



## Element 3 Funding Banding Descriptors

### Social Care and Education

### SEND Support Service (SENDSS): Quality and Inclusion Team

These banding descriptors are a **best fit model** to provide guidance. A child or young person may have multiple areas of need and fit within multiple bands. In this case, use a best fit approach to apply a band. This can then be discussed by professionals at the Element 3 (E3) funding allocation panel.

Universal applies to what is Ordinarily Available within a mainstream setting. Further guidance on Ordinarily Available can be found within [Ordinarily Available: BERA documents](#).

When reading the descriptors, the banding level is in addition to the one before it, i.e., if considering the descriptors in banding 2, the descriptors within universal and banding 1 should also be considered.

**UNIVERSAL** High-quality teaching for all, at all times, and **OCCASIONAL** / time limited interventions.

**Has a significantly greater difficulty in learning than the majority of others of the same age OR has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools.**

**The child or young person has been identified as requiring additional support and input due to an emerging need.**

- Universal CPD is accessed by all staff and revisited regularly. (High quality teaching for all children and young people, including planning activities / tasks and using a range of strategies to support learning, attention and emotional regulation as suggested in the Best Endeavours and Reasonable Adjustments BERA / Ordinarily Available inclusive provision.
- Strategies to support in class provision (BERA Specifics) with some short term or smaller group interventions to close the gap e.g., Fresh Start, Speed Up.

**Environment, Specialist facilities, materials and/or equipment**

- Use of Widget symbols and words.
- Assisted Technology is used to support writing and reading e.g., typing programmes, reading software, pencil grips, writing slopes, colour overlays, accessibility features on devices.
- Software e.g., Word Shark, Timetables Rockstars. Accessibility settings to be personalised on shared devices and laptops.
- Access to electronic reading resources e.g., RNIB book share.
- Not reliant upon members of school staff to administer medication. An accessible toilet with appropriate changing and / or washing facilities. Furniture is accessible.
- Access routes into, out of and around the school/classrooms are accessible. Ensure that classrooms are calm, organised, and flexible learning environments.
- Ensure that equipment / resources are well organised, accessible, and labelled using words and pictures.
- Provide quiet / low distraction areas for individual and small group work (including listening activities, social skills groups, and language groups).
- Create comfortable, inviting spaces indoors and outdoors to encourage social interactions, indoors and outdoors.
- Make consistent use of visual systems, e.g., objects of reference, visual timetables, cue cards, task planners.

Maintain appropriate noise levels in the classroom. Consider seating arrangements, e.g., CYP with SLCN / VI seated closer to the teacher. rest/movement breaks, built into the day.

**MB1 INTERMITTENT and/or short bursts of support e.g., Targeted TA support, at times throughout the day. (15-20 hours)**

**The child or young person who require a low level of support in mainstream. BEST FIT MODEL.**

Two cycles of the graduated approach assess, plan, do, review have been carried out and are evidenced.

The child is being monitored more closely and professionals may have been consulted such as JPMs.

- School based assessments are used to baseline, create outcomes, and review CYP progress regularly.
- The CYP requires access to a visual and kinaesthetic curriculum at times, with lots of multi-sensory resources and planned access to specific activities designed to develop their cognition, communication, social interaction, emotional regulation, and self-help skills.

**Environment, Specialist facilities, materials and / or equipment**

Independently use a mobility aid to overcome their physical difficulties e.g., walking frame, power chair.

Be reliant upon named members of school staff to both access and administer medication. Only generic training needed.

**In line with the Graduated Approach, the Universal statements plus...**

**MB2 FREQUENT (21-25 hours)**

**The child or young person who require a medium level of support in mainstream. BEST FIT MODEL.**

- Typically, pupils need frequent, additional time from a range of adults.
- Planning for teaching will incorporate advice from external professionals and/or referrals are in process.
- There is regular, planned opportunities for small group work and/or 1:1 sessions.

**Environment, Specialist facilities, materials and / or equipment**

- May have sensory issues requiring specialist equipment and / or trained staff.
- Reliant on a member of staff to support in moving, positioning and personal care i.e., physically assisting during these.
- Reliant on members of school staff having specialist training to support medical needs.

