

Blackpool SEND Inclusion Team Information Booklet – For Parents

Blackpool Council



Inclusion Team

Blackpool Council established a Special Educational Needs Disability (SEND) Inclusion Team in 2017. The purpose of the team is to support schools in promoting inclusive practice, to improve the local offer and service provision available for young people with Special Educational Needs and Disability and to help to reduce the number of exclusions in Blackpool.

The team has been formed from the amalgamation of the Communication, Learning & Autism Service and the Physical & Sensory Service with the addition of two new Advisory Teacher roles in Social, Emotional and Mental Health (SEMH) and Cognition and Learning.

This new team will cover all four areas of need identified in the Code of Practice 2014.

First and foremost the Local Authority want to ensure every child with SEND in Blackpool has their needs met, that they are happy and are making progress, both in and out of school. We want to achieve this by working together with schools supporting both individual pupils and, when appropriate, reviewing and advising on whole school approaches and developments. We want to support schools to further develop their in-school expertise through training, coaching and mentoring staff, in addition to supporting the young people and their families.

Special Educational Needs (SEN)

The SEN Code of Practice January 2015 states that :

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

A child of compulsory school age or a young person has a learning difficulty or disability if he/she:

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

For children aged two or more, special educational provision is educational or training provision that is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.

A child under compulsory school age has special educational needs if he or she is likely to fall within the definition in paragraph above when they reach compulsory school age or would do so if special educational provision was not made for them (Section 20 Children and Families Act 2014).

Post-16 institutions often use the term learning difficulties and disabilities (LDD). The term SEN is used in this Code across the 0-25 age range but includes LDD.

Inclusion Team

Inclusion Co-ordinator Angela Crawforth						
Communication and Interaction	Cognition and Learning	Social, Emotional & Mental Health (SEMH)	Hearing Impairment (HI)	Visual Impairment (VI)	Adult Sensory	Physical and Medical (PD/Med)
<p>Autism Advisory Teacher Anne Conchie full-time</p> <p>SLCN Advisory Teacher Janette Weafer part-time</p> <p>Advisory teacher for SLCN part time To Be Appointed</p>	<p>Cognition and Learning Advisory Teacher Nicola Cassidy</p>	<p>SEMH Advisory teacher Joanna Booth full-time</p>	<p>HI Advisory Teacher Jacqueline Wilson term-time</p> <p>Early Years Advisory Teacher Helen McCann part-time</p>	<p>VI Advisory Teacher Fiona Taylor Part-time</p>	<p>Rehabilitation Officer for Visually Impaired (ROVI) Tracy Elliott full-time</p> <p>Sensory Needs Officer (SNO) Tracey Stott full-time</p>	<p>PD/Med Advisory Teacher Anna Peachey – part-time</p>
<p>Centrally Funded Specialist Support Assistant (SSA) Paul Connelly - (Unity) Sarah Parker (Montgomery) Gayle Ramsay (Revoe) Tracey Hampton (Baines) Kirsty White (Devonshire)</p>			<p>Communication support workers (CSW)</p> <p>Joan Kenyon (Westminster Academy)</p> <p>Jacqueline Bleeker (Blackpool & the Fylde College)</p> <p>Louise Smith (Norbreck)</p> <p>Martyn Kenyon (Christ the King)</p>	<p>Specialist Support Assistant including Mobility (SSA) Lynne Boocock (peripatetic)</p> <p>Specialist Support Assistant (SSA) Hannah Kay @ St Marys</p> <p>Material Modification Jenny Boocock and Janet Anderson (peripatetic)</p>		<p>Specialist Support Assistant (SSA) Janet Duckett (peripatetic)</p> <p>Centrally Funded Specialist Support Assistant (SSA) Janice Sissons (Baines Endowed)</p>

Referral to the Inclusion Team

We have a generic Request for Involvement Form for Children and Young People. Referrals can be made from schools, medics and other professionals. This form requires basic information and we ask that you give as much information as possible. For some pupils it is clear which service support is required, however, there are increasing numbers of Children and Young People who may require input from multiple services. To enable us to make a more informed decision as to which Advisory Teacher takes the lead we hold a weekly meeting to look at the referrals and decide upon a course of action. This decision will be a joint decision involving a team of Advisory Teachers.

When an Advisory Teacher has been identified we may ask for further information; this request will be pasted into the original generic form and sent back to the school SENCo or whoever made the initial referral. We may ask for further evidence in support of the referral or about strategies that have already been tried and the outcome of those strategies. Individual Service handbooks are currently being developed for each area of SEND which should offer strategies or programmes that could be trialled prior to a referral being made.

When we have the necessary information, the identified Advisory Teacher will get in touch with the school and, when appropriate, the family. We will then discuss the most appropriate support depending on the needs of the pupil. This may be:

- One to one work /discussion with the pupil.
- Lesson observation followed by discussion and suggested support/strategies.
- Discussion with school staff and sign posting to support.
- Discussion with family and sign posting to support.
- Assessment of needs and programmes of intervention.
- Specific CPD for identified school staff.

