

Cognition and Learning	
<p>Band 0</p> <p>Universal</p>	<p><i>Needs are well met without any additional support</i></p> <ul style="list-style-type: none"> • The young person is generally working within or marginally below age-related expectations. • Some difficulties with learning may include some misconceptions and/or taking longer to understand new concepts. • Difficulties may be specific to one aspect of learning.
<p>Band 1</p> <p>Universal Plus</p>	<p><i>The young person is working below the expected rate of attainment; up to 2 years behind national expectations, in some curriculum areas despite Quality First Teaching.</i></p> <ul style="list-style-type: none"> • The young person has continuing low level difficulties in the acquisition/use of reading, spelling, writing, handwriting and numeracy skills. • The young person may experience some difficulties with the pace of curriculum delivery.
<p>Band 2</p> <p>Targeted</p>	<p><i>There is evidence of a widening gap between their performance and age-related expectations.</i></p> <ul style="list-style-type: none"> • Attainment is more than two years behind national expectations despite targeted differentiation. • The young person has ongoing difficulties in the acquisition and use of literacy/numeracy skills. • The young person may have very specific difficulties (dyslexia, dyspraxia) affecting the acquisition of reading, writing, spelling or number skills which do not fit his/her general pattern of learning and performance. • The young person has problems with understanding ideas, concepts and logical thought which limits access to the curriculum. • The young person may have other difficulties for example, working memory, organisation and independence. • The young person may also have difficulties with sequencing, visual and/or auditory perception, co-ordination, concentration or phonological or short-term memory. • Progress is slow and ongoing personalised additional support, planned by the subject teacher, is required to ensure progress and/or access to the curriculum. • The young person requires ongoing one-to-one or small group support to acquire skills in order to access the curriculum.
<p>Band 3</p> <p>Targeted Plus</p>	<ul style="list-style-type: none"> • The young person has considerable ongoing and persistent difficulties in the acquisition of literacy/numeracy skills. • Attainment is more than three years below age-related expectations despite differentiated learning opportunities and concentrated support. • Progress is very limited, despite evidence of appropriate and sustained support. • The young person will have difficulties with the pace of appropriately differentiated curriculum delivery and needs help to process information and how to organise their time and work. • The young person may be feeling and/or showing signs of frustration or have low self-esteem. • The young person's difficulties may exist alongside other identified needs and conditions, for example, speech and language, dyspraxia, autism. • There is likely to be problems with concept development, logical thought and problem solving. • The young person may have poor learning habits and concentration difficulties, be poorly motivated and resistant to learning. • The young person is aware of their difficulties, lacks confidence and has low self-esteem.

Cognition and Learning

<p>Band 4 Specialist</p>	<p><i>The young person will experience substantial, complex, persistent and enduring learning difficulties.</i></p> <ul style="list-style-type: none">• Learning Difficulties or Global Developmental Delay Significant difficulties across all areas of the curriculum. The young person's attainment will be significantly below age related expectations and typically 50% below.• The young person is working well below the average range for attainment and skills compared to age-related expectations.• The young person may have a working memory deficit, phonological or processing difficulty which impacts upon all areas of their life.• The young person will have ongoing difficulties with independent curriculum access despite additional support tailored to their needs.• The young person may have continuing emotional difficulties stemming from their learning difficulties.• The young person may have long-term cognitive difficulties associated with moderate learning difficulties and/or global developmental delay. The young person will need ongoing access to a developmentally appropriate curriculum.• The young person can make small steps of progress within smaller or specialised groups with evidence-based interventions but needs constant to regular help in larger classes or activities.
<p>Band 5 Specialist Plus</p>	<p><i>The young person has profound, complex and life-long multiple learning disabilities which affects every area of their development and functioning requiring lifelong support.</i></p> <ul style="list-style-type: none">• The young person's ability to participate in an adapted school curriculum is facilitated through high levels of one-to-one adult support.• The young person may have very limited or no understanding of formal language.• The young person may have limited expressive communication but may be able to communicate basic needs using signs and gestures and/or some key words.• The young person may have additional health needs requiring medical intervention.• Progress is in very small steps in-line with developmental age despite high levels of adult support. <p>Severe Learning Difficulties Very slow rate of progress despite a high level of specialist intervention.</p> <p>Profound and Multiple or Learning Difficulties Functioning at early developmental stages with a range of other disabilities, for example, medical conditions, sensory impairments.</p>

Speech and Language and Communication Needs

<p>Band 0</p> <p>Universal</p>	<p><u>Needs are well met without any additional support</u></p> <ul style="list-style-type: none"> • The young person has SLCN which can be managed well in a mainstream class with appropriate differentiation of tasks and modified teaching style, in line with Quality First Teaching. • The young person would not have direct involvement from a speech and language therapist (SALT). • Teaching staff would monitor language and literacy skills and be alert to: <ul style="list-style-type: none"> · aspects of speech development, · expressive language skills and, · understanding of language. • Impact on access to the curriculum and barriers to peer interaction should be identified early. • The young person may demonstrate some social communication difficulties, for example, conversational skills and joining teams or groups. • Some young people with SLCN may still fall within Universal as their language abilities are unaffected (splashy's' sound). This may include young people with motor difficulties affecting speech.
<p>Band 1</p> <p>Universal Plus</p>	<p><i>The young person has some identified SLCN and the school will discuss the needs of the young person with the link SALT and parents.</i></p> <ul style="list-style-type: none"> • Identified SLCN could include: <ul style="list-style-type: none"> · a still developing speech sound system; · difficulties understanding • Spoken or written language and following instructions; <ul style="list-style-type: none"> · poor vocabulary development; · listening and attention difficulties. • These difficulties may present in the context of weak attention skills, a weak working memory and difficulties with planning and organising in relation to problem solving. • The young person may have ongoing difficulties with reading comprehension, understanding mathematical language and concepts, getting ideas for writing and using appropriate sentence structures. • The young person may need some scaffolding and sentence starters for a written task. • The young person with SLCN may be working below age-related expectations and may be developing coping strategies such as copying work/following peers for prompts. • There may be concerns regarding the development of social skills and peer relationships.
<p>Band 2</p> <p>Targeted</p>	<p><i>The young person has identified SLCN which require additional specific provision.</i></p> <ul style="list-style-type: none"> • The young person is known/has been referred to the Speech and Language Therapy Service and may have targets set. (Individualised targets that require short periods of individual 1:1 adult support.) • The young person has communication skills that require additional alternative communication strategies to allow them to access the (differentiated) curriculum. • With the appropriate support in place, the young person can access a differentiated mainstream curriculum and is making progress. • Text-based comprehension and inferential skills may still be developing. • In expressive language, the young person may have word finding difficulties following a disordered pattern and difficulties constructing a sentence. • Continuing difficulties could include: <ul style="list-style-type: none"> · dysfluency and poor intelligibility, · weak phonological development, · vocabulary difficulties, · poor understanding. • The young person may have difficulties using language to problem solve and may find it hard to ask for help, seek clarification. • These difficulties may present in the context of weak attention skills, a weak working memory and difficulties with planning and organising in relation to problem solving. • There may be on-going or emerging concerns with social interaction and peer relationships.