**In line with the Graduated Approach, the MB1 statements plus...**

**MB3 PERSISTENT/INTENSIVE (32.5 hours)**

**The child or young person who require the 'highest' level of support in mainstream. BEST FIT MODEL.**

Typically, pupils need daily, additional time from a range of adults.

Planning for teaching incorporates advice from external professionals.

DAILY opportunities for small group work and 1:1 sessions.

The CYP requires a visual and kinaesthetic curriculum with lots of multi-sensory resources and planned access to specific activities designed to develop their cognition, communication, social interaction, emotional regulation, and self-help skills with structured and targeted teaching.

**Environment, Specialist facilities, materials and/or equipment (may go across bands and needs).**

May have sensory issues requiring specialist equipment and/or trained staff.

Reliant on a member of staff to support in moving, positioning and personal care.

Requires support from one member of staff to transfer.

Reliant on members of school staff having specialist training to support medical needs on at least a daily basis.

**In line with the Graduated Approach, the MB2 statements plus...**

## Universal

	Need / Presenting Behaviours	Curriculum Arrangements	Teaching Approaches & Strategies	Specific Programmes & Activities (Interventions)
<b>Communication &amp; Interaction</b>	<p><b>The child or young person has been identified as requiring additional support and input due to an emerging need.</b></p> <p><b>It may also be a child or young person with an enduring need that can be met through universal.</b></p>	<p>A universal mainstream curriculum with reasonable adjustments.</p> <p>Ensure that displays support vocabulary and language development and include examples of children and young people's language.</p> <p>Time and space to calm including a designated safe space and timetabled sensory breaks.</p>	<p><b>The child or young person:</b> -requires a personalised visual timetable e.g. Now / next, objects of reference (EYFS).</p> <p>-requires individual mats, cushions, or clear seating plan to show where to sit, attention cues e.g., good listening / sitting cues and use of positive motivators and reward systems etc.</p> <p>-requires support for transition and managing change to routines.</p> <p>-requires writing frames, sequence cards, visual cues, timers, mind maps, concept checklists and topic webs to support learning and recall.</p> <p>-Word relationships and inferential language is explicitly taught.</p>	<p>School have accessed: AET Making Sense of Autism, Leicester Speech, Language and Communication Pathway is in use, Speech, Language and Communication MIN, Voice 21: National Oracy.</p> <p>Generic social stories Language for Thinking principals used for questioning. WellComm Early Years &amp; Primary Talk Boosts Whole School Word Aware Fun time Social Comm group e.g., Talk About 5-point scale, Zones of Regulation, Makaton, Use of visuals e.g., Widgit</p> <p>Opportunities to work on the targets provided by a Speech and Language Therapist 1:1 will be timetabled daily.</p>
<b>SEMH</b>	<p><b>The child or young person has been identified as requiring additional support and input due to an emerging need.</b></p> <p><b>It may also be a child or young person with an enduring need that can be met through universal.</b></p>	<p>Embed the positive practices across the school day such as restorative language, attachment friendly scripts, trauma informed practices.</p> <p>Routines are in place that encourage a positive welcome such as meet and greet and/or breakfast club.</p> <p>Named adult identified for pastoral support e.g., head of year.</p> <p>Clear boundaries, structures, and consequences.</p> <p>Time and space to calm including a designated safe space and timetabled sensory breaks.</p> <p>Positive Support Plan in place and reviewed.</p>	<p><b>The child or young person</b> -requires a personalised visual timetable e.g. Now / next, objects of reference (EYFS).</p> <p>-requires individual mats, cushions, or clear seating plan to show where to sit, attention cues e.g., good listening / sitting cues and use of positive motivators and reward systems etc.</p> <p>-requires support for transition and managing change to routines.</p> <p>Adults working with the child or young person know, understand, and notice when the child or young person is beginning to dysregulate and offer support and check ins.</p> <p>Adult to use a range of strategies to support co-regulation e.g., redirect attention, prompting, reassurance.</p> <p>Frequent praise and positive reinforcement such as postcards home &amp; personalised reward systems.</p>	<p>Staff have received training on SEMH Needs and Behaviours e.g., attachment friendly practices, trauma informed practices, restorative approaches.</p> <p><b>Interventions such as:</b> Meet and greet. Emotional check ins Circle time/RSA Positive People Friendship groups Relaxation and Mindfulness Zones of Regulation</p>

