Guidance Criteria for a Coordinated Education, Health & Care (EHC) Assessment

May 2016
1. Introduction

The Children and Families Act (2014) Section 36 and the Special Educational Needs Code of Practice (2015), paragraph 9.3, require the local authority (LA) to conduct an assessment of education, health and care (EHC) needs when it considers that it may be necessary for special educational provision to be made for a child or young person in accordance with an EHC Plan. The EHC needs assessment should not normally be the first step in the process; rather it should follow on from planning already undertaken with parents / carers and young people, in conjunction with early years providers, schools, post 16 institutions and other providers.

The requirement for an assessment is likely to be triggered when it is clear that the special educational provision required to meet the child or young person’s needs cannot reasonably be met within the resources normally available to the early years providers, school, post 16 institution or other provider.

When considering if an EHC assessment is necessary, the LA should consider whether there is evidence that the child / young person has not made expected progress, despite the setting / school taking relevant and purposeful action to identify, assess and meet the child / young person’s special educational needs (see SEN Code of Practice 2014, paragraph 9.14).

2. The decision making process for Hackney Learning Trust

In order to determine whether or not a coordinated EHC assessment is required, the LA will need to consider the following key questions and be satisfied that the setting, school or college has provided sufficient evidence to address these questions.

i. Does the child / young person have a highly significant barrier to learning in comparison with others of her/his age?

ii. Has the setting, school or college sought advice from external professionals?

iii. Has the setting, school or college responded to advice from external professional specialists by developing provision maps with SMART targets?

iv. Has the child or young person’s progress been reviewed over time?

v. Has the setting given clear information about how the SEN budget has been used to support the child / young person’s special educational needs?

vi. Do the child / young person’s special educational needs mean that they require interventions with a cost greater than the funding delegated to the setting (i.e., above £6,000)

vii. Has the setting provided clear evidence that, despite using delegated funding to the child / young person, they have not made adequate progress?

3. The assessment process

The ‘Special Educational Needs and Disability Code of Practice: 0-25 years’ (January 2015), provides guidance to educational settings, the LA and anyone else that helps to identify, assess and provide support for children and young people with special educational needs and / or disabilities (SEND).

It sets out the processes and procedures that organisations providing education, health and social care support should follow to meet the needs of children and young people. These organisations must also take account of the Code of Practice when developing their SEN policy.

The Code describes how support for children and young people with SEND should be developed by a step by step or a “graduated approach”. This may be for a varying length of time and is described as “SEN Support” in the Code of Practice. (See paragraph 6.44- 6.56)
Hackney Learning Trust has devolved funding to schools to provide for children and young people who should have their needs met as flexibly as possible within the whole setting’s arrangements to support inclusion.

The EHC needs assessment process is for children and young people who can be described as those experiencing severe, profound and long-term difficulties (i.e., where the child / young person’s special educational needs are likely to be sustained for more than a continuous 12 month period) and who have not responded to a range of interventions over time.

4. Requesting an EHC needs assessment

The purpose of any needs assessment is to clarify the needs of the child / young person and the best means of securing progress, as identified by the arrangements of the Code of Practice, in the following areas:

- Communication and interaction
- Cognition and learning
- Social, emotional and mental health difficulties
- Sensory and/or physical needs

Before considering if an EHC needs assessment is appropriate, it is expected that all settings, schools or colleges will involve and work in partnership with parents and a range of agencies to support pupils at SEN Support.

SEN Support interventions provided may include support from the following services:

- The Inclusion and Specialist Support Team
  - Specialist teaching
  - Team for children who are Visually Impaired
  - Team for children who are Deaf or Partially Hearing
  - Early Support Team
- The Portage Service
- The Educational Psychology Service
- The Re-engagement Unit
- Speech & Language Therapy Service
- Occupational Therapy Service
- Physiotherapy Therapy Service
- Other services based at Hackney Ark
- Disabled Children’s Social Care Team
- Relevant agencies from the Voluntary Sector
- Child and Adolescent Mental Health Services (CAMHS)

Information about these services can be found at: [www.hackneylocaloffer.co.uk](http://www.hackneylocaloffer.co.uk)

In addition to children aged under 16, the LA will consider a request for an EHC needs assessment from parents / carers and young people 16-25 years of age, a setting, school or college where they are or have attended recently, as well as a referral from another agency such as Health or Social Care.
Guidance Criteria for a Coordinated EHC Assessment

It is advisable for parents / carers considering a request for an EHC needs assessment to discuss this with their child / young person's setting or school first. This is because the LA will ask for evidence of the action the setting or school has already taken to help this child / young person.