Speech and Language and Communication Needs	
<p>Band 3 Targeted Plus</p>	<ul style="list-style-type: none"> • The young person may have insufficient language to tell an adult about a problem they encounter. • The young person has significant SLCN which impacts on access to, and progress in, the curriculum, requiring long term involvement of educational and non-educational professionals. • Targets provided by a Speech and Language Therapist will be embedded into daily practice. • The young person has persistent and significant difficulties in comprehension and expression of language and possibly some complexity of need in relation to social communication. • Speech sound development may be following a typical pattern or delayed. • There is likely to be an impact on developing literacy skills, which will impede access to many curriculum areas without high levels of visual support, differentiation and reasonable adjustments. • The young person may show evidence of weak executive functioning skills (attention, working memory, planning and organisation) in addition to their weak structural language development.
<p>Band 4 Specialist</p>	<p><i>The young person will experience significant, complex, persistent and enduring difficulties with SLCN.</i></p> <ul style="list-style-type: none"> • The young person presents with a range of difficulties and an accumulation of complex and layered needs, which could include mental health, relationships, behavioural, physical, medical, sensory, social communication and cognitive needs. • It is likely that the young person will have additional learning needs and possible other co-existing needs. • The complexity of need is likely to be high. • The young person may make small steps of progress or 'plateau' for extended periods of time. • Specialist support, with high levels of adaptation, will be required to facilitate access to the curriculum and ensure social inclusion. • The young person may show evidence of weak executive functioning skills (attention, working memory, planning and organisation) in addition to their weak structural and functional language skills. • Ongoing specialist input may be required from a Speech and Language Therapist. • The young person is likely to follow programmes at KS4 towards alternative accreditation (for example, ASDAN, entry level).
<p>Band 5 Specialist Plus</p>	<p><i>The young person has a severe language and/or speech delay/disorder and may be reliant on assistive and augmentative systems to enable them to make their needs and wishes known.</i></p> <ul style="list-style-type: none"> • Needs are likely to be long term. • The difficulties have a significant impact on access to the curriculum. • The young person's language skills are more affected than other areas of attainment. • If the young person has a speech disorder, they may be an AAC (Alternative and Augmentative Communication) user. • The young person may have significant or moderate speech delay and show significant difficulties with social communication and weak auditory skills. • The young person will show evidence of weak executive functioning skills (attention, working memory, planning and organisation) in addition to their weak structural and functional language skills. • Ongoing specialist input is likely to be required from a Speech and Language Therapist unless speech and language is in line with the Young Person's developmental age.

Communication (social) and Autism	
Band 0	<u>Needs are well met without any additional support</u>
Universal	<ul style="list-style-type: none"> The young person can interact appropriately with peers and adults and takes part in social activities.
Band 1	<p><i>The young person may have social communication difficulties which impact on the ability to engage in learning activities.</i></p> <ul style="list-style-type: none"> The young person may find social situations confusing. The young person is interested in peer friendships but requires guidance about appropriate responses and how to form relationships. The young person may lack understanding and knowledge of social behaviour. The young person can learn in subject lessons and on the same tasks as peers with some additional support. The young person may have literal use and interpretation of speech. The young person may be developing understanding of their difficulty and can manage their levels of occasional mild anxiety and sensory needs (dependent upon cognitive ability). The young person has communication difficulties which can lead to anxiety or distress. The young person may show signs of distress when faced with new people, places, events or unplanned changes of routine. The young person may have difficulties recognizing and communicating emotions but, in some circumstances, can describe basic feelings and communicate needs. The young person can respond to planned strategies. The young person may have difficulties managing change and transitions. The young person may have rigid and inflexible thought patterns which interfere with engagement in learning and the wider school environment. The young person may have routines and rituals that interfere with engagement and learning. They may struggle to be flexible and adapt to unexpected change. The young person may experience difficulties/unusual responses to sensory experiences, for example, can be easily distracted, upset by noise/touch/light. The young person may use language that provokes negative reactions.
Universal Plus	
Band 2	<p><i>The young person has limited functional and social communication skills which impacts on their ability to engage in the classroom/learning activities.</i></p> <ul style="list-style-type: none"> There is limited development of conversational skills. The young person has difficulties managing and sustaining relationships with others. The young person tends to isolate themselves socially and prefers to follow their own interests. The young person has difficulties understanding social and physical risks and their own vulnerability. The young person may have rigid, repetitive or obsessional behaviours which make it difficult to cope with unexpected changes and events. The young person may have difficulties expressing emotions which may lead to challenging behaviours. Difficulties may present as manipulative behaviour (may relate to high anxiety and a need to control events). The young person experiences sensitivity to some sensory experiences. The young person may seek repetitive actions or routines.
Targeted	