<b>Cognition &amp; Learning</b>	<p><b>The child or young person has been identified as requiring additional support and input due to an emerging need.</b></p> <p><b>It may also be a child or young person with an enduring need that can be met through universal.</b></p> <p><b>The child or young person:</b>          -is working below the expected rate of attainment, up to two years behind national expectations, in some curriculum areas despite Quality First Teaching / Ordinarily Available.</p> <p>-has difficulties with memory, sequencing, and reasoning skills.</p>	<p>A universal mainstream curriculum with reasonable adjustments. Ordinarily Available – BERA.</p>	<p><b>The child or young person:</b>          -requires alternative ways to present and record learning.</p> <p>-requires learning materials that are differentiated to their need e.g., dyslexia friendly: font size, font style, spacing and colour.</p> <p>Text is at an appropriate current reading age or differentiated across the curriculum.</p> <p>Repetition, rephrasing and explaining is used to support understanding.</p> <p>Use of 'Thinking Skills' approach e.g., sorting / matching / visual sequencing / classifying and categorising.</p>	<p>Whole class, within class or group intervention          Multi-sensory Phonics programme          Write from the Start          Speed Up          SAQ          Reciprocal Reading          Numicon whole class          Dyslexia Awareness Training          Dyslexia and DCD MIN</p> <p>These interventions may be used within any banding at a higher frequency/level.</p> <p>Access to laptops, iPad as would be ordinarily available within the school.</p>
<b>Sensory &amp; physical</b>	<p><b>A need has been identified by health professionals.</b></p> <p><b>It may also be a child or young person with an enduring need that can be met through universal.</b></p> <p><b>HEARING: Hearing affects listening but NOT their language and learning.</b>  <b>VISION: Vision affects access to learning NOT their learning.</b></p>	<p><b>Accessible resources are provided at the start of lesson.</b></p> <p><b>The child or young person:</b>          -requires a PEEP, Health/Care Plan/Individual Risk Assessment.</p> <p>-requires arrangements such as alternative entrance and exit, leaving or arriving early during lesson change over and start/end of days.</p> <p>-requires assistance to carry equipment or belongings e.g., dinner trays, books, pe kit</p> <p>A private and safe space is available to take medication.</p>	<p>All visual information is clear, well contrasted, non-cursive, devoid of clutter and appropriate font size.</p> <p>Work is recorded using appropriate equipment/methods e.g., black pen, word processor, bold lined stationary,</p> <p>Advice and guidance are sought relating to the sensory environment (environment checklist - All Needs BERA).</p> <p>Time is allocated to staff to prepare modified resources.</p> <p>Strategies to support listening and access to the curriculum (deaf awareness strategies).</p>	<p>Vision and/or Hearing Impairments:          Appropriate whole school / Peer Awareness training.</p> <p>Training related to specific medical needs and manual handling is completed and kept up to date.</p> <p>All relevant staff have had training to use Assistive Listening Devices (radio or soundfield) systems, manage audiological equipment, magnification / low vision aids and use it appropriately.</p> <p>All equipment and resources are maintained/in good working order.</p>

