

EDUCATION, HEALTH AND CARE
NEEDS ASSESSMENTS & PLANS

**A GRADUATED RESPONSE
TO SPECIAL EDUCATIONAL
NEEDS & DISABILITY**

GUIDANCE BOOKLET

December 2015

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1. Introduction

Purpose of the document

This document provides guidance on the assessment and the provision of support for children with special educational needs (SEN) in line with the [*Special educational needs and disability code of practice: 0 – 25 years*](#) (July 2014). A child or young person has SEN where their learning difficulty or disability calls for special educational provision, that is different from or additional to that normally available to children or young people of the same age.

This handbook explains the national legal framework that governs all Local Authorities (LA's) and educational settings in relation to SEND. It then describes how this legal framework is implemented in RBWM. It is intended to provide clear advice and guidance for all education settings, parents/carers and any other professional involved in the special educational needs of children/young people who may require an Education, Health and Care (EHC) needs assessment.

The Children and Young People Disability Service (CYPDS) lead and manage on the EHC plans from assessment to completion, including overseeing transition plans and annual reviews.

The document aims to:

- Ensure that all children or young people in RBWM whose needs are assessed to be severe, complex and persistent are identified, assessed and provided for in a transparent and timely manner in accordance with Children's and Families Act 2014 and the SEND Code of Practice 2014.
- Clarify the processes for assessing needs and making an Education, Health and Care plan, including the responsibilities of schools and the Local Authority within the process
- Clarify the threshold at which individual children or young people may qualify for consideration for an Education, Health and Care needs assessment.
- Provide guidance in respect of standardised tests which are considered appropriate for administration at school level.
- Ensure a moderated system which is transparent and equitable for all.
- Provide interpretation of the SEND Code of Practice 2014, Chapter 9: Education, Health and Care needs assessments and plans.

National Context

Section 19 of the Children and Families Act 2014 makes clear that local authorities in carrying out their functions under the Act in relation to disabled children and young people and those with special educational needs must have regard to:

- The views, wishes and feelings of the child or young person, and that of the child's parents.
- The importance of the child or young person and the child's parents, participating as fully as possible in decisions, including any support necessary to enable participation in such decisions.
- The need to support the child or young person, and the child's parents, in order to facilitate the development of the child or young person and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood.

These principles are designed to support:

- A focus on inclusive practice and removing barriers to learning.
- The participation of children, their parents and young people in decision making at all stages.
- The early identification of children and young people's needs and early intervention to support them.
- Greater choice and control for young people and parents around support.
- Collaboration between education, health and social care services to provide support.
- High quality provision to meet the needs of children and young people with SEND.
- Successful preparation for adulthood, including independent living and employment.

In setting out the new approach to high needs funding, the Department for Education (DfE) refers to children or young people with high needs as those children or young people who need educational provision that costs more in total than about £10,000 per year (including the basic provision given to all children or young people). This threshold defines the level of need that is expected to be met through direct funding to mainstream schools and colleges, without the need for additional funding from the Local Authority.

The new guidance from the Code of Practice (July 2014) for education settings on taking a graduated approach to identifying and supporting children or young people with SEN (to

replace School Action and School Action Plus). For children and young people with more complex needs, a co-ordinated assessment process and the new 0-25 Education, Health and Care plan replace Statements and Learning Difficulty Assessments (LDAs).

Local Context

A scheme of delegation has been agreed with schools, which is designed to ensure that all mainstream schools are able to respond to meet the needs of their pupils, up to an agreed level, without the requirement for an Education, Health and Care plan. A very small number of children with the most exceptional needs may still require additional funding from the Local Authority over and above that agreed level. These children may require an Education, Health and Care needs assessment to be undertaken, which may lead to an Education, Health and Care plan. Children attending a special school will still require an existing Statement or Education, Health and Care plan.

The Local Authority will maintain existing Statements, subject to the Annual Review according to an agreed transfer timetable. Where the provision set out in the Statement can be made from within the school's own resources, the Statement will be amended to reflect this. However, the Local Authority will not seek to remove a Statement of special educational needs, unless this is by mutual consent with parents, or the objectives of the Statement have been met such that it is no longer required. All Statements will eventually be converted to EHC plans (by 2018).

All mainstream schools, including maintained, academies and free schools, receive an annual budget based mainly on the number and age of the children in the school. In addition, schools receive further resources allocated as part of their '*notional Special Educational Needs' budget* which is calculated with reference to other factors and pupil characteristics, such as prior attainment and deprivation data. Schools are expected to use this funding and their wider school budget as a whole not just to fund the core education provision, but also to meet the first £6,000 of support required by any pupils with additional needs of whatever type and level. The way these funds are used should be made clear in the school's SEN policy and Local Offer. More detailed information can be found on: [SEND Authority Wide Offer Joint Statement for Mainstream Schools.](#)

2. Requesting an EHC Assessment

The following people have a **specific right** to ask a local authority to conduct an education, health and care needs assessment for a child or young person aged between 0 and 25:

- the child's parent
- a young person aged between 16 and 25 years
- A person acting on behalf of a school or post-16 institution (this should ideally be with the knowledge and agreement of the parent or young person where possible).

In addition, with knowledge and agreement of the child's parent or young person, anyone else can bring a child or young person who has (or may have) SEN to the attention of the Local Authority, particularly where they think an EHC needs assessment may be necessary. This could include, for example, foster carers, health and social care professionals, early years practitioners, youth offending teams or probation services, those responsible for education in custody, school or college staff or a family friend.