It is expected that in submitting the case for an EHC needs assessment the setting, school or college will demonstrate that they have provided funding from within their own delegated budget (up to £6,000) for an individual child / young person to address and support their special educational needs. It is important that the evidence provided gives information as set out below (a graduated response) and that the case can clearly identify how the £6,000 has been used to support the individual child / young person and that a higher level of provision is needed to support their special educational needs.

For children under 5 who attend non-school settings such as playgroups or private, voluntary or independent nurseries, or for children who attend independent schools, the setting may not be in receipt of delegated funding. They will need to demonstrate that the child has significant needs using the reports and assessments available. They also need to outline additional support they have put in place to meet the child’s special educational needs.

The guidelines set out in Chapter 6 in the SEN Code of Practice needs to be followed with particular reference to SEN Support in schools (paragraph 6.44-6.62) when writing the request.

Use of High Quality Teaching
Making high quality teaching normally available to the whole class including children / young people with special educational needs is likely to mean that fewer pupils will require SEN support. Such improvements in whole-class provision tend to be more cost effective and sustainable.

High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching.

Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving teachers’ understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.

The first response to any child making less than expected progress should be high quality teaching targeted at children / young people’s areas of weakness. Where progress continues to be less than expected, the class or subject teacher, working with the SENCO, should assess whether the child has SEN. While informally gathering evidence (including the views of the pupil and their parents), schools should not delay putting in place extra teaching or other rigorous interventions designed to secure better progress, where required. The pupil’s response to such support can help identify their particular needs.

Assess, Plan, Do, Review Cycle
Schools should assess each pupil’s current skills and levels of attainment on entry, building on information from previous settings and key stages where appropriate. At the same time, schools should consider evidence that a pupil may have a disability as defined by the Equality Act 2010 and, if so, what reasonable adjustments may need to be made for them.

Class and subject teachers, supported by the senior leadership team, should make regular assessments of progress for all pupils. These should seek to identify pupils making less than expected progress given their age and individual circumstances.

Emphasis should be based on a graduated response which follows the cycle:
Guidance Criteria for a Coordinated EHC Assessment

- **Assess** - to identify the child / young person’s special educational needs.
- **Plan** – to provide a child / young person with support ensuring that parents are fully involved in this process.
- **Do** – ensure that appropriate intervention and support is in place for the child / young person
- **Review** – to consider the effectiveness of the programme and impact on the child / young person’s progress.
- **Involve specialists** – to involve specialist support where it is clear that the child / young person, despite evidence based support and intervention, has made less than expected progress.

**Setting Based Graduated Approach to Support the SEN of Children / young People**

**Important Note**
Most needs will be met at an early a stage of this model. The pathway for most pupils / students will be one where needs are met early and they need not progress further along it. Only a few pupils / students will require an EHC plan to meet their needs.

<table>
<thead>
<tr>
<th>Assess</th>
<th>School/setting identify special educational needs.</th>
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<tbody>
<tr>
<td>Pupil need</td>
<td>Identified by School /setting</td>
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<table>
<thead>
<tr>
<th>Plan</th>
<th>Agree desired outcomes to be achieved through support with parent / carers, child/ young person. This will</th>
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<tbody>
<tr>
<td></td>
<td>▪ Clarify issues / strengths</td>
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<td>▪ Identify the outcomes desired/</td>
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<td></td>
<td>▪ Agree a plan for interventions/ programme</td>
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<tr>
<td></td>
<td>Local Offer information shared</td>
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<tr>
<td>School/setting involve parent / carer and child / young person to plan and agree programme / provision</td>
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<table>
<thead>
<tr>
<th>Do</th>
<th>Programme/provision initiated and implemented</th>
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<tr>
<td>Initiate programme / provision to meet the identified SEN</td>
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<tr>
<th>Review</th>
<th>Intervention reviewed with parent / carers, child and young people. In most cases the interventions will either cease, due to the progress made, or another plan put in place (Minimum review held after two terms)</th>
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<tbody>
<tr>
<td></td>
<td>Ensure decisions and actions are revisited, refined and revised with growing understanding of the pupils needs and the type of support required</td>
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<tr>
<td>Plan reviewed</td>
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</table>