Communication (social) and Autism

<p>Band 3</p> <p>Targeted Plus</p>	<ul style="list-style-type: none"> • The young person has limited social communication and ability to manage emotions. • The young person has difficulties in understanding and using non-verbal communication, and in understanding social 'rules' (including how to maintain a conversation). • The young person has regular high levels of distress and anxiety which may lead to challenging behaviour or withdrawn behaviour. • The young person has rigid or obsessional behaviours that make it difficult to cope with unexpected changes and events. • The young person's difficulties impact upon their ability to sustain learning. • Difficulties that present as manipulative behaviour that seeks to control the circumstances and challenge authority of staff. • The young person finds it difficult to predict and process and this leads to demand avoidance and controlling behaviours that often challenge authority. • The young person exhibits lack of awareness of personal and social safety of self and others for most of the time. • The young person frequently seeks sensory input to satisfy basic needs which may cause risk to safety of self. • The young person has very strong interests that can sometimes take precedence over instructions. • The young person may have difficulty in switching tasks, maintaining sustained attention in directed tasks, and in organising/ conceptualising future activity. • The young person is unable to reflect on the consequences of their behaviours on others. • The young person may have issues relating to health and personal care issues. • The young person can show signs of distress when faced with new people, places, events or when unsure what is going to happen.
<p>Band 4</p> <p>Specialist</p>	<p><i>The young person's impaired social development, rigidity of behaviour and thought and communications are enduring, consistently impeding his/her learning and leading to severe difficulties in functioning.</i></p> <ul style="list-style-type: none"> • Revision of the differentiated classroom provision for the young person's education has not resulted in the expected progress towards achieving learning, pastoral and social interaction targets. • In respect of receptive and expressive communication and social interaction, evidence of the young person's need for a systematic programme to develop his/her understanding of verbal and non-verbal communication. • There is evidence of considerable difficulties persisting for the young person as a result of his/her inflexibility and/or intrusive obsessional thoughts. • Evidence of a high priority having to be given to the management of the young person's behaviour in the planning of most school and learning activities and the organisation of his/her learning environment. • High levels of anxiety are beginning to impact negatively on attendance.
<p>Band 5</p> <p>Specialist Plus</p>	<ul style="list-style-type: none"> • The young person has profoundly limited functional social communication skills which lead to daily, persistently high levels of distress and anxiety. This impacts on all areas of learning and social activity including play and lunch times. • The young person has unpredictable, sudden outbursts of challenging behaviour that jeopardizes the health and safety of self and others. • The young person has frequent ritualistic and obsessional behaviours. • The young person is unable to recognise personal, social, environmental and physical risks. • Ongoing specialist input will be required.

Social, Emotional and Mental Health

<p>Band 0</p> <p>Universal</p>	<ul style="list-style-type: none"> • The young person displays difficulties with listening and maintaining attention. • The young person, when overwhelmed, may flit between activities and need some short-term individual adult encouragement to participate and re-engage in tasks. • The young person may demonstrate a difficulty in coping when interacting with other children. For example, struggles to share, takes things from others, and takes control. • The young person may not be able to engage in some learning tasks and demonstrates off-task behaviours. • The young person may experience difficulties settling into school or following routines. • The young person may have some difficulties separating from parent/carers. • If overwhelmed they may struggle to respond to encouragement from familiar adults. • The young person has difficulty with emotional regulation. • The young person may become overwhelmed which can result in a perceived inability to accept adult direction/boundaries. • The young person may struggle to accept boundaries and may challenge these. • The young person may struggle to recognise behaviours and feelings of others. • The young person may occasionally withdraw and remain on the fringes of activities. • The young person may have difficulties with social interactions. • The young person may occasionally exhibit signs of frustration. • The young person may occasionally demonstrate unregulated or unpredictable behaviours.
<p>Band 1</p> <p>Universal Plus</p>	<ul style="list-style-type: none"> • The young person may have difficulties settling into specific lessons despite adult support. • The young person may show emotional distress, which subsides with adult support. • The young person when overwhelmed may demonstrate unpredictable or unexpected behaviour which may result in the need for adult support. • The young person may demonstrate difficulties in waiting and turn-taking. • The young person may require adult encouragement to remain engaged in activities. • The young person may have ongoing coping difficulties despite differentiated learning opportunities and pastoral support. • The young person may find it difficult to remain focussed despite structured and time limited tasks. • The young person may find it difficult to organise themselves. • There may be concerns regarding the young person's attendance. • The young person may struggle to acknowledge or accept responsibility. • The young person may find it hard to take risks with their learning. • The young person when overwhelmed may appear socially isolated or alone and risks developing low self-esteem and confidence. • The young person may become overwhelmed and unable to communicate their feelings. • The young person may demonstrate difficulties with interpersonal communication and/or relationships. • The young person may be unwilling to acknowledge or accept responsibility for his/her own actions.

Social, Emotional and Mental Health

Band 2

Targeted

- The young person becomes overwhelmed often, requiring adult intervention and support.
- There may be concerns regarding, social and emotional health, that require outside agency support.
- The young person when overwhelmed may withdraw or self-isolate.
- The young person demonstrates difficulties focussing and engaging in learning activities.
- The young person may have developed coping or masking strategies.
- The young person may refuse to go to school on a regular basis.
- The young person may regularly disengage with classroom/school environment which creates a barrier to learning.
- The young person may struggle to accept praise and encouragement.
- The young person needs adult support on a regular basis to enable participation in learning.
- The young person needs immediate responses from adults and struggles to understand delays when their needs are not immediately met.
- The young person finds participating difficult and sometimes leading to refusal to participate in activities.
- The young person finds negotiation and problem-solving frustrating leading to disengagement.
- The young person may have developed coping strategies, including self-harm, running out of school, refusing to go to lessons, climbing on property/furniture.
- The young person when overwhelmed may respond using inappropriate/sexualised language.
- The young person may display unpredictable behaviour which affect relationships.
- The young person finds it difficult to repair damaged relationships.
- The young person needs an individualised programme to support engagement in learning.
- The young person may have had negative experiences that are having an impact on their ability to focus on learning and school.
- There are concerns regarding social and emotional health that requires outside agency support.
- The young person finds negotiation and problem-solving frustrating leading to dysregulation/anger.
- The young person is not able to start and complete tasks independently.
- The young person struggles to self-regulate their emotions and has difficulty managing frustrations and demands.
- The young person may have developed coping strategies, including self-harm, substance misuse, running out of school, climbing at height on property/furniture.
- The young person when overwhelmed may respond using inappropriate/sexualised language or behaviour and may become dysregulated.
- The young person may regularly appear to ignore or refuse to follow adult direction within a school environment

