6. In addition, some pupils may require specialist support and intervention to address their communication differences and emotional regulation needs to maintain good mental health and well-being.
7. Supported interaction with peer and adults for part of the school day.
8. Emotional coaching, literacy intervention, emotional regulation intervention & skills e.g., zones of regulation that is part of a whole school intervention but personalised also for child.
9. Sensory use of language programme to enhance personal, emotional and social development from a communication viewpoint.
10. Social skills practice in a small group, using role play/social stories

Physical Difficulties and Sensory Impairment Descriptors:

11. A diagnosis of sensory impairment significantly impacts on access to the curriculum, communication and social interaction.
12. The use of hearing aids/low vision aids do not sufficiently supplement access to the curriculum, communication and social interaction.
13. The pupil with hearing impairment may be unable to adequately follow conversations/instructions through spoken language and will require adult support in some lessons. The child or young person with vision impairment may require adult support in practical lessons.
1. Sensory and sensory feedback breaks.
2. Physical exercise & activities to improve balance and coordination / fine motor / sensory needs / whole body e.g., Tiger Teams (if more frequent than for others or requires individual support to manage it in a group).
3. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly, Mealtime friendly school environment) or supportive equipment and it's use and governance for example the Safe Seating Plans, maintaining a "move and sit" cushion) to be integrated into Quality First Teaching.
4. For some children or young people OT led modification of the environment with modelling to teaching/support staff for implementation at other specified times
5. For the pupil with motor delay or difficulties individual physiotherapy advice on maximising gross motor skills and ensuring positioning is optimum for learning will need to be incorporated by school staff into the child's day.
6. Be highly reliant on adults for support in moving, positioning, personal care
7. Have some independent mobility e.g., assist with transfers, use a power chair.
8. Have a physical disability that creates communication difficulties.
9. Need support related to an additional learning need
10. Motor co-ordination difficulty with functional impact in many areas of daily living e.g., child may present with significant dyspraxia or motor co-ordination difficult
11. Support to implement mobility and health care plans.
12. Moderate hearing loss up to 35dB making access to learning tiring and impact on concentration. Unusual responses to sensory experiences which affects function at specific times and in specific situations
13. Strategies or support to promote self-help / independence skills

Band C: Profile of the Pupil

Pupils will have substantial and/or significant difficulty in participating in the curriculum because of identified needs. Some pupils at this band will present with co-morbid conditions that are interrelated that will have an impact on them acquiring skills in the broader curriculum.

Pupils may have attainments well below expected levels in some or all areas of the curriculum, as identified in the assess, plan, do and review cycle. They may have much greater difficulty than their peers in acquiring basic literacy and numeracy skills and will have greater difficulties than their peers in understanding concepts.

They may also have associated speech and language delay disorder, low self-esteem, low levels of concentration and underdeveloped social skills.

Pupils within this Band may be described as having moderate learning needs (MLD) or global development delay or generalised learning difficulties. The assess, plan, do and review cycle has been utilised with limited progress, only maintained through attuned support.

Where severe/profound sensory impairment is the primary need, the core curriculum should be delivered by qualified Teachers of the Deaf/VI/MSI in specifically resourced provision

This group of pupils are likely to require:

- Support to begin tasks
- Chunking
- Support with communicating ideas,
- Support with formulating narratives/self-expression,
- Regular movement breaks
- Outcomes as recommended by specialist services to be implemented by teaching staff and integrated within the delivery of the curriculum
- In-class support to develop attention and focusing skills to help develop language
- Social stories
- In-class provision to support executive functioning skills
- Generalised support to develop social skills
- Regular home liaison to continue the support at home
- Assistance around independent skills
- Orientation around the setting
- Unable to use a range of grammatically correct simple structures.
- Difficulties caused have impact across all areas of the curriculum.
- Speech is impaired and understanding is at a simple level.
- Pupil may use language and some augmentative means to support their communication e.g., signs and symbols
- Limited functional and social communication skills which impacts on the ability to engage in the classroom/learning activities.
- May struggle understanding social and physical risks and their own vulnerability. May also have difficulty managing and sustaining relationships with others as well as some rigid or obsessional behaviours
- A diagnosed severe/profound sensory impairment significantly impacts on access to the curriculum, communication, and social interaction.
- The use of hearing aids/low vision aids do not sufficiently supplement access to the curriculum, communication, and social interaction.
- The pupil with hearing impairment may be unable to adequately follow conversations/instructions through spoken language and will require adult/CSW support in lessons.