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<thead>
<tr>
<th>Signpost</th>
<th>If necessary Following the review the school/setting may refer to Education Psychologist, Speech and Language Therapist, specialist teachers or other specialists, as required.</th>
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<tbody>
<tr>
<td></td>
<td>Continue with support for the child/, young person using a family centred approach</td>
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<td>Refer to external agencies</td>
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<thead>
<tr>
<th></th>
<th>Agree desired outcomes to be achieved through support with parent/carers, child/ young person and incorporate these into the plan/do cycle.</th>
</tr>
</thead>
</table>
| Assess | Child / young person / family approach | School/setting/professionals continue to plan programme / provision.  
Ensure views of the child/young person are included  
Ensure specialist advice is incorporated as appropriate |
|---|---|---|
| Plan | TAC meeting – collate evidence | Information collated, Local offer information shared with family.  
Review the desired outcomes/ aspirations.  
Impact and the quality of the support and interventions should be evaluated, along with the views of the pupil and their parent/carers.  
SEN support should be adapted or replaced depending on its effectiveness in achieving the agreed outcomes.  
Ensure specialist advice is incorporated as appropriate |
| Do | Continue to implementation of actions | Graduated response and implementation of agreed action  
Ensure specialist advice is incorporated as appropriate |
| Review | Evaluate Impact and outcome of intervention | Consideration of outcomes and outstanding unmet need-  
Most pupils/ students will have needs met or will need to have another assess-plan –do- review cycle.  
Where despite the support and purposeful actions to identify, assess and put provision in place to meet the SEN of the child/young person, the child/young person has not made progress, the school/setting/parents should consider requesting an Education, Health and Care needs assessment |
| Signpost | High level unmet needs – decide to request EHCP | Child/ young person/ family approach with all involved to agree a request for EHC needs assessment |

- Discuss known needs, action implemented and outcomes.  
- Discuss eligibility criteria  
- Note views of all and decide on outcome to request/not request a statutory assessment.  
To inform its decision the local authority will expect to see evidence of the action taken by the school/setting as part of the SEN support. |

5. **Making a decision about an EHC assessment.**

Following the implementation of the Assess, Plan, Do, Review cycle, some children may still be making less than expected progress.

Prior to making an application, it is helpful if schools, settings, professionals and parents have carefully considered the following questions:

i. Does the child / young person have long term and lasting educational needs? Or if very young is the child likely to have severe or complex educational needs?

ii. Is it likely that the school would need additional resources over element 1 and 2 SEN funding in order for the child / young person to make at least satisfactory progress?
iii. What are the family's views about the child / young person's needs?

iv. What are the child / young person's views about his/her needs?

v. Does the child / young person have educational/learning needs as the predominant factor? e.g., not all disabled children / young people have special educational needs.

vi. How are the child / young person’s current needs being met within the home / setting / school? Does the child / young person currently have additional adult support to access these types of provision?

vii. What is the current programme of Special Educational provision? e.g., who does what, where, when and how? Complete the SEND weekly timetable of support.

viii. Which professionals/agencies have been involved in developing, monitoring and reviewing progress over the past year?

ix. What other adjustments are being considered at this stage?

x. Has there been a recent (6 months) multi-professional SEND review / TAF meeting to consider whether statutory assessment should be requested?

All requests are formally considered by the HLT EHC Team, in partnership with colleagues from relevant teams in Education, Health and Social Care services.

Issues considered include:

i. Guidance indicators relating to educational attainments and social and emotional development for learning.

ii. Evidence of the implementation of advice from specialist external agencies.

iii. Evidence that the setting, school or college has put in place reasonable adjustments which have been made in terms of resources, access and support arrangements.

iv. Any further assessments of complex needs which have been undertaken from reports within the last two years.

v. Appropriateness of interventions undertaken by the setting.

vi. Areas of difficulty detailing evidence related to the child / young person’s special educational needs.

vii. Progress over time.

6. Evidence required from a setting

The setting should set out the child’s needs, and demonstrate that actions taken to address them have been purposeful, relevant and sustained. Children and young people who meet the criteria for an EHC needs assessment will have been supported at SEN support and with resources available within the setting, school or college for some time. As well as providing access to the curriculum through the normal teaching arrangements and the use of additional support and specialist advice, specific action taken by the setting to meet the child’s needs should be clearly evident.