Social, Emotional and Mental Health

Band 3

Targeted Plus

- The young person demonstrates distressed behaviours that disrupt learning staff may find challenging.
- The young person experiences daily significant and persistent difficulties with regulating emotions.
- The young person struggles to engage with tasks, which could be perceived as demand avoidance or uncooperative behaviour intermittently throughout the school day, for example, work avoidance/refusal, defiance.
- The young person demonstrates low levels of emotional resilience when faced with challenge or perceived criticism.
- The young person develops perceived harmful coping strategies, for example, leaving classroom/school site on a regular basis.
- The young person demonstrates socially inappropriate or sexualised behaviour/comments.
- There are increasing concerns around mental health for example, irrational fears, high levels of anxiety, hyper-vigilance, low mood, self-harm.
- The young person's behaviours can create a barrier to learning for example, disengaging, destroying own or others' work, work avoidance, concentration very limited, impulsivity.
- The young person demonstrates significant social interaction difficulties with peers and adults for example, lack of empathy, victim or perpetrator of bullying.
- The young person may be unwilling to accept adult support.
- The young person is unable to manage unstructured times.
- The young person often challenges rules and shows persistent resistance to adult support or demands.
- The young person may demonstrate withdrawn or timid behaviours.
- The young person has attentional difficulties and cannot sustain attention to task.
- The young person is off-task during learning activities and is unable to engage without frequent adult intervention/support.
- The young person may have self-esteem issues affecting relationships and/or behaviour patterns ('acting in' or 'acting out').
- The young person shows a lack of trust in adults.
- The young person may be involved in regular incidents and use physical responses to express emotions.
- The young person may have a limited understanding of the consequences of their behaviour on others.
- There are concerns around the young person's attendance at school.
- The child is at risk of fixed term exclusions, withdrawal from lessons, isolation or becoming socially vulnerable.

Social, Emotional and Mental Health

<p>Band 4 Specialist</p>	<ul style="list-style-type: none"> • The young person demonstrates highly distressed behaviours on a daily basis, including difficulties related to mental health, relationships, learning, sensory needs and communication. • The young person has difficulties regulating emotions and there is evidence of emotional distress and/or unpredictable outbursts. • The young person finds it difficult to understand the consequences of their choices. • The young person demonstrates perceived harmful coping strategies, for example, self-harm, running out of the setting, self-isolation. • The young person demonstrates socially inappropriate or sexualised behaviour. • They may demonstrate a lack of emotional resilience when faced with challenge or criticism, for example, flight/fright/freeze response. • The young person demonstrates high levels of anxiety affecting daily functioning. • The young person's behaviours create a significant barrier to learning, for example, destroying own and others' work/displays, needs relating to attention control, impulsivity. • The young person experiences deteriorating/anti-social relationships with peers and adults for example, lack of empathy, remorse or outbursts. • The young person may be the victim or perpetrator of bullying. • The young person may become socially vulnerable and isolated and be at risk of permanent exclusion. • The young person has frequent, high anxiety levels and is totally withdrawn over a period of time. • The young person may have had negative early life experiences, rendering them vulnerable and requiring a high level of multi-agency involvement over a sustained period. • The young person is unable to sustain play-based activities without significant, consistent adult attention and intervention. • The young person may have experienced trauma which impacts upon their mental health. • The young person requires intensive support to enable to engage with learning. • The young person needs a safe designated area within the context of the setting which allows them to undertake individualised activities and make progress with their learning. • There is daily documented evidence of significant risk of distress, harm or actual harm to others or self. • There is frequent documented evidence of damage to property. • The young person is involved in incidents where intense emotional distress and or impulsive behaviour can put themselves or others at risk.
<p>Band 5 Specialist Plus</p>	<ul style="list-style-type: none"> • The young person's behaviour is unpredictable and at times dangerous, with intense episodes of emotional and/or challenging behaviour. • Multi-agency involvement would be expected, including the involvement of health and social care professionals. • The young person is extremely vulnerable and there may be safeguarding issues to consider due to acute levels of mental health concerns and increased risk-taking behaviours or 'sabotage' of situations/placements. • The young person may demonstrate self-harm, eating disorders and/or suicidal thoughts. • The young person is at risk of exclusion or becoming a non-attender. • The young person may demonstrate distress which can be extreme and unpredictable. • The young person exhibits hyper-vigilance, extreme behaviours that damage relationships with peers and adults, increasing the extent of social isolation. • The young person appears withdrawn and does not attempt to form relationships with peers. • The young person experiences daily and persistent difficulties resulting from mental health problems, which manifest as problems of mood such as anxiety or depression. • The young person demonstrates regular and sustained aggression or threat of aggression towards others or self. • The young person struggles to cope with small changes to routines, which often lead to significant distress. • The young person demonstrates a lack of empathy and respect for the needs and rights, feelings and emotions of others, including inappropriate emotional responses and actions in a given situation. • The young person is involved in persistent and continuous incidents which may require physical intervention.