When appropriate, schools will receive a written report which we will ask to be shared with school staff and the family.

When a pupil is referred to us we would ask that they are included on the SEN Register.

Communication and Interaction (CI)

Speech Language and Communication (SLCN)

Janette Weafer – Advisory Teacher - part time - working days : Tuesday, Wednesday, Thursday
janette.weafer@blackpool.gov.uk

One vacant post –part time - To Be Appointed

The 2014 SEND Code of Practice states that:

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

What is SLCN?

Speech refers to:

- Saying sounds accurately in the right places in words
- Using sounds to make words
- Speaking fluently without hesitating, prolonging or repeating words or sounds
- Speaking with expression, in a clear voice, using pitch, volume and intonation (prosody) to support meaning

Language refers to:

- Speaking (expressive) and understanding (receptive) language
- Using words (vocabulary) with the correct meaning and context (semantics) to build up sentences in the right order (syntax/grammar)
- Joining sentences to build up conversation (narrative)
- Understanding and making sense of what people say

Communication refers to:

- How we interact with others
- Using language to represent thoughts, concepts and feelings
- Using language to question, clarify, describe etc.
- Non-verbal rules: good listening, eye contact, taking turns, changing language to suit the social situation (friends or head teacher)
- Being able to understand another person's intention or point of view

How do we identify that a child has needs related to Speech, Language and Communication Needs?

If schools have concerns about a child or young person's speech, language and communication the school SENCo should satisfy themselves that there is suitably differentiated curriculum in the classroom. They should check that the aspects of a Communication Friendly Classroom are in place.

The school SENCo with the class teacher will carry out some initial screens to identify the area of need. The school SENCo should make a referral to a speech and language therapist for further assessment. The school can then make a request for involvement from the Advisory Teacher for SLCN, including all the information they have already gathered. Pupils can become self-conscious or frustrated at their inability to communicate with peers or adults in school. They may express themselves through negative behaviour or by becoming withdrawn. It is important to unpick the reasons behind the presenting behaviour.

Previously children and young people were identified as having specific language impairment (SLI) or a language delay. SLI was used to describe children and young people whose speech, language and communication was not developing in a typical pattern. Language delay was used to describe children and young people whose speech, language and communication was developing in a typical pattern but they were not meeting age-related expectations.

In 2016 an international group of professionals have redefined these difficulties by two new terms; developmental language disorder (DLD) or language disorder associated with a bio-medical condition.

DLD is a condition where children have problems understanding and/or using spoken language. There is no obvious reason for these difficulties, for example, there is no hearing problem or physical disability that explains them. Language disorder associated with a bio-medical condition is where children have problems understanding and/or using spoken language, but this co-occurs with another difficulty such as hearing impairment.

How do we support schools, CYP and their families?

The Advisory Teacher will respond to requests for involvement. This may result in attendance at a planning meeting or multi-agency discussion. The Advisory Teacher may offer support to the person delivering a speech and language therapy programme. All young people who have an EHCP that specifies statutory involvement and support from the Local Authority advisory service will be monitored and, if required, the Advisory Teacher will attend the annual review. The Advisory Teacher can provide information to young people and parents about services available in the local area.

Training courses 2017-2018.

All training courses are organised by Organisation and Workforce Development and are delivered at Bickerstaffe House. Please contact OWD on 01253 476533 for further details.

At time of publishing the following courses are arranged:

Introduction to Speech Language and Communication Needs 17th January 2018 and 27th June 2018

References/Resources:

Afasic : <https://www.afasic.org.uk/>

Communication Trust : <https://www.thecommunicationtrust.org.uk/>

I CAN : the children's communications charity : <http://www.ican.org.uk/>

Talking Point : <http://www.talkingpoint.org.uk/>

Communication and interaction (CI)

Autistic Spectrum Disorder (ASD)

Anne Conchie – Advisory Teacher – full time

Anne.conchie@blackpool.gov.uk

Paul Connelly. Unity – ASC pupil

Tracey Hampton. Baines Endowed – ASC pupil

Sarah Parker. Montgomery ASC pupil

Gayle Ramsay. Revoe ASC pupil

Kirsty White. Devonshire ASC pupil

The 2014 SEND Code of Practice states that:

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

How do we identify that a child has needs related to Communication and Interaction?

If schools have concerns about a child or young person's communication and interaction the school SENCo and/or Autism Champion will carry out some initial assessments supported by the school advisory service. The school can then make a request for involvement from the Advisory Teacher for the school who will liaise with the school regarding within school support and, if required, referral to other professionals.

How do we support schools, CYP and their families?