# MB 1

	Need / Presenting Behaviours	Curriculum Arrangements	Teaching Approaches & Strategies	Specific Programmes & Activities (Interventions)
<b>Communication &amp; Interaction</b>	<p><b>The child or young person:</b> -when overwhelmed, may demonstrate unpredictable or unexpected behaviour which may require adult support.</p> <p>-may show signs of distress when faced with new people / places etc.</p> <p>-may have some sensory processing differences which can impact on learning.</p> <p>-has some difficulties with functional and social communication skills which impacts on their ability to engage in learning activities and develop relationships with others.</p> <p>-may seek repetitive actions or routines and/or exhibit some rigid or obsessional behaviours.</p> <p>-may have difficulty talking fluently e.g., adults may observe repeated sounds, words, or phrases.</p> <p>-May have difficulty using and understanding language at an age-appropriate level.</p>	<p><b>The child or young person:</b> -can access the curriculum with some low-level communication support.</p> <p>-can manage within the overall organisation and curriculum but who, on occasions require some low-level additional supervision and intervention over and above the class team e.g., Speech and language Therapy.</p>	<p><b>The child or young person:</b> -has functional communication. Communication may be dependent on communication aids, e.g., communication books, visual systems.</p> <p>-requires structure and routine to reduce stress and anxiety. E.g., Meet and greet.</p> <p>-may have some sensory processing differences but can manage these independently when prompted by an adult.</p> <p>-requires specific, time limited interventions with clear entry and exit criteria.</p> <p>-requires regular adult support to remain engaged in activities (over 15hrs per week).</p>	<p>Targeted support:</p> <ul style="list-style-type: none"> <li>-Intensive Interaction (Early Years)</li> <li>- Structured Teaching: TEACCH approach</li> <li>- Interactive play</li> <li>- Lego therapy</li> <li>- Colourful Semantics</li> <li>- Word Aware Programme</li> <li>- Let's Talk</li> <li>- Black Sheep Narrative</li> </ul>
<b>SEMH</b>	<p><b>The child or young person:</b> -Is aware of their difficulties and lack confidence and have low self-esteem.</p> <p>-exhibits difficulty expressing feelings or needs and/or show emotional distress, which subsides with adult support.</p> <p>-struggles to concentrate on adult-led activities and/or finds it hard to take risks with their learning.</p> <p>-has difficulties managing and sustaining relationships.</p> <p>-may struggle to acknowledge or accept responsibility.</p> <p>-shows signs of distress with new people, places, or events.</p>	<p><b>The child or young person:</b> -is able to access the curriculum with some low-level support.</p> <p>-can manage within the overall organisation and curriculum but who, on occasions require some low-level additional supervision and intervention over and above the class team e.g., ELSA.</p>	<p><b>The child or young person:</b> -requires structure and routine to reduce stress and anxiety.</p> <p>-requires adult support to settle into school or setting.</p> <p>-requires regular adult support to self-regulate.</p> <p>-Adults working with the child or young person know, understand, and notice when the child or young person is beginning to dysregulate, and adults use diversion and distraction techniques.</p>	<p>Interventions such as those above in universal that have been personalised for the individual and there may also be an increase in duration and frequency.</p> <p>SEMH specific interventions such as anxiety gremlin, body mapping, drawing, and talking, ELSA and nurture groups.</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);"><b>Cognition &amp; Learning</b></p>	<p><b>Attainment is more than two years behind national expectations despite targeted differentiation.</b></p> <p><b>The child or young person:</b> -may have difficulties that are specific to one or more aspect of learning, for example, written/verbal communication, numbers, appreciating instruction, dyslexia/dyscalculia/dysgraphia.</p> <p>-has ongoing difficulties in the acquisition and use of literacy/numeracy skills.</p> <p>-has difficulties with memory, sequencing and reasoning skills scoring in the below average range in School Assessments.</p>	<p><b>The child or young person:</b> -requires ongoing 1:1 or small group support to acquire skills to access the curriculum.</p>	<p><b>The child or young person:</b> -requires occasional adult support to remain focussed despite structured and time limited tasks.</p> <p>-use of 'Thinking Skills' approach e.g., sorting / matching / visual sequencing / classifying and categorising.</p> <p>-requires sensory or physical experiences which build on their first-hand experiences to understand ideas, learn new concepts, and engage with experiences.</p> <p>-requires support with organisation of their day, including their learning.</p>	<p>Small group (up to four children) with greater frequency than would be ordinarily accessed by others of the same age e.g., twice weekly but with a view to increase the amount of time that they can work independently.</p> <p>Multi-sensory Phonics programme Write from the Start Speed Up SAQ Reciprocal Reading Numicon</p> <p>Support required to access/use Bespoke and individualised Augmentative and Alternative Communication devices such as AAC grids.</p> <p>Consistent support required to use assistive technology for those CYP with SPLD such as Clicker, Text Help, Read/Write, Reading Pens and Audio recording devices.</p> <p>Class teacher, Teaching Assistant and/or relevant key adult who has been trained to work with children with cognition and learning difficulties.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);"><b>Sensory &amp; physical</b></p>	<p><b>The child or young person:</b> -has a moderate sensory loss e.g., Vision impairment, with input from external specialists.</p> <p>-may have difficulty with peer awareness.</p> <p><b>Hearing</b> -has a hearing loss in both ears that impacts on their communication, language, and learning.</p> <p>-has a sensory loss with input from external specialists.</p>	<p><b>The child or young person:</b> -can manage within the overall organisation and curriculum but who, on occasions require some low-level additional supervision and intervention over and above the class team e.g., Speech and language Therapy, short-term specialist skills programmes.</p> <p>Classroom Teaching Assistants (TA) are targeted towards support for access for specific tasks/settings and is not necessarily needed for learning.</p>	<p><b>The child or young person requires:</b> -Allocated time to check understanding of tasks and lesson content with some pre and post tutoring of core subjects/vocabulary.</p> <p>--Allocated time for modification of large print resources.</p> <p>-Preparation for Adulthood support/Curriculum Framework for Vision Impairment.</p>	<p><b>Interventions such as:</b> - Big Moves - Warwick Fine Motor Skills - Short-term touch-typing programmes consolidated regularly within the classroom</p> <p>The child or young person uses aids to overcome sensory loss e.g., hearing aids, low vision aids allowing them to be independent with limited adaptations. Equipment may require daily checks.</p> <p>Assistive technology specific to the individual is in place and reviewed regularly.</p>