Cognition and Learning Descriptors:

1. Differentiation of the curriculum to take account of specific learning needs e.g., teach using an integrated multi-sensory approach throughout the lesson.
2. Access to assisted technology or other learning aids.
3. Activities to improve fine motor development (including handwriting) through additional small groups in specific groups
4. Attention and listening activities
5. Language for communication intervention, e.g., Language for Thinking, Developing inference and deduction skills
6. Task are broken down into simple steps with visual support.
7. Access to a low arousal environment.
8. Link learning to the pupils' everyday experience – using real-life examples.
9. Use scaffolding – to prompt, guide support using a wide range of strategies to support.
10. Use concrete objects and movement to engage pupils.
11. Individual and small group support in class.
12. Opportunities to have a medium level of attuned support on a regular basis to learning strategies to improve independence in class.

13. May require access to Specialist Teacher.
14. Precision Teaching.
15. Regular assess, plan, do and review of targets and access to additional specialist advice if outcomes are not met.
16. Medium level Personal Care support.
17. Targeted learning, pre-teaching and overlearning.

Communication and Interaction Descriptors:

1. For some pupils individualised programme to be implemented by teaching/support staff after modelling by SLT.
2. For some pupils highly individualised adaptation of the learning environment.
3. Differentiation of the language used in the curriculum.
4. Language and communication interventions – Language for Thinking/Developing inference and deduction skills.
5. Language and modelling and verbal expression from the pupil and adult.
6. Literacy intervention personalised to the child.
7. Scribe or alternative methods for writing.
8. Support with organising homework.
9. Now and Next board.
10. Integrated visual support into the curriculum as well as the learning environment.
11. Persistent difficulties with understanding of spoken language which required augmentative support.

Social, Emotional and Mental Health Descriptors:

1. Anxiety intervention such as Think Good, Feel Good - Links between thoughts, feelings and behaviour and challenging negative thoughts.
2. Homework to practise skills learnt in sessions, adult who can remind pupils to use strategies at other times.
3. Attachment-aware/trauma-informed practice approach.
4. Requiring help to calm down in a quiet area of the classroom when frustrated.
5. SCERTS/ Sensory support - Supporting a pupil to recognise when they might need to engage in activities that help them to manage their regulation. When at an early stage, the adult will need to support them and to help them develop co-regulation approaches, i.e., to help them recognise their feelings and then to go to the objects/ activities that help them manage their feelings.
6. Social interaction activities/skills (Coaching, meditation, problem solving.
7. Social Use of Language Programme to enhance personal, emotional and social development from a communication viewpoint.
8. Sessions to develop communication, interaction and concentration skills.
9. Therapeutic interventions
10. Wellbeing intervention to reduce anxiety e.g., CBT approaches, mindfulness and mediation activities.
11. Modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly, Positive Sensory Profile) to be integrated into Quality First Teaching.
12. For some pupils, Occupational Therapy led modification of the environment with modelling of a supportive advice plan (written advice plan) to teaching/support staff for implementation at other specified times.
13. The pupil will need a planning programme of personal/social development and/or a positive behaviour plan developed in consultation with specialist services. For some pupils, medium level of attuned support to encourage positive behaviour choices.
14. In addition, some pupils will require specialist support and intervention to address their persistent and significant communication differences and emotional regulation needs to support.

Physical Difficulties and Sensory Impairment Descriptors:

1. Specialist teaching (QTVI/QTMSI/ToD) may be required for core subjects.
2. The pupil with vision impairment may need access to alternative formats such as Braille.
3. The pupil with hearing impairment may need access to a total communication approach to teaching including BSL/SSE.

4. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly) or supportive equipment and it's use and governance for example the Safe Seating Plans, maintaining a "move and sit" cushion) to be integrated into Quality First Teaching.
5. For some pupils, Occupational Therapy led modification of the environment with modelling of a supportive advice plan (written advice plan) to teaching/support staff for implementation at other specified times.
6. Support to implement mobility and health care plans.
7. Guidance and support to develop self-help and independence skills.