We work in all educational settings across Blackpool, observing and assessing pupils, supporting and advising staff regarding Communication and Interaction. We also offer training to staff for children and young people (CYP) with Communication and Interaction problems including Autism Spectrum Conditions. The Advisory Teacher has advanced qualifications and expertise in working with CYP with Communication and Interaction difficulties and Autism Spectrum Conditions.

What should parents or teachers parents do if they think there is a problem?

If they think there is a problem they can discuss this with the school SENCo.

What could happen next?

The SENCo will contact us and discuss the pupil. If a referral to the service to move the process on is required the SENCO will complete a referral form with parental permission.

What do we do when we visit the school?

Initially we would consult with the SENCo, Autism Champion, class teacher and other staff. We may also liaise with other professionals e.g. Educational Psychologists, BAT, Speech and Language Therapists, Social care and Medical Staff. We may arrange to carry out an observation and ask for evidence to review progress. We may ask the school to complete some questionnaires to assist with our assessment.

We may advise the school on:

Communication and Interaction

Behaviour

Progress

Social skills

Sensory Issues

Any other specific issues related to Autism Spectrum Conditions

We also offer training and support on:

Understanding Autism

Sensory Issues

Social Skills

Challenging Behaviour

Autism and Girls

Visuals in the classroom

References/Resources:

Autism Education Trust: <http://www.autismeducationtrust.org.uk/>

Communication Trust : <https://www.thecommunicationtrust.org.uk/>

I CAN : the children's communications charity : <http://www.ican.org.uk/>

Cognition and Learning

Nicola Cassidy –Advisory- Full Time

The 2014 SEND Code of Practice states that:

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

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

These children may have greater difficulty in acquiring basic literacy or numeracy skills or in understanding concepts. They may also have Speech and language delay, low self- esteem, low levels of concentration and underdeveloped social skills.

Children with a learning difficulty are at increased risk of developing a mental health problem and may need additional support with social development, self –esteem and emotional well-being.

References/Resources:

Dyslexia SpLD Trust : <http://www.thedyslexia-spldtrust.org.uk/>

Social, Emotional and Mental Health difficulties (SEMH)

Joanna Booth – Advisory Teacher – full time

Joanna.booth@blackpool.gov.uk

SEMH is one category that has been introduced through the new Code of Practice. As well as the need to look behind a child's behaviour to what is causing it, the title was changed to reflect the increasing attention being given to pupils who have mental health conditions. Although it is recognised that children and young people with SEND are more prone to develop mental health issues, it is also the case that they may be harder to spot, as the presenting need may make the mental health need less obvious and both parents and professionals may put the symptom down to the child's special needs rather than thinking this could be a co-existing condition. In society at large, there has been a belated recognition that much less attention is paid to a person's mental health than their physical well-being.

The 2014 SEND Code of Practice states that:

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

Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour so it does not adversely affect other pupils. The Department for Education publishes guidance on managing pupils' mental health and behaviour difficulties in schools'. Mental Health and Behaviour Guidance (DfE).

How do we access the SEMH advisory service?

If schools have concerns about a child or young person's SEMH the school SENCo will collate information and have a discussion with the Advisory Teacher or make a request for involvement.

What will the advisory service do?

The Advisory Teacher will liaise with the school regarding support in school and, if required, referral to other professionals. The Advisory Teacher works closely with the Primary Mental Health Worker and joint consultations can occur. All young people who have an EHCP that specifies statutory involvement and support from the Local Authority advisory service will be monitored and, if required, the Advisory Teacher will attend the annual review.

What training does the service offer?

The SEMH Advisory Teacher offers training in schools covering a variety of areas, details available upon request.

References/Resources:

MindEd: <https://www.minded.org.uk/>

Young minds: <https://youngminds.org.uk/>

ADHD Foundation: <https://www.adhdfoundation.org.uk/>

Attention Deficit Disorder Information and Support Service: <http://www.addiss.co.uk/>

Promoting Children and Young People's Emotional Health and Wellbeing: A Whole School and College Approach: <https://www.gov.uk/government/publications/promoting-children-and-young-peoples-emotional-health-and-wellbeing>

Mental Health and Behaviour Guidance (DfE): <https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools/>

Sensory and/or Physical Needs

The 2014 SEND Code of Practice states that:

Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time.

Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support.

NB: Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health (see the References section under Chapter 6 for a link).

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

Medical conditions

The Children and Families Act 2014 places a duty on maintained schools and academies to make arrangements to support pupils with medical conditions. Individual healthcare plans will normally specify the support required to meet the medical needs of such pupils. Where children and young people also have SEN, their provision should be co-ordinated with the healthcare plan. Schools are required to comply with the statutory guidance '*Supporting pupils at school with medical conditions*' (see the References section under Introduction for a link).

How do we identify that a child has needs related to Physical and Sensory Needs?

The Physical and Sensory referrals generally fall into 4 broad groups.