The following evidence will be taken into account when a request for an EHC needs assessment for an EHC Plan is considered:
<table>
<thead>
<tr>
<th>Focus of evidence</th>
<th>Evidenced by</th>
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</table>
| The nature of the child or young person’s SEN                                    | Pen picture  
Report from class teacher  
Reports from relevant professionals  
Parent/carer’s views  
Child / young person’s views                                                   |
| Relevant and purposeful intervention at SEN support stage, including an analysis  | Provision map  
Reviewed IEPs, play plans, Personal Support Plans or similar.  
Targets should be SMART (specific, measurable, achievable, realistic and time bound) |
| of the child / young person’s special educational needs and provision used to address those needs |
| Evidence of appropriate use of internal expertise and support (e.g., SENCO, Learning Mentors and Learning Support Assistants) | Planning and review notes |
| Planning and review of the child / young person’s special educational needs has been undertaken regularly | Review meeting notes |
| Monitoring by the school of the child’s progress over a period of time and with the external professionals’ involvement, including evidence of any changes in strategies and programmes as a result of that monitoring. | Assessments and evidence of progress through the curriculum |
| Clear indication of the impact of the strategies in place on the child’s learning and/or behaviour. | Review meeting notes |
| Reference to the setting’s delegated budget for SEN and how the setting’s resources have been deployed for the child / young person under consideration | Provision map indicating support available for the child / young person and the cost |
| Involvement of parents/carers and child / young person and agreement between them and the setting regarding the interventions and support to be put in place, the expected impact on progress and dates for review | Review meeting notes incorporating parents views |
| Evidence of appropriate involvement and use of external resources available to school (e.g., Educational Psychology, external specialists, Social Care advice and relevant health agency input), including how the advice given by external professionals has been implemented, and its impact. | Reports from appropriate professionals |
| Evidence that the setting has responded to the external advice provided, but it is clear that the child / young person requires support beyond that which can be reasonably provided by the setting, school or college’s delegated budget | Targets/outcomes/reviews reflect external professional advice  
Time has been given for the new strategies to be implemented and reviewed. |
Focus of evidence | Evidenced by
--- | ---
For children and young people for whom English is not their first language, objective information about language proficiency in their first / home language should be provided. Information about the stages in acquisition of language for children and young people with English as an additional language might also be relevant. | Assessments undertaken in first language

The evidence should demonstrate that although the setting has responded to the external advice provided, it is clear that the child / young person requires support beyond that which can be reasonably provided by the setting, school or college’s delegated budget.

Evidence provided should be up to date and normally be no more than 18 months prior to the request for an EHC needs assessment. For Early Years children, reports would normally be less than 12 months old. Evidence provided which is more than 2 years prior to the request for the assessment will not be considered.

This evidence is required so that HLT has the full range of information necessary to make an informed decision. HLT has to be satisfied that the child’s or young person’s difficulties are exceptional, long-standing and have not been resolved despite a range of interventions.

7. Guidance Criteria

Overview
The LA recognises that there is a wide spectrum of special educational needs which are frequently interrelated. The four broad categories of needs, as set out in the SEN Code of Practice, however, will be used by Hackney Learning Trust as a guide to support the evidence provided by the setting, school or college. Guidance criteria have been set for each category of need, although reference may be made by the panel to more than one category of need.

In some exceptional circumstances, it is possible for a combination of slightly less severe special educational needs to have a cumulative effect on a child’s educational progress. In this case, a statutory assessment will be considered to determine if the cumulative effect calls for special provision which cannot reasonably be provided within the resources normally available to mainstream setting in the area.

It should be noted that any criteria can only be used as a guide and as one part of the overall process in considering whether or not a child / young person will need an assessment of special educational needs. In considering any guidance criteria, caution needs to be taken – especially when a child / young person’s specific assessments should be considered in relation to a range of other factors, including the child / young person’s social, emotional and mental health, ability to concentrate and willingness to participate in the specific assessments.

Note on terms used:
- The terms severe or profound are used by different professionals and are used as descriptors for different assessment materials. Severe is considered to be below the 2nd Centile, with profound below the 1st centile in standardised assessments. Therefore, the terminology used when looking at the guidance criteria may be used interchangeably. The importance is the evidence submitted that demonstrates the level of functioning, the impact on learning and the responsiveness to interventions.
- For a child / young person to require an assessment for her / his communication and interaction needs, severity ratings will need to be as either severe or profound when assessed by an appropriate professional. If a child / young person’s special educational needs are not described in these terms (i.e., considered to be moderate...
or mild), the child / young person would not normally meet the guidance criteria for an assessment within this category of need.

- It should be noted that the child / young person may have special educational needs in more than one category. e.g., the accumulation of needs in different categories may mean that the child / young person may not have a severe or profound need in communication and interaction; the accumulated effect of needs in other categories may, however, mean that an assessment of special educational needs is required.

Although standardised assessments may be used, in all cases a holistic clinical judgment should be developed about the individual child / young person from observation, informal assessment, discussion with the child / young person and their family, and professionals who have a knowledge of the individual child / young person. The severity is judged against the typically developing peers of the same age.