## MB 2

	Need / Presenting Behaviours	Curriculum Arrangements	Teaching Approaches & Strategies	Specific Programmes & Activities (Interventions)
<b>Communication &amp; Interaction</b>	<p><b>The child or young person:</b> -may present with an uneven (spiky) learning profile.</p> <p>-may display behaviours that challenge or internalise / withdraw due to difficulties making themselves understood, understanding others and self-regulating.</p> <p>-demonstrates social interaction difficulties with peers and adults.</p> <p>-presents with behaviours due to their SLCN needs such as, difficulties with independent learning, poor listening and attention, frustration, stress, and lack of engagement and struggles to maintain positive behaviour for learning.</p> <p>-when overwhelmed, frequently demonstrates unpredictable or unexpected behaviour which results in the need for adult support.</p> <p>Has frequent executive functioning difficulties related to organisation, time management and working memory.</p>	<p><b>The child or young person:</b> -needs a formal or semi-formal curriculum with appropriate environments &amp; resources using structured teaching methods e.g., TEACCH.</p> <p>-requires frequent adaptations to the curriculum, teaching methods and learning environment to access their learning.</p> <p>-will require enhanced PSHE programmes to ensure skills are embedded within a small group or 1:1.</p> <p>Where appropriate, an alternative curriculum must be offered to develop independence and life skills.</p>	<p><b>The child or young person:</b> -requires frequent access to a small group teaching environment where spoken language is supported routinely by visual cues including pictures, gestures, and organisational structures.</p> <p>-requires a personalised learning environment that provides clear and predictable routines (bespoke timetable, workstation, calm space).</p> <p>-requires frequent access to an environment where there is reduced sensory stimulation.</p> <p>-requires daily, focused, time limited small group or 1:1 intervention.</p>	<p>Staff working directly with the child must have knowledge and training in best practice teaching and planning provision for CYP with Communication and Interaction, SLCN or Autisms.</p> <p>Communication systems such as PECS in use and facilitated by an adult.</p> <p><b>Interventions such as:</b> Intensive Interaction Circle of Friends Socially thinking</p> <p><b>And / or those in MB1.</b></p>
<b>SEMH</b>	<p>Behavioural difficulties present as high anxiety and a need to control.</p> <p><b>The child or young person:</b> -experiences frequent difficulties with regulating emotions.</p> <p>-regularly demonstrates distressed behaviours that disrupt learning and staff may find challenging.</p>	<p><b>The child or young person:</b> -requires regular access to small groups interventions, meet and greet, emotional check-ins, body mapping, friendship groups, low level Cognitive Behavioural Therapy (CBT) based support.</p> <p>-may access offsite alternative provision where appropriate.</p> <p>Planning for unstructured time is in place.</p>	<p>Supervisory support is required to interact appropriately with peers including unstructured times.</p> <p><b>The child or young person:</b> - requires adults working with them to know, understand and notice when they are beginning to dysregulate, a trusted adult is required to step in and de-escalate using positive behaviour management on a frequent basis.</p> <p>-has access to regular small group, differentiated learning.</p> <p>-has timetabled, regular opportunities to practice self-regulation using self-regulation tools specific to the child, this may include access to a calm space.</p>	<p>Specific social interventions to be planned into the week such as: Zones of Regulation, Social Thinking.</p> <p>Planned sensory break/sensory circuit.</p> <p>Class teacher, Teaching Assistant and/or relevant key adult who has been trained to work with children with SEMH difficulties.</p> <p>The CYP may require adults who have training and experience of working with children with complex emotional needs e.g., attachment and trauma.</p>