- Visual Difficulties
- Hearing Difficulties
- Physical Difficulties
- Medical Difficulties

References/Resources:

National Sensory Impairment Partnership: <https://www.natsip.org.uk/>

Social Care for Deafblind Children and Adults guidance 2009 (DoH) :

http://webarchive.nationalarchives.gov.uk/+/http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/LocalAuthorityCirculars/DH_101114

Visual Impairments

Fiona Taylor – Qualified Teacher of the Visually Impaired – part time works Tuesday, Wednesday and Friday

Fionataylor@blackpool.gov.uk

Lynne Boocock – Specialist Support Assistant and in school mobility

Janet Anderson – Specialist support assistant – modification

Jenny Boocock – Specialist Support Assistant – modification

Hannah Kay – Specialist Support Assistant - Braille

The majority of children are referred to us from the medical professionals. However occasionally schools will notice a child may be experiencing difficulties. A child may not tell you that he or she has a vision problem because they may think the way they see is the way everyone sees.

Signs that may indicate a child has vision problem include:

- Frequent eye rubbing or blinking
- Short attention span
- Avoiding reading and other close activities
- Frequent headaches
- Covering one eye
- Tilting the head to one side
- Holding reading materials close to the face
- An eye turning in or out
- Seeing double
- Losing place when reading
- Difficulty remembering what he or she read

If a school has any concerns the first thing to consider is when the child last had an eye health check at the opticians. If there are difficulties in persuading the parents/carers to take the child to the opticians, Boots have launched an interactive storybook, which tells the story of Zookeeper Zoe. The interactive storybook contains four eye checks that help you understand if the child might need support with their vision. Specsavers and other opticians offer similar services.

If this does not address the concern then a referral to the service can be made. We would require information detailing your concerns and information on how the pupil is progressing this could include assessment information.

If a child is referred to us from a medical or other professional, we will contact the parents and the school. We will then send a Request for Involvement form to the school, and they will complete the relevant school information sections.

How do we support schools, CYP and their families?

For older children (Year 5 and above) a full assessment including near, distance, contrast, colour and observation of eye movements will be undertaken. Plus a reading, spelling and vocabulary assessment to enable us to have a baseline of the child's functioning. This assessment usually takes between one to two hours and can be completed in either one or two visits

For younger children (Year 4 and below) the assessment may include tasks that examine visual perception. This requires more visits; usually one that takes about one hour and possibly four or five shorter visits.

Following this a detailed report which outlines everything covered, including how the child feels they manage with visual tasks, plus how the child managed each of the assessments and how difficulties in the areas can affect accessing

the curriculum. Advice will also be given as to what steps can be taken to help the child. This advice is also given in a much shorter summary report.

The report will be sent to school and the school will give the parents a copy, in the report is an offer to meet with school staff and parents to discuss any aspect of the report. Schools may also request additional training.

Follow up visits may be required for monitoring. i.e. if the child has a diagnosed visual difficulty. Visits will usually be in Reception, Years 2/3,5,7, and 9 depending on the child's circumstances. However if the school has concerns they should inform us.

If it is felt the child needs work modifying, then visits will take place every term for Key Stage 1 pupils; twice a year for Key stage 2 pupils; and yearly for Key Stage 3 and 4 pupils to monitor the size of font, plus contact is made with the school weekly to collect and return work that requires modification. However, if the school is concerned they must contact the service and additional visits can be arranged.

If a child has little functional vision and requires tactile access to the work, then visits are made more frequently depending on the age and the needs of the child. A child working on pre-Braille skills will usually require one visit per week. When the Braille code is being introduced these are increased to daily visits, sometimes they reduce to 4 times per week when a child needs to join his/her peers for developing extended writing skills. It usually takes up to the end of Year 5 for a child to learn the full Braille code.

Pre-school children – we will visit children who are either home based or in nursery to look at their visual functioning and advise nursery staff and parents the kinds of the activities they could be doing to help the child develop their visual skills.

What training we offer:

Visual Awareness (2 hour training) in which you can experience some of the difficulties faced by children with visual difficulties.

Visual Assessment – (1 to 2 hours) what are the different aspects of the Functional Visual Assessment and what implications has this got for the child.

Adult Sensory Services – Visual Impairment

Tracy Elliott – Rehabilitation Officer for Vision Impaired (ROVI) – full time
tracy.elliott@blackpool.gov.uk

This service offers a person centred assessment to ascertain what difficulties a young person or adult is experiencing due to a visual impairment. The ROVI is able to provide support and specialist rehabilitation or habilitation in the following areas:

- Indoor/outdoor mobility training including long cane training, confidence building and use of public transport.
- Independent Living skills, including managing around the home, being able to cook/clean, plus other techniques.
- Communications, including learning Braille, Moon, Touch typing, identifying money, use of phones/keypads etc.
- Advice and Information on accessing other sources of support

It is a bespoke service that is tailored to the individual's needs and input is provided at the appropriate level for each person's ability.