Band D: Profile of the Pupil

It is expected that pupils requiring this level of support will experience a combination of substantial or severe difficulty in the areas of communication, cognitive development, behaviour, emotional well-being, physical difficulty and/or sensory impairment. They may also have associated difficulties in mobility and acquisition of self-help skills.

Their attainments may be previous key stage for much of their school careers. All pupils requiring this level of support will have medium to high levels of attuned support. Pupils within this band are sometimes described as pupils with moderate to high learning need.

This group of pupils are likely to require:

- In class support to develop executive functioning
- In class support to develop focus and attention skills for language development
- Support in chunking
- Communicating ideas
- Formulating narratives
- Supporting ideas
- Medium – high attuned level of support
- An adult to keep them in mind – meet and greet
- Check in during key times of the day e.g., periods of transition
- Generalised key social skills practices in small groups
- Emotional regulation support
- Scribe or alternative augmentative communication methods
- Regular small group interventions
- The pupil will require intensive teaching approaches using specialist teaching programmes.
- Tasks and activities will need to be very finely graded for language and communication skills, independence training, thinking skills, behaviour for learning, problem solving and personal and social relations in an emotionally supportive setting
- There will be a need for a highly personalised curriculum to ensure that it is relevant to the child or young person's interests and needs.
- Specific advice will be required for supported access to work related learning/work experience placement.
- Where sensory impairment (HI/MSI/VI) is not the primary need but is present as a more complex disability, assessment and advice should be sought from the Sensory Teachers Team
- Where severe/profound sensory impairment is a significant need, participation to the curriculum should be reviewed.
- Significantly limited social communication that causes anxiety, limits ability to manage emotions.
- Unable to reflect on the consequences of their behaviours on others. Lack of awareness of personal and social safety of self and other for most of the time.
- Significant difficulty making and maintaining friendships.
- Significant difficulty making and maintaining friendships

Cognition and Learning Descriptors:

1. High level of differentiation of the curriculum presented in small steps so that learning objectives closely matched to the stage at which the pupil has reached and build on what they already know, understand can do i.e., set objectives that offer just enough challenge to move on, but are still achievable.

2. Daily targeted individual and small group support with peers of similar ability to work on academic skills.
3. A precision teaching approach may be helpful to reinforce skills.
4. Curriculum will focus on communication, social skills life skills and personalisation.
5. Access to assisted technology or other learning aids.
6. Access to low arousal nurturing environment with tasks that are short in duration to support her attention and concentration.
7. Link learning to the children and young people's everyday experience – using real-life examples.
8. Use scaffolding – having an adult working alongside at first, who gradually withdraws as confidence grows.
9. Use concrete objects and movement to engage children and young people wherever possible.
10. Opportunities to practice the skills outside of school will be important to reinforce new learning and facilitate progress. Use very simple language with visual prompts when giving instructions.
11. Individual adult support to mediate learning and to support pupil to apply newly learnt strategies to everyday learning.
12. Teaching/support staff must have training and experience of working with pupil with this level of learning.

Communication and Interaction Descriptors:

1. Assessment & advice by SLT at times of perceived challenge (such as transition) or when outcomes are achieved.
2. Interventions to support the outcomes to be implemented by teaching staff and integrated within the delivery in all areas of the curriculum.
3. Specialist Communication intervention strategies integrated into Quality First Teaching and throughout the school day.
4. Highly individualised learning environment to include appropriate methods of alternative and augmentative communication.
5. For some pupils, an individualised SLT programme (with modelling by the SLT if required) to be implemented by teaching/support staff.
6. Language skill is a significant impact on ability to sustain learning.
7. Games and teaching methods that can interrupt the child from their rigid, isolated approach to learning, e.g., Attention Autism
8. Support needed for: social interaction/skills; transition; unstructured times; rigid thinking/behaviours; empathy; understanding others; inclusion; anxiety; repetitive actions, turn taking games/activities
9. Precision teaching
10. Opportunities for pre-teaching of key language and literacy skills
11. Use of calm spaces
12. Joint attention activities

Social, Emotional and Mental Health Descriptors:

1. Anxiety intervention such as Think Good, Feel Good - Links between thoughts, feelings and behaviour and challenging negative thoughts.
2. Homework to practise skills learnt in sessions, adult who can remind pupils to use strategies at other times.
3. Attachment-aware/trauma-informed practice approach.
4. Requiring help to calm down in a quiet area of the classroom when frustrated.
5. SCERTS/ Sensory support - Supporting a pupil to recognise when they might need to engage in activities that help them to manage their regulation. When at an early stage, the adult will need to support them and to help them develop co-regulation approaches, i.e., to help them recognise their feelings and then to go to the objects/ activities that help them manage their feelings.
6. Social interaction activities/skills (Coaching, meditation, problem solving.
7. Social Use of Language Programme to enhance personal, emotional and social development from a communication viewpoint.
8. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly, Mealtime friendly school environment, Positive Sensory Profile) to be integrated into Quality First Teaching.