8. Guidelines to Request an EHC needs Assessment

In completing a request for an assessment, the setting or parent/carers or young person should be mindful of using the four categories set out below:

i. Communication and Interaction
ii. Cognition and learning
iii. Social Emotional and Mental health difficulties
iv. Sensory and/or physical difficulties.

Guidance criteria consists of the following

- The nature and severity of the individual child / young person's needs
- The impact on learning and progress
- The impact on access to the curriculum and participation
- The impact on personal and social development

i. Category of Need: Communication and Interaction

Children / 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 of children / young people with SLCN varies enormously between different children / young people, and an individual's presenting needs may change over time. SLCN may exist on their own or be associated with another condition/s.

Communication and interaction conditions include

- Speech sound difficulties (including phonological difficulties, developmental verbal dyspraxia)
- Expressive language difficulties (including specific language impairment, language learning impairment, language delay)
- Social communication difficulties (including social interaction difficulties which may be associated with a diagnosis of Autistic Spectrum Disorder (ASD))
- Attention and listening difficulties (which may be associated with a diagnosis of ADHD/ADD)
- Communication difficulties associated with sensory impairments such as hearing loss
Guidance Criteria for a Coordinated EHC Assessment

Nature and Severity of need for a child / young person with SLCN to be considered for an EHC Needs Assessment

One or more of the following will apply:

- Severe or profound speech sound difficulties / impairment.
- Severe or profound understanding of spoken language (including difficulties understanding routines, instructions, inference, vocabulary, concepts and stories / narratives).
- Severe or profound difficulties with expressing language (including basic needs, grammar, vocabulary, verbal reasoning and stories/narrative, receptive language difficulties / disorder / impairment).
- Severe or profound social communication and interaction difficulties (including turn taking, conversational skills, non verbal communication, groups skills and peer relationships communication difficulties / disorder / impairment).
- Severe or profound attention / listening difficulties related to speech and language.

It should be noted that written evidence of the child / young person’s speech, language and communication skills, the process of assessment and rationale for the judgement about severity will be provided by the appropriate professionals. All Hackney’s Speech and Language Therapists are trained, and all assessments checked for reliability. Separate advice will be available to parents / carers and other professionals regarding assessments undertaken by non Hackney speech and language therapists.

ii. Category of Need: Cognition and Learning

Support for cognition and learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation.

Cognition and learning difficulties cover a wide range of needs, from mild learning difficulties (where support needed can normally be provided from within the school’s delegated budget) to severe learning difficulties (where children are likely to need support in all areas of the curriculum). In some cases these difficulties are associated with additional mobility and communication problems which can result in profound and multiple learning difficulties (PMLD). In this instance, children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

The majority of children with cognition learning difficulties who need an EHC Plan will be identified early in their school careers. Their general level of academic attainment will be considerably below that of their peers, and they will have significant difficulties acquiring basic numeracy and literacy skills. Children / young people with learning difficulties may have additional needs, e.g., speech and language delay or problems interacting with others.
Nature and Severity of need for a child / young person with Cognition and Learning Needs to be considered for an EHC Needs Assessment

N.B. The guidance criteria set out in the table below should not be used in isolation. When looking at cognition and learning difficulties, it is important to clarify the overall profile of each individual child / young person and the impact of different aspects of their development, including non-verbal abilities and learning potential.

### Early Years

<table>
<thead>
<tr>
<th>Actual age of the child</th>
<th>Year Group</th>
<th>Guidance criteria for cognition and learning</th>
<th>Examples of evidence</th>
</tr>
</thead>
</table>
| 1-2 years old          | Pre-school | - Child assessed as functioning at half chronological age or less.  
- Milestones are within the Early Years Developmental Journal **Steps 1-4**, and the  
- Early Years Development Matters: **Birth-11 months** | - Early Years Developmental Journal  
- Early Years Development Matters  
- Portage checklist  
- Play Plans  
- Professional assessments and reports |
| 2-3 years old          | Pre-school | - Child assessed as functioning at half chronological age or less.  
- Milestones are within the Early Years Developmental Journal **Steps 1-5**, and the  
- Early Years Development Matters: **Birth-11 months, and 8-20 months** | - Early Years Developmental Journal  
- Early Years Development Matters  
- Portage checklist  
- Play Plans  
- Professional assessments and reports |
| 3-4 years old          | Year -1 (nursery) | - Child assessed as functioning at half chronological age or less.  
- Milestones are within the Early Years Developmental Journal **Steps 1-7** and within the  
- Early Years Development Matters: **Birth-11 months, and 8-20 months, and 16-26 months** | - Early Years Developmental Journal  
- Early Years Development Matters  
- Portage checklist  
- Play Plans/individual educational targets  
- Professional assessments and reports |