What training we offer:

Visual awareness training and also working and liaising with other professionals and/or family members also forms part of the overall service provision. The visual awareness training is tailored to the needs of the trainees according to what their role is in connection with people with sight loss. The training incorporates sight guiding skills, an opportunity to experience what having a sight impairment means to being able to perform tasks and basic information on some of the more common eye conditions together with some dos and don'ts in being able to support someone with sight loss.

Referral Method

The referral method is simple, email: tracy.elliott@blackpool.gov.uk or telephone 01253 477 757 and include information about the person's eye condition, (if known), name, DOB, address, telephone number, what the person is struggling with, whether they live alone or have support available. This will enable appropriate and timely support to be provided.

Hearing Impairment – Early Years

Helen McCann – Qualified Teacher of the Deaf with additional EY Training - 19.5 hours per week, term-time only
helen.mccann@blackpool.gov.uk

Hearing Impairment will impact on every individual in a different way and may contribute to difficulty in:

- Language development
- Development of friendships and social skills
- Making sense of what people say and understanding what is happening around them
- Learning to think things through and problem solve
- Understanding and expressing what they are feeling and managing their emotions
- Imaginative play

How do we support schools, CYP and their families?

We support children, up to the age of 5, referred from the NHS Newborn Hearing Screen and NHS Audiology Services. These children will usually have a confirmed hearing impairment in one or both ears. They may or may not use hearing aids/Cochlear Implants. If parents or settings think there is a problem with a child's hearing, which has not previously been diagnosed, they should see their G.P. or health visitor.

The service we provide can include:

- Support and advice for parents/carers to understand their child's diagnosis and potential areas of need
- Support and advise those who work with a deaf child
- Support the effective use and maintenance of all technical equipment available for the deaf child
- Undertake specialist assessments, providing recommendations for the adaptation of environment and access to all learning activities
- Provide specialist and awareness training
- Provide advice and support for all areas of development
- Liaise with other agencies involved with the child
- Support transition to new establishments
- Signpost families to local and national support opportunities
- Play and Stay sessions to enable families to meet and share experiences

We support children, the family and settings by:

- Making visits to homes and EY settings (including childminders and private nurseries). Frequency and purpose of visits is determined on a case by case basis.
- Making referrals to other relevant services.
- Attending clinic appointments or meetings.
- Sharing information about sources of support locally and nationally
- Using age appropriate assessments to monitor progress and identify areas to target future support

What training does the service offer?

- We currently have Training Packages for Deaf Awareness, Communication and Including Deaf Children available
- We are happy to develop relevant trainings on request from settings or organisations
- Within the Inclusion Service we have a team member who can deliver the NDCS Family Sign Programme

References/Resources:

National Deaf Children's Society (NDCS) : <http://www.ndcs.org.uk/>

Sign Hi Say Hi : <http://www.signhisayhi.org.uk/>

I CAN : the children's communications charity : <http://www.ican.org.uk/>

British Sign : <https://www.british-sign.co.uk/>

Hearing Impairment - School-Aged Pupils

Jacqueline Wilson Teacher of the Deaf – term-time only

jacqueline.wilson@blackpool.gov.uk

Joan Kenyon – Communication Support worker

Jacqueline Bleeker – Communication Support Worker

Louise Smith – Communication Support Worker

Martyn Kenyon – Communication Support Worker

Referral process:

Most CYP are referred to us from the medical professionals but occasionally schools will notice they may be experiencing difficulties. A range of features that indicate a pupil may have a hearing impairment include that they:

- Do not make progress and their levels stagnate because they can't hear the teacher
- Talk too loudly and may complain of discomfort or a ringing sound in their ears (i.e. tinnitus)
- Watch the television with the volume turned up high so that it is causing discomfort for others
- Pronounce and spell words incorrectly e.g. Missing the beginnings or the endings of words
- Appear inattentive and prone to daydreaming and don't respond when called.

If a school has concerns because they have observed perceived difficulties, the first step is to speak to the parents/carers and relay what they have observed and ask if the CYP has recently had a hearing test. If not they should see their GP for a referral to Paediatric Audiology Services, Fulwood Clinic, 4 Lytham Road, Fulwood, Preston PR2 8JB. In exceptional circumstances the referral can be made by a medical professional, i.e. school nurse. The clinics are held in the Health Centre on Whitegate Drive Blackpool and St. Annes Health Centre. They will notify the Inclusion Service by mail if they see a child who they feel needs our support. We will contact the parent/carers and start the referral form and then forward it to the school SENCO for completion.

How often does a Qualified Teacher of the Deaf (QTOD) visit?