9. The pupil will need a planned programme or personal/social development and/or positive behaviour support plans. This will be developed where necessary in consultation with LA or other specialist services and involve supported interaction with peers and adults in groups of reduced size throughout the school day.
10. School organisation will take account of the child or young person's behavioural needs including deploying staff resources and using systems to help pupils manage their behaviour.
11. Teaching and support to develop social interaction with peers and adults.
12. Opportunities to access an area of the school designated for social skills, staffed by appropriate adults, at unstructured times. This should offer opportunities for peer interaction or for individual reflect or quiet time.
13. Explicit teaching using programmes to develop social skills, self-regulation and emotional resilience.
14. Inclusion with constant teaching of skills, routines and conflict resolution

Physical Difficulties and Sensory Impairment Descriptors:

1. Checking and assistance to help with health and self-care needs.
2. Learning material and approaches adapted for language/sensory or motor impairment.
3. An agreed Care Plan may need to be drawn up in conjunction with parents and appropriate medical professionals. Medical needs may be changeable and there will be an increased risk of deterioration in wellbeing.
4. Be reliant on adults for moving, positioning, personal care including eating and drinking e.g., require hoisting. Have a physical disability that creates severe communication difficulties. Be communication aid users e.g., 4Talk4 Need adult support to access learning and social interaction.
5. High levels of attuned support required to access learning and social interactions.
6. Pupils may have severe medical needs that creates a barrier to learning e.g., unstable epilepsy.
7. Sensory and /or Physical Needs: (including pupils with visual impairment, hearing impairment, physical disability and medical needs).
8. Implementation of health-related programmes on a daily basis.
9. Support for mobility and healthcare plans.
10. Guidance and support to develop self-help and independence skills.
11. Support will be needed to ensure safety and/or curriculum access for large parts of the school day.
12. A room available when pupils become emotional dysregulated, where they can calm down.
13. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly, Mealtime friendly school environment) or supportive equipment and it's use and governance for example the Safe Seating Plans, maintaining a "move and sit" cushion) to be integrated into Quality First Teaching.

Band E: Profile of the Pupil

Pupils requiring support at this level will have substantial and/or severe difficulties in areas of: Cognition and Learning; Communication and Interaction; Social, Emotional, Mental Health; Physical Difficulties and/or Sensory Impairment; which significantly impacts in all areas of the curriculum, including managing in the school environment.

Their attainments may be within the previous Key Stages. All pupils requiring this level of support will need highly attuned levels of adult support.

Trauma informed approaches will also be needed to support the emotional development of the pupil and support them with attachment and positive relationship development. These pupils will need access and support to mobilise around the classroom and school environment. Students will require interaction and brokering of relationships, support to help self-regulate and highly personalised and proactive/reactive support.

They may need a key adult to support them with their social, emotional development. Some pupils may require high levels of all forms of personal care (e.g., eating, hoisting, toileting). Pupils in this category are likely to have sensory needs, such as specific diets, sensory equipment or clothing (e.g., weighted jackets). Access at times to areas of a school with a low sensory arousal.