### Primary

<table>
<thead>
<tr>
<th>Actual age of the child</th>
<th>Year Group</th>
<th>Guidance criteria for cognition and learning</th>
<th>Examples of evidence</th>
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</thead>
</table>
| 4-5 years old          | Year 0 (reception) | - Child assessed as functioning at half chronological age or less.  
- Milestones are within the Early Years Developmental Journal **Steps 1-9**, and within the  
- Early Years Development Matters: **Birth-11 months, and 8-20 months, and 16-26 months** | - Early Years Developmental Journal  
- Early Years Development Matters  
- Play Plans/individual educational targets  
- Professional assessments and reports |
<table>
<thead>
<tr>
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<th>Year Group</th>
<th>Guidance criteria for cognition and learning</th>
<th>Examples of evidence</th>
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</thead>
<tbody>
<tr>
<td>5-6 years old</td>
<td>Year 1</td>
<td>▪ Child assessed as functioning at P 5 or below</td>
<td>▪ P level assessments with examples and evidence OR Early Years Development Matters if the child is following the Early Years Foundation Stage Curriculum ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>6-7 years</td>
<td>Year 2</td>
<td>▪ Child assessed as functioning at P 7 or below</td>
<td>▪ P level assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>7-8 years</td>
<td>Year 3</td>
<td>▪ Child assessed as functioning at P 8 or below</td>
<td>▪ P level assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>8-9 years</td>
<td>Year 4</td>
<td>▪ Child working below national curriculum expectations for the end of Year 1</td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>9-10 years</td>
<td>Year 5</td>
<td>▪ Child working below national curriculum expectations for the end of Year 1</td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>10-11 years</td>
<td>Year 6</td>
<td>▪ Child working below national curriculum expectations for the end of Year 1</td>
<td>▪ ? Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>Actual age of the child</td>
<td>Year Group</td>
<td>Guidance criteria for cognition and learning</td>
<td>Examples of evidence</td>
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<td><strong>Secondary</strong></td>
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<tr>
<td>11-12 years</td>
<td>Year 7</td>
<td>▪ Child working below national curriculum expectations for the end of <strong>Year 2</strong></td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>12-13 years</td>
<td>Year 8</td>
<td>▪ Child working below national curriculum expectations for the end of <strong>Year 2</strong></td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>13-14 years</td>
<td>Year 9</td>
<td>▪ Child working below national curriculum expectations for the end of <strong>Year 2</strong></td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>14-15 years</td>
<td>Year 10</td>
<td>▪ Child working below national curriculum expectations for the end of <strong>Year 3</strong></td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ Professional assessments and reports</td>
</tr>
<tr>
<td>15-16 years</td>
<td>Year 11</td>
<td>▪ Child working below national curriculum expectations for the end of <strong>Year 3</strong></td>
<td>▪ Assessments with examples and evidence ▪ Evidence of impact of interventions undertaken to date ▪ -Professional assessments and reports</td>
</tr>
</tbody>
</table>
### Actual age of the child | Year Group | Guidance criteria for cognition and learning | Examples of evidence
--- | --- | --- | ---
| | | | 

#### 6th Form & Further Education

| 16-25 | Years 12-20 | ▪ Young person working below national curriculum expectations for the end of Year 3 OR at Entry Level English and Maths or working at vocational qualifications (e.g., ASDAN qualifications or individualised, non-accredited programmes of learning at an equivalent level.) | ▪ Assessments with examples and evidence  
▪ Evidence of impact of interventions undertaken to date  
▪ Professional assessments and reports |

Documents referred to in this table:


▪ Guidance for the links between Early Years Developmental Journal, Early Years Development Matters and P scales can be found at: [http://www.councilforspecialledchildren.org.uk/media/537317/eydj_practice_guides.pdf](http://www.councilforspecialledchildren.org.uk/media/537317/eydj_practice_guides.pdf)


### iii. Category of Need: Social, Emotional and Mental Health Difficulties

The term social, emotional and mental health (SEMH) refers to difficulties which a child / young person is experiencing which act as a barrier to their personal, social, cognitive and emotional development. These difficulties may be communicated through internalising and / or externalising behaviours. Relationships with self, others and community may be affected, and the difficulties may interfere with the pupil’s own personal and educational development or that of others.