If a child is profoundly deaf and their first language is British Sign Language (BSL) they will have weekly visits initially and when they start school, these will increase to daily whilst the Teacher of the Deaf (ToD) teaches reading skills through BSL. The frequency of the visits will vary for the next few years according to the child's needs.

If a child is profoundly or severely deaf but has got hearing aids or a cochlear implant then they will initially have weekly visits but this depends on the needs of the child. These visits will be direct teaching to help the child develop and reinforce language skills.

We will see all CYP who are hearing aid users. The visit pattern is dependent on their individual difficulties but as a general guide:

- Key Stage 1 : Termly
- Key Stage 2 : Twice yearly
- Key Stage 3 : Yearly

In addition we may monitor children who have a unilateral loss, or other condition, that leads to having difficulties accessing learning in school. This will be initially in Reception (or when initially issued with hearing aid(s), Year 2/3,5,7 and 9.

What happens at visits:

On the initial visit the parent/carer will have an option of attending and a Functional Auditory Assessment (FAA) will be undertaken. This assessment paired with medical information, helps the QTOD to describe how each ear condition translates into real life situations and how a medical condition impacts the individual student's functioning in the daily environment.

Other assessments may be conducted such as speech discrimination tests, language assessments to help us identify how the hearing loss has affected the child's language development. This initial visit may take over an hour and will be at the educational setting. Teachers may request additional training i.e. checking hearing aids, changing batteries etc. For younger children, or those with a shorter attention span, this can take the form of a number of shorter visits. Following this an encrypted report will be produced and sent to the school who will be asked to print a copy to go home to parents. This will include advice to the school staff on deaf friendly teaching strategies to help the CYP and information about the difficulties hearing impaired CYP may experience. Subsequent reports will be a summary of the visit, discussions with staff, advice given, contact with parents/carers or Paediatric Audiology and any actions and is issued in a shorter format.

We advise the school staff on:

- Simple changes to the classroom layout (e.g. position of the CYP and the speaker) which will make it easier for the student to access the learning.
- Reporting back the results of any language assessments so the language used in lessons can be adapted to make it more accessible and how specialist equipment is used.
- Ensure all relevant staff are aware of the CYP and the difficulties they may experience so they can use strategies that will support them. This is done via the report
- How teachers can manage day to day activities so that the CYP can take part as fully as possible in all aspects of school life, including educational visits, and feel safe and happy.

We support CYP in a variety of ways which may include:

- Talking to them about their wider school experience and identify anything that they are struggling with regarding their hearing and feeding this information back to staff
- Liaising with other professionals including health care professionals and attending relevant meetings
- Planning for transition between Key Stages and educational settings
- Giving feedback to staff on the support that they are giving the pupil that they find beneficial and how this good practice can be developed
- Opportunities to meet other Hearing Impaired students in the local area by arranging a PHSE event that gives them a chance to share experiences and discuss how they can help each other to deal with the difficulties their hearing loss may be causing.
- Helping CYP to understand their hearing loss and manage their equipment independently

We support families by

- Support and advice for parents/carers to understand their child's diagnosis
- Suggest how they can manage the equipment and provide recommendations for the adaption of the home environment to make listening at home easier for the CYP with a hearing impairment.
- Providing a detailed report with added information sheets on hearing impairment and advice given to teachers to support their child at school
- Sharing information about sources of support locally and nationally
- Supporting parents with appointments if required.

What training we offer:

Deaf Awareness Training (2 hours) in which you can learn about some of the difficulties faced by CYP with hearing difficulties.

Deaf Friendly Teaching Strategies (2 hours) – how the strategies used to support and engage children with hearing difficulties can benefit all children.

References/Resources:

Sign Hi Say Hi : <http://www.signhisayhi.org.uk/>

National Deaf Children's Society (NDCS) : <http://www.ndcs.org.uk/>

Adult Sensory Services – Hearing Difficulties

Tracey Stott – Sensory Needs Officer (SNO) – full time
tracey.stott@blackpool.gov.uk

This service offers a person centred assessment to ascertain what difficulties a young person or adult is experiencing due to hearing loss/difficulties . The SNO is able to provide support and specialist knowledge in the following areas:

- Assessment - the aim of the assessment is to identify needs relating to the hearing loss. Adult Sensory Services has a duty to promote and maintain independence through advice and information and, for those people meeting the departmental eligibility criteria, the provision of specialist environmental equipment, registration and other services.
- Communication, including advice on how to use new technologies, as well as use of phones etc.
- Advice and Information on accessing other sources of support

It is a bespoke service that is tailored to the individual's needs and input is provided at the appropriate level for each person's ability.

What training do we offer?

Deaf awareness training - working/liasing with other professionals and/or family members also forms part of the overall service provision. The deaf awareness training is tailored to the needs of the trainees according to what their role is in connection with people with hearing loss. Deaf awareness courses are also available throughout the year and these can be accessed by Blackpool Council's OWD/Training Department.