Physical and Neurological Impairment (PNI)

Band 0	<i>Needs are well met without any additional support</i>
Universal	<ul style="list-style-type: none">• The young person has minor physical needs but can be independent with some minor adaptations to the environment.• The young person may participate in most/all activities but at a slower pace than peers or show signs of increasing fatigue during the school day.• The young person may need additional time to process language and respond to instructions.• The young person may have trouble sustaining attention due to neurological impairment.
Band 1	<i>The young person has physical needs but can be independent with some minor adaptations to the environment.</i>
Universal Plus	<ul style="list-style-type: none">• The young person may have a defined physical or medical condition that may be subject to regular medical/intervention.• The young person's needs may impact on their self-esteem, mental health and social relationships.• The young person may have some difficulties in aspects of environmental access, and use specialist equipment such as, manual wheelchair, access to handrails, specialist walkers, crutches.• The young person may have some gross motor difficulties and/or spatial orientation. Some adaptations will be needed to facilitate movement around the site, for example stairs.• The young person will make progress within the curriculum, but at lower levels than may be expected from performance on tasks where physical difficulty has less impact.• The young person will be independent in most activities, but may work at a slower pace than peers or show signs of increasing fatigue during the school day.• The young person may use specialist aids relating to their disability, for example, wrist splint, ankle foot orthotics (AFOs).• The young person may utilise limited, low tech specialist equipment to enhance their curriculum access.• The young person's visible disability may lead them to being socially isolated and vulnerable to bullying.• The young person may exhibit fatigue, lack of concentration or motivation due to their condition. This may have an impact upon performance and progress.• The young person may require limited adult assistance with practical aspects of the curriculum, for example D and T, PE, art, and/or or self-help skills or personal care.• The young person may have difficulties recalling information from previous lessons and following more than two or three-step instructions.

Physical and Neurological Impairment (PNI)

Band 2

The young person's medical condition may necessitate supervision or support for medication needs at specific times.

Targeted

- Progress within the curriculum may be affected by the condition or medication.
- The young person may participate in most/all activities but at a slower pace than peers or show signs of increasing fatigue during the school day.
- The young person may have a lack of sensory feedback which leads to difficulties with daily sensory inputs, for example, difficulties with writing or drawing.
- Irregular sleeping patterns may impact on the young person's ability to access learning.
- The young person has fine and/or gross motor difficulties which impede access and resulting difficulty independently carrying out tasks that would be expected for the age.
- The young person's physical condition may be variable from day to day. This impacts on their ability to record their work and attend to tasks. Overall participation may be reduced.
- The young person will have a defined physical or medical condition that may be subject to regular medical/intervention.
- The young person will have needs that may impact on their self-esteem, mental health and social relationships.
- The young person may have some difficulties in aspects of environmental access, and use specialist equipment such as, manual wheelchair, access to handrails, specialist walkers, crutches.
- The young person may need timetable adjustments and subject lessons on the ground floor.
- The young person may require some adult assistance to move with safety around the environment.
- The young person may exhibit fatigue, lack of concentration or motivation due to their condition that is having a marked effect on progress.
- The young person may have difficulties following subject teaching, sustaining attention, processing language and working with sequential steps.
- The young person may show increasing signs of frustration with tasks they can't do due to physical limitations.
- The young person may take longer to complete tasks and alternative exam arrangements may be needed.

Physical and Neurological Impairment (PNI)

Band 3

The young person may have severe difficulties with the ability to function independently in the school environment and in their everyday life.

**Targeted
Plus**

- The young person has physical difficulties that require varied and extensive specialist equipment and regular support.
- The young person may require daily therapy and medical intervention to crucially avoid pressure damage and maintain joint integrity.
- The young person may require discreet supervision and support by an adult or peer to navigate an appropriately adapted school building and carrying resources and personal equipment.
- The young person may be a dependent wheelchair user (electric or manual) and/or walking aid user with a severe physical difficulty.
- The young person may have very restricted movement and hoisting/position changes required regularly during the day. Personal care may cause embarrassment (especially for teenage boys) resulting in refusal to drink and use the bathroom.
- The young person may need the use of physical aids, for example a standing frame or specialist seating/high back stools.
- If not wheelchair dependent the young person will have a severe physical difficulty.
- The young person may have mobility that is moderately impaired and experiences difficulties on stairs and with spatial orientation and whose movements are unsteady in crowded areas and on uneven ground.
- The young person may have minimal fine motor skills and/or have restricted purposeful hand movement. The young person needs access to alternative means of recording work, including a scribe, ICT, Dictaphone, voice activated speech VOCA (communication aid) and exam access arrangements.
- The young person has severe difficulties with the ability to function independently in the school environment and in their everyday life. There may be a considerable and widening attainment gap.
- The young person may have a chronic condition, potential degenerative condition, newly acquired condition or has special educational needs in addition to physical difficulties.
- With appropriate interventions the young person may be able to progress in subjects but may need regular differentiated tasks.
- The young person's physical condition may be variable from day to day, depending on a number of factors, for example, weather and temperature, muscular pain, sleep, fatigue and/or medication.
- The young person's physical condition may be variable from day to day due to associated medical conditions, for example seizures.
- The young person's speech production may be affected by breath control or impaired for physical reasons and finds it difficult to make themselves understood or finds it too tiring to repeat themselves.
- The young person's physical disability/medical needs could co-exist with other secondary learning needs but are still within the range for his/her year group.
- The young person may have a range of learning difficulties which are directly related to neurological impairment and not poor attitudes to learning. These are likely to include; processing, working memory, attention.
- The young person may feel frustrated and show signs of distress and work avoidance due to fear of failure.
- The young person may mask feelings of anxiety and distress.
- There may be regression of previously acquired skills, for example, a deteriorating condition or childhood dementia.
- There may be underlying social and emotional difficulties due to feelings of being different and having a disability.
- The young person will need adjustments to exam arrangements, including rest breaks as appropriate to condition.
- The young person may feel socially isolated.