The contexts within which difficulties occur must always be considered, and may include the classroom, school, family, community and cultural settings. Social, emotional and mental health difficulties may be demonstrated by behaviours occurring along a continuum from developmentally appropriate (for example normal testing of boundaries) and milder, more transient difficulties, to difficulties which are significant and/or persistent, and which may warrant clinical referral and intervention.
Persistent disruptive behaviour or lack of engagement do not necessarily mean that a child or young person has SEN. Where there are concerns, there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with communication or mental health issues. If it is thought housing, family or other domestic circumstances may be contributing to the presenting difficulties a multi-agency approach may be appropriate. In all cases, early identification and intervention can significantly reduce the use of more costly intervention at a later stage.

Professionals should also be alert to other events that can lead to learning difficulties or wider mental health difficulties, such as bullying or bereavement. Such events will not always lead to children having SEN, but they can have an impact on well-being and sometimes this can be severe. Settings, schools and colleges should ensure they make appropriate provision for a child’s short-term needs in order to prevent problems escalating. Where there are long-lasting difficulties, consideration should be given as to whether the child might have SEN.

Reference to the HLT “No Need to Exclude” Guidance may be helpful in supporting children / young people with identified social emotional and mental health difficulties.

### Nature & severity of need for a child / young person with social, emotional and mental health needs to be considered for an EHC Needs Assessment

The child / young person shows severe / acute difficulties in their social, emotional and mental health. These may be long-term consequences of assessed emotional, or mental health conditions, or result from trauma or abuse. Some children will have been diagnosed with severe depression, anxiety disorders, attachment disorders or severe attention deficit disorders, or other conditions.

These may manifest in some of the following ways – Children / young people:

- May have severe difficulties in forming and maintaining positive relationships with peers and adults.
- May form highly inappropriate relationships, putting themselves at risk
- May have severe difficulties with attention, impairing their ability to focus, concentrate, follow instructions and engage with learning
- May show frequent, severe aggressive or dangerous behaviour
- May be severely withdrawn or depressed
- May have severe difficulties recognizing and regulating their own emotions
- May struggle to manage and accept change in systems and routines
- May frequently be anxious, distressed or aggressive, or they may withdraw completely from social or learning situations

The school or setting must demonstrate that they have implemented consistent social, mental and emotional health management plans to underpin the day to day inclusion of the pupil in the school, designed by the teacher. This is likely to have been put together in consultation with the SENCO, Specialist Teacher and Educational Psychologist and/or specialist professionals and support staff in partnership with the child / young person and their family.

### iv. Category of Need: Sensory, Medical and/or Physical Needs

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 visual impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habitation and mobility support. Children and young people with an MSI have a combination of vision and hearing difficulties.

Some children with sensory, medical and/or physical needs may need a supported, adapted or specific, highly individualised curriculum response, which may include:

- Supported, reduced or alternative curricular content
- Increased emphasis on core curriculum areas or language development
- Specialist teaching approaches
- Significantly adapted or alternative approaches, materials and equipment
- Augmentative or alternative communication methods

The child / young person’s difficulties may affect the development of functional social skills and relationships, requiring planning, support and specific teaching around issues such as:

- Feelings of social isolation
- Inappropriate social development
- Dependency on others
- Making & maintaining peer relationships

In addition, the child / young person’s difficulties may have prevented the development of functional independence skills, which impedes child / young person’s ability to manage independently the requirements of the setting, requiring planning, support and specific teaching around issues such as:

- Basic self-care
  - Personal safety awareness
  - Remembering and following routines
- Remembering and following instructions
- Managing possessions
- Task organisation

Teachers and the school/setting’s SENCO are responsible and accountable for the progress and development of pupils with sensory, medical and/or physical needs, including where pupils access support from teaching assistants or specialist staff. Schools and settings have access to therapeutic and educational support to help them meet the needs of pupils with sensory, medical and/or physical needs.

Information about these services is available on the Hackney Local Offer.
http://www.hackneylocaloffer.co.uk/kb5/hackney/localoffer/home.page

Where the impact of the child’s sensory, medical and/or physical needs means that additional support is required beyond what the school can normally provide, or specialist provision is sought, an EHC needs assessment may be indicated.

**Physical Difficulties**
Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available. Some children / young people with a physical disability may have significant difficulties accessing learning and working towards independence. Children with a physical disability may require more time than their peers to complete work. Advice and support is available to schools and settings from therapeutic services such as Occupational Therapy and Physiotherapy. Hackney’s Speech and Language Therapy Team can help with eating and drinking difficulties. Hackney also has a multi-agency team for Assistive Technology which carries out assessments and makes recommendations.