Some pupils in this group may have:

- Severe Learning Difficulties (SLD).
- Complex Global Development Delay
- Severe/Profound Sensory Impairment (HI/MSI/VI) which may severely impact on other areas of development for a pupil with complex needs.
- Severely delayed communication and interaction skills
- Will struggle to form meaningful social relationships
- High levels and frequency of emotional dysregulation
- Where severe/ profound sensory impairment is a significant need, access to the curriculum should be monitored by qualified Teachers of the Deaf/VI/MSI.
- Experiences significant, complex persistent and enduring learning difficulties.
- Very slow rate of progress despite a high level of specialist intervention from a range of professionals.
- Significantly low cognitive range.
- Weak attention span
- Significant difficulty retaining and applying information even with explicit overlearning. Significantly weak processing
- Profoundly limited language skills
- Social communication that prevents from engaging with learning on daily basis.
- Non-verbal and very limited or no understanding of language.
- Significant disorder or delay.
- Literacy development is significantly affected.
- Literacy development is extremely affected.
- Persistently anxious or frustrated, leading to frequent, and unpredictable, some challenging behaviours.
- Challenging and unpredictable behaviour despite a consistent and well-planned programme of support.
- Unpredictable presentation with difficulty to contain after an incident significant difficulty in making and maintaining healthy friendships.
- Mild to moderate sensory impairment (HI/MSI/VI) will have an impact on other areas of development for a child or young person with complex needs but may not be the main presenting disability.
- Risk assessment and management plan advised by a doctor/consultant that requires specialised training for school staff. Complex physical/medical conditions that need addressing through a number of agencies

Cognition and Learning Descriptors:

1. A predictable and structured routine within a reduced group size with highly attuned adult support.
2. Provision of a significantly differentiated curriculum that is still challenging the pupil in line with their learning needs
3. Higher level of attuned support to develop the learning profile.
4. High level of differentiation of the curriculum presented in finely graded steps so that learning objectives closely matched to the stage at which the pupil has reached and build on what they already know, understand can do i.e. set objectives that offer just enough challenge to move on, but are still achievable.
5. Daily targeted individual and small group support.
6. A precision teaching approach may help to reinforce skills.
7. Curriculum will focus on communication, social skills and life skills
8. Access to assisted technology or other learning aids
9. Access to low arousal nurturing environment with tasks that are short in duration to support their attention and concentration.
10. Link learning to the pupil's everyday experience – using real-life examples.
11. Use scaffolding – having an adult working alongside at first, who gradually withdraws as confidence grows.

12. Use concrete objects and movement to engage pupil wherever possible.
13. Opportunities to practice the skills outside of school will be important to reinforce new learning and facilitate progress.
14. Use of plain language with visual prompts when giving instructions
15. Teaching environment with emphasis on small steps of progress.
16. Activities need to be highly motivating, regarding and relate to his interests.
17. Opportunities for shared interaction with attuned adult support.
18. Structured adult led tasks with a clear visual structure to support learning and to help understanding of the purpose of and steps within the activity.
19. Individual adult support to mediate learning and to support pupils to apply newly learnt strategies to everyday learning.

Communication and Interaction Descriptors:

1. Assessment & advice by SLT at times of perceived challenge (such as transition) or when outcomes are achieved.
2. Communication challenges may result in regular high levels of distress and anxiety (at least 3 times per week) which may lead to 'acting out' behaviour or 'withdrawn behaviour'.
3. Interventions to support the outcomes to be implemented by teaching staff and integrated within the delivery in all areas of the curriculum.
4. Specialist Communication intervention strategies integrated into Quality First Teaching and throughout the school day.
5. Highly individualised learning environment to include appropriate methods of alternative and augmentative communication.
6. Specialised SLT interventions delivered by all teaching/support staff.
7. Opportunities for quiet small group spaces in the school, supervised by appropriate staff, at unstructured times. This should provide opportunities for peer interaction or for individual reflection and quiet time.
8. Explicit teaching to develop social skills, self-regulation and emotional resilience. These are likely to require specialist training or to be delivered by specialists and may need to be on an individual basis.
9. Teaching in a reduced group size and access specialist adult support throughout the school day and after school activities.

Social, Emotional and Mental Health Descriptors:

1. Anxiety intervention such as Think Good, Feel Good - Links between thoughts, feelings and behaviour and challenging negative thoughts.
2. Homework to practise skills learnt in sessions, adult who can remind pupils to use strategies at other times.
3. Attachment-aware/trauma-informed practice approach.
4. Requiring help to calm down in a quiet area of the classroom when frustrated.
5. SCERTS/ Sensory support - Supporting a pupil to recognise when they might need to engage in activities that help them to manage their regulation. When at an early stage, the adult will need to support them and to help them develop co-regulation approaches, i.e., to help them recognise their feelings and then to go to the objects/ activities that help them manage their feelings.
6. Social interaction activities/skills (Coaching, meditation, problem solving.
7. Social Use of Language Programme to enhance personal, emotional and social development from a communication viewpoint.
8. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly, Mealtime friendly school environment, Positive Sensory Profile) to be integrated into Quality First Teaching.
9. A personalised curriculum with an emphasis on personal and social development, possibly including positive behaviour plans.
10. School staff will take account of the pupils' behavioural needs, including deploying staff resources and using systems to help the pupil reduce their anxiety and find techniques to help support behavioural change.
11. Multi agency input, such as statutory Early Help/Intervention may be required to support school and family systems to help the individual in addition to individually targeted work.
12. A detailed risk assessment will be required