Physical and Neurological Impairment (PNI)

<p>Band 4</p> <p>Specialist</p>	<p><i>The young person has profound long-term progressive/regressive condition(s).</i></p> <ul style="list-style-type: none">• The young person has limited ability to contribute to self-care therefore is highly reliant on adult support for moving, positioning, personal care including drinking/eating.• The young person has a severe physical disability that creates substantial communication difficulties requiring specialist communication aids and assistive curriculum devices.• The young person requires constant monitoring and some complex medical interventions, without which their condition may seriously deteriorate.• The young person may have an awareness of the deteriorating nature of the condition and longer-term outlook which impacts upon mental health and motivation.• The young person may have an awareness of physical differences between themselves and peers and limitations in what they can access.• The young person has a severe physical disability resulting in full-time wheelchair user, access to a hoist and changing plinth standing frame and other highly specialist equipment within the mainstream environment to access learning.• The young person has severe fine motor difficulties which impacts upon independent recording and access to a range of practical resources.• The young person will need significantly altered exam access arrangements and/or alternative key stage 4 curriculum, for example ASDAN, functional skills accredited courses.• The young person may experience increased levels of stress and anxiety and be unable to inhibit behavioural responses due to neurological impairment (for example, acquired brain injury from removal of tumour(s), road traffic accident, and childhood stroke).• Physical and/or neurological impairment may result in increased absence due to medical appointments and procedures.• A reduced timetable with rest breaks may be needed but not reduced hours in school (unless specifically recommended as a short-term interim strategy following surgery).
<p>Band 5</p> <p>Specialist Plus</p>	<p><i>The young person has severe difficulties with fine and gross motor movement.</i></p> <ul style="list-style-type: none">• The young person is unable to independently manage transfers and personal care including toileting, eating and drinking, for example, cutting up food, wiping own nose.• The young person is fully reliant on adults for support in moving, positioning, personal care.• The young person may have some control for example, assistance with transfers by pressing the hoist controls, drive a powered wheelchair using feet or hands.• The young person may have a physical disability that creates communication difficulties.• The young person may have communication aids which are mostly self-managing or can be appreciated and understood by other children and staff familiar with the aids, for example eye gaze technology, eye pointing, signing and total communication.• The young person may be able to complete simple fine motor tasks with additional time compared to peers, for example moving an object, swiping a touch screen for communication.• The young person will be unable to do tasks that require hand dexterity and strength, for example, twist/turn objects.• The young person may have a skill level that fluctuates significantly or deteriorates during the day, for example verbal speech becomes less coherent when tired.• The young person's physical disability/medical needs could co-exist with other secondary needs which may require a developmentally appropriate curriculum.• The young person may have profound and multiple learning difficulties (PMLD) and follow a multisensory curriculum.• The young person may experience social isolation and find communication with peers difficult due to PNI and may find it difficult with persons not familiar with their particular idiosyncrasies.

Hearing Impairment (HI)

Band 0	<i>Needs are well met without any additional support</i>
Universal	<ul style="list-style-type: none"> • A young person who has a re-occurring conductive hearing loss with no hearing aids. • This hearing loss may be associated with middle ear infections, glue ear, temporary perforated eardrums. • The subject teacher should be aware of the following: <ul style="list-style-type: none"> · The young person may seem to lack concentration, · find it difficult to listen and attend to speech, particularly in background noise, · seem dependent on cues from others in the class before engaging in an activity, · not hear clearly in a group situation, · give the impression of being able to listen when s/he wants to, have a vocabulary deficit or delayed language, · be experiencing difficulties with reading.
Band 1	<i>A young person who has an audiological diagnosis of permanent:</i>
Universal Plus	<ul style="list-style-type: none"> · <i>conductive hearing loss.</i> · <i>mild sensory-neural hearing loss</i> · <i>unilateral hearing loss.</i> <ul style="list-style-type: none"> • They may be prescribed hearing aids by an audiologist. • The young person is generally making expected progress in all areas of the curriculum. • The subject teacher should be aware of the following: <ul style="list-style-type: none"> · The young person may seem to lack concentration, · find it difficult to listen and attend to speech, particularly in background noise, · seem dependent on cues from others in the class before engaging in an activity, · not hear clearly in a group situation, · give the impression of being able to listen when s/he wants to, have a vocabulary deficit or delayed language, · be experiencing difficulties with reading.
Band 2	<i>A young person who has an audiological diagnosis of permanent:</i>
Targeted	<ul style="list-style-type: none"> · <i>conductive hearing loss.</i> · <i>mild sensory-neural hearing loss</i> · <i>unilateral hearing loss</i> · <i>unilateral auditory neuropathy</i> · <i>moderate to profound bilateral sensory-neural hearing loss.</i> <ul style="list-style-type: none"> • They will be prescribed with hearing aids or wear auditory implants (called BAHAs or cochlear implants). • The young person is not making expected progress in some areas of the curriculum as a result of their deafness. • The young person will be having difficulties accessing the curriculum, particularly the range of subject teachers. • The young person may find it more difficult to learn new topic-based vocabulary. • The young person may find it difficult to communicate in group work. • The young person may be affected by issues of 'being different' which can impact on their social and emotional wellbeing and self-esteem. • The young person may have difficulties taking part in social situations and following conversations, for example, during breaks and lunch time. • Other needs are likely to have been diagnosed.