British Sign Language Interpreters – Adult Sensory Services organise the booking of British Sign Language (BSL) Interpreters for all departments within Blackpool Council. We also give information and advice on this and how to work with BSL Interpreters.

Low Vision Register – Adult Sensory Team receives copies of Certificate of Vision Impairment from eye consultants from both local and national eye clinics/hospitals, we offer clients the option of registering with Blackpool Council. We also give information and advice on the benefits of registering.

Referral Method

The referral method is simple, email: tracey.stott@blackpool.gov.uk or telephone 01253 47 6656 and include information about the person's eye condition, (if known), name, DOB, address, telephone number, what the person is struggling with, whether they live alone or have support available. This will enable appropriate and timely support to be provided.

Multi-Sensory Impairment

"WHAT IS MULTI-SENSORY IMPAIRMENT?"

Pupils with a Multi-Sensory Impairment (MSI) have a combination of visual and hearing difficulties. They are sometimes referred to as deafblind but may have some residual sight and/or hearing. Many also have additional disabilities but their complex needs mean that it may be difficult to ascertain their intellectual abilities.

Pupils with MSI have much greater difficulties in accessing the curriculum and the environment than those with a single sensory impairment. They have difficulties in perception, communication and in the acquisition of information. Incidental learning is limited. The combination can result in high anxiety and multi-sensory

deprivation. Pupils need teaching approaches which make good use of their residual hearing and vision, together with their other senses. They may need alternative means of communication.

Physical and Medical Needs

Anna Peachey - Physical and Medical Advisory teacher works Monday to Wednesday Anna.peachey@blackpool.gov.uk

Janet Duckett – Specialist Support Assistant

Janice Sissons - SSA Baines Endowed PD pupil.

Most of the children who we support have diagnosed and relatively rare conditions. Whilst every CYP with PD has a unique profile requiring special consideration, it is possible to identify a broad spectrum of physical need arising from:

- Physical, metabolic or neurological causes such as Cerebral Palsy or Achondroplasia
- Degenerative conditions such as Duchenne Muscular Dystrophy
- Severe trauma, perhaps as a result of an accident, amputation or serious illness
- Chromosomal disorders
- Acquired brain injury
- Muscular skeletal conditions
- Birth trauma and prematurity
- Limb differences affecting hand function, fine motor skills or mobility
- Complex medical needs which impact on physical function

These factors impact on every individual in a different way and may contribute to difficulty in;

- Accessing the physical environment, safely using equipment and facilities
- Accessing learning tasks and assessments
- Accessing practical tasks and activities e.g. food technology
- Recording ideas and thoughts legibly or to time
- Achieving independent work or self-care skills
- Communicating
- Managing fatigue and pain

We also support children with moderate or severe gross motor and/or fine motor dysfunction which may or may not be connected to other learning difficulties who have difficulties in the above areas.

We advise schools about:

- How teachers can make simple changes to lessons, including PE lessons, or to the classroom to make it easier for the child or young person to take part.
- How teachers can manage day to day school life so the child or young person can take part as fully as possible, including in educational visits.
- Writing health care plans with parents and school nurses or specialist nurses to make sure all staff know about the child or young person, understand their needs and know what needs to happen in school to keep the child safe and healthy.
- How to include a child or young person who needs physiotherapy, occupational therapy or specialist equipment in school.
- Specific medical conditions; what to expect and how school can help.
- Different ways that the child or young person can complete their work if they find it difficult to write.
- Making sure the child or young person with a physical or medical need feels safe and happy.
- The legal framework that supports and protects children with disabilities.

We support children and young people by:

- Making regular visits.
- Talking to them about their learning and wider experience in school.
- Observing them in lessons.
- Attending meetings.
- Liaising with therapists and other health care professionals.
- Planning for transition between school and settings.
- Planning following surgery or other medical interventions .
- Providing and monitoring activity programmes to support specific goals including Motor Skills, Bilateral Skills, Handwriting.
- Sharing information about extra-curricular activities that are available locally.
- Sharing information about sources of support locally and nationally.

Training/Interventions

The Year 3 Motor Way activity programme (formerly known as ABC) was developed by this service with the NHS Paediatric Occupational Therapy Team and runs in many Blackpool Primary schools. It is designed to improve Attention, Balance and Coordination in children of about 7 years old who are experiencing difficulties with sitting still, taking turns, listening, are clumsy in PE and who find writing very difficult. The programme should be delivered by school staff to small groups of identified children in sessions of 20-30 minutes 2 or 3 times a week.

The **Year 7 Handwriting Project** is a six week intervention aimed at improving the ease and legibility of handwriting for a small group year 7 students. Each weekly session is designed to last about 1 hour, but pupils should be encouraged to practice the games and activities worked on in each session in their own time.