13. For pupils with social, emotional and mental health difficulties, the curriculum must prioritise behaviour for learning and promoting emotional well-being.
14. Constant support to interact appropriately with others.
15. Planned programme of personal and social development with highly predictable routine.
16. Frequent specialist and external support

Physical Difficulties and Sensory Impairment:

1. An agreed Care Plan may need to be drawn up in conjunction with parents and/or the school nurse.
2. Care to help with medical/nursing needs, personal care, manual handling or mobility by at least one person.
3. OT modifications of the learning environment (for example Coordination friendly, Sensory Motor friendly) or supportive equipment and it's use and governance for example the Safe Seating Plans, maintaining a "move and sit" cushion) to be integrated into Quality First Teaching.
4. For some pupils, Occupational Therapy led modification of the environment with modelling of a supportive advice plan (written advice plan) to teaching/support staff for implementation at other specified times.
5. The pupil with sensory impairment and complex needs will need a programme of intervention devised and monitored by a specialist Sensory Teacher (QTMSI/QTVI/ToD) and delivered by support staff.
6. Pupil may require implementation of health-related programmes daily.
7. Moving and Handling plans, Care plan and Mobility programmes may need to be in place.
8. Curriculum to be adapted to be multi-sensory with augmented learning.
9. Strategies to maintain fine and gross motor skills.
10. Assistance with self-help and independence skills
11. Support to mobilise around the classroom and school
12. Space for any therapeutic input
13. Modified curriculum that includes chunking, scaffolding, precision teaching

Specialist Schools – Maintained/Independent – Outside of the Remit of the Banding System

Pupils who would be eligible to be placed in a specialist setting will not be considered within the remit of the Banding system. Pupils at this level will have profound and complex permanent needs. These are likely to arise from a combination of medical, primary care, learning, and communication, behavioural, physical and sensory needs (including multi-sensory impairment).

Pupils will also have exceptional needs in the areas of behaviour, physical, medical or communication needs, which requires experienced and suitably trained staff. Where medical or physical needs are a particular concern, constant or when a high-level of monitoring and medical intervention will be required throughout the day. They are also likely to require full time adult support to access all learning. Positive behaviour plans will require targeted and planned support from more than one adult for most of the day. Where communication is a concern, the pupil will rely on a trained adult to access a communication tool to communicate basic needs. Pupils may be described as having Severe Learning Difficulties (SLD). They are at a very early stage of development and need people around them who can help them to explore and interpret the world. Their attainments are likely to remain in the engagement range.

- Have difficulties with communication such as: limited non-verbal communication skills, difficulties with verbal comprehension, understanding abstract language and non-literal language, restricted, unusual use of language
- Have difficulties with social interaction such as: not initiating or avoiding contact with others, inappropriate social and emotional behaviour
- Have difficulties with thinking and behaviour such as: restricted imagination and inflexible thinking such as repetitive rather than imaginative play, fixed or limited areas of interest, difficulty coping with unplanned change

The pupils in ARPs and Units will require:

- A personalised learning programme at engagement level.
- Self-help, independence, early communications approaches, personal safety and personal care (toileting and dressing) will be a significant focus of the curriculum.

- The Curriculum will be engaging, stimulating and ambitious, based on the needs of the young person.
- The curriculum will focus on exercising choice, and sensory based and experiential learning.
- Real life learning including access to work related experiences with a high level of planning and adult support full time.
- Supervised independent learning with structured visual support
- Augmentative and Alternative Communication aides to support spoken language
- Have greater difficulty regulating emotions and/or associated mental health difficulties e.g., anxiety
- Significant support for fine and gross skills development
- Pupils access specialist support through teaching and therapies.