Hearing Impairment (HI)

<p>Band 3</p> <p>Targeted Plus</p>	<p><i>A young person who has an audiological diagnosis of permanent:</i></p> <ul style="list-style-type: none"> • moderate to profound bilateral sensory-neural hearing loss • bilateral auditory neuropathy. <ul style="list-style-type: none"> • The young person will be prescribed with hearing aids or wear auditory implants (called BAHAs or cochlear implants) from one year old. • The young person will need to follow an intensive listening and language programme with an adult on a daily basis, in a quiet environment, to develop speech and language. • They are not making expected progress in some areas of the curriculum as a result of their deafness. • The young person has a delay in listening, language and communication which affects their ability to gain full access to the curriculum. • The young person's deafness causes language delay and impacts on his/her ability to access the curriculum requiring some one-to one adult support. Young person needs intensive additional pre and post teaching of language and vocabulary for access to the curriculum. • The young person may be affected by the complexity of other needs. • The young person may have issues of 'being different' which may have an impact on his/her social and emotional wellbeing and will need to have opportunities to develop their deaf identity with an adult on a weekly basis. • The young person will need exam access arrangements put in place by the school
<p>Band 4</p> <p>Specialist</p>	<p><i>A young person who has an audiological diagnosis of permanent moderate to profound bilateral sensory-neural hearing loss.</i></p> <ul style="list-style-type: none"> • They will be prescribed with hearing aids or wear auditory implants (called BAHAs or cochlear implants). • The young person will follow an intensive listening and language programme with an adult on a daily basis, in a quiet environment, to develop speech and language. • The young person may have Deaf parents and will have British Sign Language (BSL) as their home language. (Parental preference may be for access to Total Communication within a specialist setting where other children use signing and speech.) • They are not making expected progress in some curriculum areas as a result of their deafness. • The young person's deafness causes significant language delay and impacts on his/her ability to access their environment requiring one to one adult support to access learning in a school. • The young person may be a BSL first language user or have a home language other than English. Hearing loss may co- exist with other secondary needs for example, autism, medical, SEMH. • The mainstream or specialist classroom must meet building bulletin 93 (BB93) regulations for young people with hearing needs. The young person will need to access some learning within a small group within an acoustically treated room. • The young person's SALT will be involved. • The curriculum will be delivered by a Teacher of Deaf (ToD) for some or all of the day. • The young person will need to have opportunities to develop their deaf identity with an adult on a weekly basis and daily contact with other deaf young people.
<p>Band 5</p> <p>Specialist Plus</p>	<p><i>Young person typically accesses specialised provision to meet hearing needs but requires additional adult support to access the curriculum due to complexity.</i></p> <ul style="list-style-type: none"> • Parental preference for a mainstream school must be considered.

Vision Impairment

Band 0	<i>Needs are well met without any additional support</i>
Universal	<ul style="list-style-type: none"> • The young person has typical vision. Needs are well met without any additional support. • The young person has a refractive error which can be fully corrected by wearing glasses, for example, short/long sightedness, astigmatism. • The young person whose needs are managed well in a mainstream class with appropriate differentiation of task and teaching style.
Band 1	<i>The young person has diagnosed vision impairment (mild).</i>
Universal Plus	<ul style="list-style-type: none"> • The young person may have delayed vision development (tracking, scanning, fixing, vision perception). • The young person may have minor delays in vision-motor integration. • The young person may have difficulties with perceiving depth, distance and speed. • Due to vision impairment, the young person may have some areas of development requiring additional support. • The young person may struggle to navigate in busy and unfamiliar environments. • The young person may need support to develop friendships and understand social situations. • The young person may suffer from vision fatigue. • The young person may have a head posture and tilt.
Band 2	<i>The young person has diagnosed vision impairment (moderate).</i>
Targeted	<ul style="list-style-type: none"> • The young person has a recognizable ophthalmic condition which has the potential to affect the learning process. • The young person may require an Environmental Audit and/or appropriate familiarisation. • The young person has identified needs which require additional specific provision, or specialist advice. • The young person's vision impairment impacts on their ability to access the curriculum, including practical subjects independently. • Curriculum access is not possible without significant modification and/or adaptations of curriculum materials. • The young person will require exam access arrangements. • The young person will be unable to read standard size, age appropriate print from an acceptable distance. They are likely to require modified resources including enlarged print, removal of visual clutter, clarity and contrast. • The young person is likely to have reduced visual field and depth perception. • The young person may experience visual processing difficulties due to Cerebral Vision Impairment (CVI). • There may be some deterioration in certain areas of academic performance, for example, deteriorating handwriting, slowness in copying from the board, increasingly asking for written instructions to be given verbally.
Band 3	<i>The young person has a diagnosed vision impairment (severe) and maybe registered as sight impaired.</i>
Targeted Plus	<ul style="list-style-type: none"> • The young person may have learning difficulties in addition to vision impairment. • The young person may have progressive vision impairment where functional vision is expected to deteriorate to registered sight impaired level. • Vision impairment will have a severe impact on the young person's ability to function independently in the school environment and in their everyday life. • The young person may have extreme difficulties in making and maintaining relationships resulting in frequent social isolation and vulnerability, with some disengagement requiring extensive adult support. • The young person will require mobility and independence programmes. • The young person will always need practical tasks, activities and experiments modifying. • The young person will require exam access arrangements. • The significant modification of materials and presentation will allow access to the majority of the curriculum, for example, touch typing. • The young person requires planned interventions and support to manage personal access equipment, specialist teaching of life skills to access age appropriate activities independently, for example, money management, shopping and personal hygiene.

Vision Impairment

<p>Band 4</p> <p>Specialist</p>	<p><i>The young person has a diagnosed vision impairment (profound).</i></p> <ul style="list-style-type: none">• The young person may be registered as severely sight impaired (blind).• The young person will be unable to access the curriculum without substantial modification of all learning materials into tactile/audio formats (Braille), alongside use of specialist equipment.• The young person will receive individual input from a specialist in vision impairment.• The young person will only be able to access the environment and move around the school with a high-level of specialist support, for example a long-cane.• The young person may need to have a reduced timetable but not reduced hours at school.• The young person will require additional support to facilitate social interactions and to participate in group work within subjects.• The young person will require support to consolidate learning due to lack of incidental learning.• The young person may require additional support/mentoring from a specialist in vision impairment with regards the impact of sight-loss (including deteriorating vision).• The young person may require short/long-term episodes of an Independent Living Skills programme planned and delivered by a Habilitation Specialist.• The young person will require a package of support to address transition.• The young person will require exam access arrangements.• The young person will require evaluation of support in relation to increasing independence and preparation for adulthood.
<p>Band 5</p> <p>Specialist Plus</p>	<p><i>The young person has a diagnosed vision impairment (profound).</i></p> <ul style="list-style-type: none">• The young person may be registered as severely sight impaired (blind).• The young person will only be able to access the curriculum with substantial modification of all learning materials into tactile/audio formats (Braille), alongside use of specialist equipment.• The young person will only be able to access the environment and move around the school with a high-level of support.• The young person may have a reduced timetable but not reduced hours in school.• The young person will require additional support to facilitate social interactions.• The young person will require support to consolidate learning due to lack of incidental learning.• The young person may require additional support/mentoring from VI Specialist with regards the impact of sight-loss (including deteriorating vision).• The young person may require short/long-term episodes of an Independent Living Skills programme planned and reviewed in conjunction with a Habilitation Specialist.• The young person will require a package of support to address transition.• The young person will require access arrangements for exams.• The young person may have a diagnosis of Cerebral Vision Impairment that affects both cognitive and visual functioning.