Both of the above programmes include assessments at the beginning and end to measure improvements made and to support planning for next steps. Schools who wish to establish either of the above programmes or require support with their existing programme can contact the service to request our input.

References/Resources:

PDnet: <http://pdnet.org.uk/>

HemiHelp: <http://www.hemihelp.org.uk/>

Movement Matters: <http://www.movementmattersuk.org/>

Shine : <http://www.shinecharity.org.uk>

Inclusive Practice for Parents with Sensory Needs

In school you may be aware of parents with Sensory needs who are not easily able to access some information sent from school or if they have a hearing difficulty may not be able to access discussions in school. Tracey Stott, our Sensory Needs Officer for Multi - Sensory and Hearing Impaired and Tracy Elliott, our Rehabilitation Officer for the Visually Impaired have provided the following information.

British Sign Language Interpreters Service Providers - A guide to your responsibilities

What is British Sign Language?

British Sign Language (or BSL) is a language used by approximately 70,000 deaf people in this country. The first preferred language of the Deaf community, it is accepted by both linguists and the British Government as a language in its own right (such as English, German or Polish, for example). Therefore written English may not always be understood by a BSL user, as it is a different language.

BSL is not simply miming or gesturing, or a system of spelling out English. It is a visual language which, like two-thirds of the world's languages, has no written form. BSL is just as rich in vocabulary, syntax and grammar as any spoken language.

Under the Disability Discrimination Act 2004 and subsequent Equalities Act 2010 all service providers have had to make reasonable changes to make sure their services are accessible to everyone, including those people who use BSL.

When should an interpreter be used?

A service provider who offers services to the general public has a legal duty:

- To provide a BSL/English interpreter if it would enable or make it easier for Deaf people to make use of its services, or
- To change a practice, policy or procedure which makes it impossible or unreasonably difficult for Deaf people to make use of its services (with or without a BSL/English interpreter)

The service provider has an anticipatory duty, which means that the service provider has to think in advance about when a BSL/English Interpreter may be required, and make the arrangements necessary to ensure that a BSL/English interpreter is effectively used.

The duty to provide a BSL/English interpreter as a reasonable adjustment under the Equalities Act.

Booking a BSL/English interpreter

The following steps are likely to be part of the reasonable adjustment duty:

- Before booking, the D/deaf person should always be consulted on their communication needs prior to any meeting/appointment.
- Demand for BSL/English interpreters exceeds supply.
- Allow plenty of time for booking (at least two to four weeks in advance, if possible). Some interpreting agencies can offer a short-notice service, but this should not be relied upon.
- Be flexible with arrangements around making appointments
- The cost of providing a BSL/English interpreter cannot be charged to the Deaf employee or client.

Working with a BSL/English interpreter

- When booking, give information about the nature, content and length of the assignment
- Sent the BSL/interpreter background information in advance
- When the interpreter arrives for the assignment introduce yourself and the Deaf person(s)
- At the place of the assignment, make sure that the BSL/English Interpreter and the Deaf person(s) can see each other clearly.
- During a lengthy assignment give the interpreter regular breaks
- Normally only one BSL/English interpreter is needed for short assignments. However, if the assignment is technical, complex or lasts a long time (i.e. 2 hours or more), you will need to book two or more BSL/English interpreters.

Planning Ahead/Things to Think About

It may be useful:

- To draw up practical guidelines for booking and using BSL/English interpreters, and to distribute these to all staff, and
- To build communication support into budgets at the beginning of each financial year or of any relevant project.

Further information

For more information regarding BSL/English interpreters or any query regarding Deaf Issues/Awareness, please contact the Sensory Needs Officer, Blackpool Inclusion Team on 01253 476656; or email tracey.stott@blackpool.gov.uk

Parents with Visual Difficulties

If you have a parent who has a visual impairment and is receiving communication from the school, they should be encouraged to request that communication be in their preferred format that they are able to access.

This will include correspondence from the school and the parents would also appreciate their child's homework in an accessible format, where possible, so that that they are able to help their child. This is particularly important for younger children

You should ask the parents to state their preference of format, some parents are happy to receive this electronically. Large print is usually between **14 and 18 Arial made bold**.

Pupils Educated in Blackpool with Lancashire Address.

I have tried to obtain clarification on this and hopefully this will help.

If a pupil is in a Blackpool school with a Blackpool address the Inclusion Team will support without any cost whether the pupil is on School Support or with a Plan.

If a pupil is in a Blackpool school with a Lancashire address the Inclusion Team will support a pupil at School Support without cost to the school, but if the pupil has a Plan then we charge Lancashire or Lancashire could send their Advisory Teacher – this would be discussed at the Review. This includes pupils in special schools.

If a pupil is in a Lancashire school with a Blackpool address the Inclusion Team will support a pupil with a Plan with no cost to the school, but we will charge the school if the pupil is at School Support (charge is £105 per hour).

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