Cognition & Learning	<p><b>Attainment is more than two years below age-related expectations</b> despite differentiated learning opportunities and concentrated support.</p> <p>There is evidence of an increasing gap between the CYP and their peers despite targeted intervention, differentiation, and curriculum modification.</p>	<p><b>The child or young person:</b> -has significant difficulties in cognitive processing requiring significant alteration to the pace and delivery of the curriculum.</p> <p>-requires increasingly adapted teaching and activities to reduce the impact of processing difficulties e.g., working memory and processing speed.</p> <p>Access arrangements and adjustments are part of everyday learning and practice.</p>	<p>Use of real objects for Thinking Skills activities (exploring the context of the objects).</p> <p><b>The child or young person:</b> -requires daily opportunities for small group or 1:1 support focused on specific support plan targets.</p> <p>-requires ongoing small steps monitoring and regular reviews of their learning to ensure transfer and generalisation of skills has occurred before any new teaching takes place.</p>	<p>Specific Literacy and / or numeracy programmes (researched based) delivered on a small group basis or 1:1 delivered daily or more frequently (throughout the day) but with a view to increase the amount of time that they can work independently.</p>
Sensory & physical	<p><b>The child or young person:</b> - has a moderate to severe sensory loss e.g., vision / multisensory (combined hearing and vision loss) impairment, with input from external specialists.</p> <p>-has a physical or medical need such as cerebral palsy.</p> <p>-sensory and / or physical needs can impact on their cognition and behaviour for learning.</p> <p><b>Hearing</b> -has a hearing loss in both ears that significantly impacts on their communication, language and learning and/or is new to UK or late aided.</p> <p>- has a sensory loss e.g., hearing, multisensory (combined hearing and vision loss) impairment, with input from external specialists.</p>	<p>All staff are aware of and working towards individual short-term targets around specialist skills e.g., technology, habilitation, listening, language, and communication for the HI/VI pupil.</p> <p><b>The child or young person:</b> -requires allocated time for key adult to ensure lesson accessibility and production of modified large print/electronic resources for CYPVI.</p> <p>-requires frequent adult support to access the learning environment and 1-1 support for pre/post tutoring.</p> <p>-may require a TA with a good level of sign support.</p> <p>Preparation for Adulthood/Curriculum Framework for Vision Impairment should be an ongoing focus.</p>	<p><b>The child or young person requires:</b> -a highly differentiated curriculum support, vocabulary enrichment, visual support to access their learning, concept development and experiential learning opportunities.</p> <p><b>Consideration to be made of the impact of fatigue and additional concentration required.</b></p> <p>-support to develop independence and have successful transitions.</p> <p>-the pace of delivery and learning adapted to take account of pupil's communication, understanding and language levels.</p> <p>Teachers / TA promote independence and high expectations for the CYP with sensory / physical needs.</p>	<p>Regular consolidation of touch typing / IT skills, habilitation (independent living skills, independent travel training, long cane skills, social inclusion programmes).</p> <p>Specialist assistive technology specific to the individual is in place and reviewed regularly.</p> <p>The child or young person requires daily and bespoke 1:1 /small group support, as planned with ToD /QTVI / QTMSI, which will include daily opportunities for pre and post tutoring and reinforce key learning.</p>