Multi-Sensory Impairment (Deaf blindness)

The legal definition: 'A person is regarded as deafblind if their combined sight and hearing impairment cause difficulties with communication, access to information and mobility. This includes people with a progressive sight and hearing loss.' (Department of Health, 1995).

(A person with **sensory processing issues** may have eyes and ears that function normally and where the brain receives the signals in a typical way, but their brain has trouble filtering, and organising information taken in by the senses. This is not deaf blindness).

<p>Band 0 - 3</p> <p>Universal</p>	<p>Children and Young People who are deafblind have high levels of need outlined in the Level 4 and 5 descriptors</p>
<p>Band 4</p> <p>Specialist</p>	<p><i>A young person whose deaf blindness has a severe impact upon all areas of development. They will have vision and hearing loss the combination of which severely affects their access to information, communication and development of mobility.</i></p> <ul style="list-style-type: none"> • The young person has a combined impairment of vision and hearing. The young person may have additional difficulties or a range of difficulties but function as if they have significant sensory impairment/s. • The young person may have acquired deaf blindness resulting from illness or accident. • The young person will probably have some remaining sight and/or hearing but is limited in how these can be used. • The young person may have a medical diagnosis of CHARGE or Usher syndrome. • Their impairments have an impact on their access to the curriculum and on their ability to be fully involved in learning and social activities. • Impacts of deaf blindness will include difficulty with access to the curriculum without significant adaptation and support, difficulty in independence and mobility skills, different and possibly delayed communication and language (including literacy) skills. Their understanding of the world and conceptual development may be more limited than their ability to process and learn from information. They may not be able to work in groups. There may be difficulties with social relationships and emotional-regulation and this may include unusual behaviour, anxiety and fatigue. • The young person may have a range of other needs including physical, medical and cognitive difficulties, or social and emotional needs. Some of these may be primary and some of these may be caused by the impairments of deaf blindness. They may have an autism spectrum disorder but the effects of deaf blindness (difficulty in eye contact, difficulty in communication, requiring routines and more) can be confused with the effects of ASD. • Specialist support will usually be provided by a Qualified Teacher of the deafblind (QTMSI) with support from a Qualified Teacher of vision impairment (QTVI) and/or a Qualified Teacher of the deaf (QToD) in some cases. • They may have an audiological diagnosis of mild, moderate or severe sensory-neural hearing loss or persistent/permanent conductive loss in combination with vision impairment. They may have prescribed hearing instruments (hearing aids, BAHA, cochlear implants). • The young person may be profoundly deaf and hearing aids do not give access to sound. • The young person has a diagnosed vision impairment (mild to profound) in combination with hearing impairment • The young person may be registered as severely sight impaired (blind).

Multi-Sensory Impairment (Deaf blindness)

<p>Band 4</p> <p>Specialist</p> <p>cont</p>	<ul style="list-style-type: none"> • Combined vision and hearing impairment will impact on all areas of development • The young person experiences complex and frequent barriers associated with the combination of vision and hearing impairment, which can significantly impact upon their learning and development. • The young person will probably require support with communication, through notetaking, scaffolding, and adaptation to alternatives such as support with signs, or texts, and alternatives for literacy such as large print, braille or audio, depending on remaining senses. • The young person may need to follow an intensive listening and/or language programme with an adult on a daily basis, in a quiet environment, to continue to develop speech and language Their combined impairment will have a greater impact on social interaction and may require the support of adults for discussion/facilitation and support . • The young person will need support to develop and maintain mobility skills, and to navigate in both familiar and unfamiliar environments. • The young person may require short/long-term episodes of an Independent Living Skills programme planned and reviewed in conjunction with a Habilitation Specialist • The young person will access the curriculum with modification and adaptation related to their sensory and other needs, which may include use of vision/hearing technology, tactile access, with pre/post learning and support and may require more limited assessment/requirements. • The young person may have a reduced timetable but not reduced hours in school. • The young person may require additional time to complete activities and may require rest breaks • The young person will need significantly altered exam access arrangements and/or alternative key stage 4 curriculum, for example ASDAN, functional skills accredited courses. • The young person will require a package of support to address transition. <p><u>Intervenors</u> Some young people will require the support of staff specially trained to work one to one with deafblind children (intervenors).</p>
<p>Band 5</p> <p>Specialist Plus</p>	<p>The young person has combination of severe visual and hearing impairments. They have no sight, no hearing or both, or plus limited remaining sight and/or hearing.</p> <ul style="list-style-type: none"> • The combination of sensory impairments has a profound impact on development or learning • The young person may have awareness of changes in their function in relation to this progression and demonstrate anxiety, depression and they may have mental health needs. • Specialist support will be provided by a Qualified Teacher of Multi-sensory impairment (QTMSI). Additional support may be provided by a Qualified Teacher of vision impairment (QTVI), and/or Teacher of the Deaf (ToD). • The young person may have a medical diagnosis of CHARGE or Usher syndrome <p><u>Intervenors</u> Some young people will require the support of staff specially trained to work one to one with deafblind children (intervenors).</p>