Medical needs
Some children / young people may have medical needs and conditions which require appropriate support and medication. They may need staff who have an understanding of these medical needs and every day procedures needed. These medical conditions may be in addition to a range of other needs. Children / young people may need access to specialist equipment within the setting, school or college to support them with their learning. Most children’s medical needs can be met in their school or education without the need for an EHC Plan. DfE statutory guidance on schools’ responsibilities for pupils with medical needs can be found here:


Sensory needs (deaf/partially hearing and/or visually impaired or with multi-sensory impairment)
Children and young people who are deaf or partially hearing may have difficulties accessing learning, making progress and working towards independence. The listening environment in school may present a significant barrier to learning for children / young people with a hearing impairment. A child / young person’s hearing impairment is often combined with a range of other needs.

Children / young people with a visual impairment may have difficulties accessing learning, making progress and working towards independence. Some children / young people may be formally registered Sight Impaired, or Severely Sight Impaired. A child / young person’s visual impairment is often combined with a range of other needs.

Some children / young people will have a multi-sensory impairment (MSI) which is a combination of vision and hearing difficulties, and are likely to experience significant difficulties accessing learning, making progress and working towards independence. Their visual and hearing impairments are often in addition to a range of other needs which are sometimes complex.

Hackney Learning Trust provides specialist advice and support for children who are deaf or partially hearing or who have a visual impairment, as well as those with a multi-sensory impairment from birth to 25. Where these impact of the child’s hearing and/or visual impairment means that additional support is required beyond what the school can normally provide with this support and their delegated resources, or specialist provision is sought, an EHC needs assessment may be indicated.

<table>
<thead>
<tr>
<th>Nature &amp; severity of need for a child / young person with sensory, medical and/or physical needs to be considered for an EHC Needs Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children will be considered for EHC assessment if their diagnosis of visual impairment, hearing impairment, multi-sensory impairment or physical disability has long term significant implications for learning, levels of attainment and social inclusion. The level of impairment alone does not determine the degree of difficulty that the child / young person experiences in schools and settings. It has to be considered in</td>
</tr>
</tbody>
</table>
Guidance Criteria for a Coordinated EHC Assessment

<table>
<thead>
<tr>
<th>Nature &amp; severity of need for a child / young person with sensory, medical and/or physical needs to be considered for an EHC Needs Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>conjunction with other indicators related to the child's or young person's progress and the teaching and learning environment</td>
</tr>
</tbody>
</table>

**Timeline for an EHC needs assessment process**

**Education, Health and Care needs assessment – 20 week process.**

<table>
<thead>
<tr>
<th>Stage 1</th>
<th>Stage 2</th>
<th>Stage 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 6 weeks or earlier if possible</td>
<td>7-16 weeks</td>
<td>16-20 weeks</td>
</tr>
<tr>
<td>• A request for an EHC needs assessment submitted to the SEN team by the school / setting / parent / carers or the young person.</td>
<td>• SEN team will seek further advice from professionals</td>
<td>• Following the week 14 meeting if it is clear that if an EHC Plan is not required or dispute about outcomes or provision or placement the case to be taken back to Complex Needs Panel for a decision.</td>
</tr>
<tr>
<td>• The SEN team prepare the request for SEN Panel</td>
<td>• SEN or appropriate professionals contact or meet with parents to discuss Section A and B of the EHC Plan (ie parent and child’s/young person’s views, aspirations and special educational needs)</td>
<td>• SEN staff consult with Schools/settings using the agreed draft EHC Plan</td>
</tr>
<tr>
<td>• The SEN Panel considers the request for EHC needs assessment based on the criteria set by Education, Health and Social Care.</td>
<td>• Using the advice and evidence from the request the SEN Team to draft sections A and B of the EHC Plan in preparation for the Multi Agency meeting.</td>
<td>• Discuss with parent /young person a personal budget, if appropriate</td>
</tr>
<tr>
<td>• If agreed to proceed, SEN team will set date for Multi Agency meeting at Week 14 to agree contents of the EHC Plan</td>
<td>• Sections A and B sent to parents and all professionals involved in draft format in preparation of the EHC Plan meeting</td>
<td>• Finalise EHC Plan ( week 20 )</td>
</tr>
<tr>
<td>• If an EHC assessment is not necessary, SEN team will inform child / young person’s parents and setting</td>
<td>• Meeting held with parents/ child / young person and all professionals involved to agree the outcome and provision sections of the EHC Plan ( Sections E and F) – Week 14</td>
<td>• If EHC Plan is not necessary the SEN team will inform parents with recommendations</td>
</tr>
<tr>
<td></td>
<td>• Final draft of EHC Plan sent to parents and all professionals</td>
<td>• If dispute about provision and/or placement LA to finalise the EHC Plan to enable the parent to consider mediation or appeal to SENDIST</td>
</tr>
</tbody>
</table>