## MB 3

	Need / Presenting Behaviours	Curriculum Arrangements	Teaching Approaches & Strategies	Specific Programmes & Activities (Interventions)
<b>Communication &amp; Interaction</b>	<p>Some or all aspects of language acquisition are significantly below age expected levels.</p> <p><b>The child or young person:</b> -will display behaviours that challenge or internalise / withdraw due to difficulties making themselves understood, understanding others and self-regulating.</p> <p>-demonstrates significant social interaction difficulties with peers and adults.</p> <p>-has an identified Speech, Language and communication Delay/Disorder as identified by SALT such as Developmental Language Disorder (DLD).</p> <p>-with DLD may have associated social communication, literacy, behavioural, and self-regulation difficulties.</p> <p>Has significant executive functioning difficulties related to organisation, planning, time management and working memory which impacts on their social interaction / communication with others.</p>	<p><b>The child or young person:</b> -requires access to a highly personalised curriculum with appropriate environments &amp; resources using structured teaching methods e.g., TEACCH. -requires a high level of adult support to self-regulate.</p> <p>Where there is a diagnosis of Language Impairment or Speech Impairment the pupil's individual academic potential should not be underestimated. However, planning must include a significant level of additional adult support and significant personalised differentiation to ensure curriculum access.</p> <p>Curriculum access is facilitated by a structured approach using visual systems, modification/reduction of language of instruction and information.</p> <p>Planning for unstructured times and social interactions must be in place.</p>	<p><b>The child or young person:</b> -requires daily access to a small group, teaching environment where spoken language is supported routinely by visual cues including pictures, gestures, and organisational structures. -requires a learning environment that provides clear and predictable routines.</p> <p>-requires access to an environment where there is reduced sensory stimulation.</p> <p>-requires daily, focused, time limited 1:1 intervention.</p> <p>-uses augmented or alternative communication.</p> <p>A high level of direct adult support is required to interact appropriately with peers including during unstructured times.</p>	<p>Communication systems such as PECS facilitated by an adult. (Phases 1-3)</p> <p>Key staff must have accredited training in Autism / C&amp;I needs such as Elklan (or equivalent), or through the Autism Education Trust programmes with reference to the Autism Good Practice Guidance.</p> <p>Personalised Social stories tailored to the communicative level of the CYP are used to aid in communication and understanding.</p> <p>Support required to access/use Bespoke and individualised Augmentative and Alternative Communication devices such as AAC grids.</p>
<b>SEMH</b>	<p><b>The child or young person:</b> -demonstrates distressed behaviours that disrupt learning and staff may find challenging.</p> <p>-experiences significant and persistent difficulties with regulating emotions.</p> <p>-struggles to engage with tasks, which could be perceived as demand avoidance or uncooperative behaviour throughout the school day e.g., work avoidance, refusal, or defiance.</p> <p>There are increasing concerns around mental health, e.g., irrational fears, high levels of anxiety, hyper-vigilance, low mood, and self-harm.</p>	<p>Therapeutic approaches will be integral to curriculum delivery and used to support the emotional wellbeing of the CYP.</p> <p>Planning for unstructured times and social interactions must be in place.</p> <p><b>The child or young person:</b> -experiences daily significant and persistent difficulties with regulating emotions. -may make frequent demands for support because of their learning/behavioural difficulties. -may access alternative provision or increased level of practical provision.</p>	<p>A structured, individualised, behaviour management programme.</p> <p>A high level of direct adult support is required to interact appropriately with peers including during unstructured times.</p> <p><b>The child or young person:</b> -requires time to explore and become familiar and comfortable with any new environments. -requires frequent adult intervention/support throughout the day to remain on task during learning activities.</p> <p>- Adults working with the child or young person know, understand, and notice when the child or young person is beginning to dysregulate, a trusted adult is required to step in and de-</p>	<p><b>The child or young person:</b> -requires therapeutic approaches accessed as and when needed, within a small group (1:3) or 1:1.</p>

			escalate using positive behaviour management techniques on a frequent basis.	
<b>Cognition &amp; Learning</b>	<p><b>The CYP has significant learning difficulties.</b></p> <p><b>The child has consistently evidenced difficulties in all areas of learning including</b> memory, processing, organising, co-ordinating, sequencing, organising the steps needed to complete simple tasks/problem solve and fine and gross motor competencies, which significantly impede access to the curriculum and self-care.</p> <p>Due to their cognitive needs the CYP has a limited awareness of danger and risk (needing constant supervision).</p>	<p><b>The child or young person:</b></p> <ul style="list-style-type: none"> <li>-requires consistent and constant additional support to follow instructions and participate in learning activities at a level appropriate to them.</li> <li>-requires additional adult support to ensure safety when accessing the broader curriculum.</li> </ul>	<p>Highly differentiated/personalised work needs to be provided, including the use of visuals and practical resources to support the learning and their ability to recall prior learning.</p> <p><b>The child or young person:</b></p> <ul style="list-style-type: none"> <li>-requires opportunities <b>throughout the day</b> to repeat practise and consolidate skills and concepts.</li> <li>-requires a higher level of support due to difficulties understanding and responding to instructions.</li> </ul> <p>Cognitive need means that staff support is needed for personal care and safety.</p> <p>A high level of direct adult support is required to interact appropriately with peers including unstructured times and manage personal self-care.</p>	<p>Specific Literacy and / or numeracy programmes (research based) or bespoke/personalised programmes delivered on a 1:1 basis but with a view to increase the amount of time that they can work independently.</p> <p>Support required to access/use Bespoke and individualised Augmentative and Alternative Communication devices such as AAC grids.</p> <p>Class teacher, Teaching Assistant and/or relevant key adult who has been trained to work with children with complex cognition and learning difficulties.</p>
<b>Sensory &amp; physical</b>	<p><b>The child or young person:</b></p> <ul style="list-style-type: none"> <li>-has a severe to profound sensory loss e.g., vision / multisensory (combined hearing and vision loss) impairment, with input from external specialists.</li> <li>- has a sensory need such as hearing, vision, dyspraxia, DCD</li> <li>-has a physical or medical need such as cerebral palsy.</li> <li>-sensory and/or physical needs can impact on their cognition and behaviour for learning.</li> <li>-has additional needs that impacts on their safety/communication during unstructured times.</li> </ul> <p><b>Hearing:</b></p> <ul style="list-style-type: none"> <li>-has a hearing loss in both ears that significantly impacts on their communication, language, and learning.</li> <li>-has a sensory loss e.g., hearing/multisensory (combined hearing and vision loss) impairment, with input from external specialists.</li> </ul>	<p><b>The child or young person:</b></p> <ul style="list-style-type: none"> <li>-requires support throughout the day to access the learning environment, including navigation of break times and access to practical subjects / activities.</li> <li>-has a sensory and / or physical impairment which will require ongoing adult support and adaptations to ensure safety and access to the learning environment.</li> <li>-is reliant on adult support to prepare food, including cutting food up, and supervision when eating and / or drinking independently.</li> <li>-will be dependent on adults for some aspects of their self-help &amp; care needs.</li> <li>-requires a TA to oversee modification needs, produce modified resources across all curricular areas, give audio description, organise equipment and for additional skills intervention work.</li> </ul>	<p><b>The child or young person requires:</b></p> <ul style="list-style-type: none"> <li>-differentiated / scaffolded tasks and materials tailored to their needs, support from visual /auditory cues, 1-1 support to check understanding of content, tasks and reinforce key learning / pre and post teaching.</li> <li>-the pace of delivery and learning adapted to take account of pupil's communication, understanding and language levels.</li> <li>-Consideration to be made of the impact of fatigue and the additional concentration required for divided attention.</li> <li>-teachers / TA to promote independence and high expectations for the CYP and provide social and emotional wellbeing support.</li> <li>-additional adult support for trips and unfamiliar surroundings.</li> <li>-a high level of direct adult support at structured and unstructured times with their communication and interaction with peers and to ensure their safety.</li> </ul>	<p>School support staff required to access a daily therapy programme e.g., change of position, use of a walking frame, physio programme.</p> <p>Class teacher, teaching assistant and/or relevant key adult commits to ongoing specialist training.</p> <p>Daily consolidation of ongoing specialist skills including: Touch typing, Braille/tactile skills, technology, long cane training, social inclusion programmes.</p> <p>A qualified CSW is required to enable the deaf pupil to access the curriculum using BSL/SSE.</p> <p>Specialist assistive technology specific to the individual is in place skills consolidated daily and reviewed regularly.</p>