School request for EHC needs assessment

The form to make a new request for an EHC needs assessment can be found under 'Related Links' section on the EHC plan pages of RBWM's Local Offer at the following [link](#). When completed, it should be sent to RBWM Children and Young People's Disability Service (CYPDS) **together with all the supporting evidence**. The Local Authority can then determine whether an EHC needs assessment is required. Those children who live outside RBWM should be assessed by their home Local Authority.

Parent or young person request for EHC needs assessment

In the case of a parental request (or a Social Worker in respect of a Child in Care), it will be helpful to initially look at the [RBWM Local Offer](#) or contact one of the Assessment Co-ordinators from CYPDS (Tel: 01628 685878) to help to understand the process and criteria. The parent/guardian or young person should then complete the new request for an EHC needs assessment under the 'Related Links' section at the following [link](#) or write directly to CYPDS to request an EHC needs assessment. It will be important to provide the evidence to show why an EHC needs assessment is considered necessary. On receipt of such a request from the parents/guardian, the Authority will ask the school or early years setting to

provide additional information. It is essential that the school provides this information within the specified timescale.

Parents should always be informed that they may contact the Information Advice and Support (IAS) Service (formerly Parent Partnership), which provides impartial advice and support to help parents to understand the process and to make their views known.

Once the Local Authority has received the request, a decision must be made within **6 weeks**. It is important that schools ensure they submit **all** the evidence that they wish to be considered. If insufficient information is included to enable the Local Authority to make a decision, the request may be refused. However, a new request can be submitted at any time in the future, when it is felt there is new and additional evidence.

How does the LA decide if an EHC needs assessment is required?

When the request is received for an EHC needs assessment, the completed form and supporting evidence will be considered by the SEND Panel. This Panel includes professionals, such as Head teachers, Social Care, Education Officers and representatives from specialist support services when possible. The Panel considers all requests for EHC needs assessment, using the checklist: *Quality of Evidence, Indication for Proceeding* (Appendix 1). The Panel will refer to this guidance and use this when considering whether there is sufficient evidence to support the case for an EHC needs assessment.

What happens next?

All decisions are communicated to parents in writing, within statutory timescales and in all instances; schools will receive a copy of the letter communicating the decisions of the Local Authority.

Where **an EHC needs assessment has been agreed**, a letter to parents sets out how the assessment will be progressed and who will contribute to it.

Where **an EHC needs assessment has not been agreed** the letter will set out the reasons for this decision and advise parents what they can do if they are unhappy with the outcome. All parents are offered the opportunity to meet with a Local Authority Officer to discuss their child's special educational needs and provision. They are also informed about the

Information, Advice and Support (IAS) Service for Windsor and Maidenhead, Independent Support, the mediation service, and the right of appeal to the SEN and Disability Tribunal.

3. Threshold for EHC Assessment

A Local Authority must conduct an Education, Health and Care needs assessment when it considers that it may be necessary for special educational provision to be made for the child or young person in accordance with an EHC plan. The factors that the Local Authority should take into account in deciding whether it needs to undertake an EHC needs assessment are set out in the paragraphs below. The EHC needs assessment should not normally be the first steps in the process; rather it should follow on from planning already undertaken with parents and young people in conjunction with an early years setting, school, post 16 or other provider.

An EHC needs assessment is the process initiated by the Local Authority to determine whether a child has significant and long-term special educational needs. The process will also gather relevant information related to any health and care needs. An EHC needs assessment will not always lead to an EHC plan. The information gathered during the assessment may indicate ways in which the education setting can meet the child or young person's needs without an EHC plan.

In considering whether an EHC needs assessment is necessary, the Local Authority should consider whether there is enough evidence to show that despite the education setting having taken relevant and purposeful action to identify, assess and meet the special education needs of the child or young person, the child or young person has not made expected progress. To inform their decision the Local Authority will need to take into account a wide range of evidence, and should pay particular attention to:

- Evidence of the child or young person's academic attainment (or developmental milestones) and rate of progress over at least 6 months.
- Information about the nature, extent and context of the child or young person's SEN.
- Evidence of the action already taken by the early year's provider, school or post 16 institution to meet the child or young person's SEN.
- Evidence that where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided.
- Evidence of the child or young person's physical, emotional, social development and health needs, drawing on relevant evidence from clinicians and other health professionals and what has been done to meet these by other agencies.
- Where a young person is aged over 18, the Local Authority must consider whether the young person requires additional time, in comparison to the majority of others of

the same age who do not have special educational needs, to complete their education or training. Remaining in school, college or a supported internship/apprenticeship should help young people to achieve education and training outcomes, building on what they have learned before and preparing them for adult life. It must lead to clear outcomes such as qualifications, independent travel and readiness for work.

The following guidance for the primary and secondary phase acknowledges that **adequate progress** can be defined in a number of ways, for example:

- Progress is similar to that of peers starting from the same attainment baseline, but less than the majority of other children or young people of the same age.
- Progress matches or is better than the child or young person's previous rate of progress.
- Access to the full curriculum.
- An improvement in self help skills, social and personal skills.
- Improvements in the child or young person's behaviour.
- Progress towards any form of accreditation.
- The likelihood of future participation in further education, training and/or employment.

In order to make an informed decision as to whether to begin an EHC needs assessment, the Local Authority will need a range of evidence, including:

- Information about the specific action with evidence and outcome measures that the school/setting has taken to meet the child's educational needs.
- A range of evidence reflecting the input of professionals, such as Educational Psychologists, specialist support services, health professionals, social care professionals, including how their advice has been implemented over time.
- Evidence of the child's level of academic attainment and rate of progress ideally over at least two terms.
- Additional evidence specific to the child's circumstances and presentation, such as Child and Adolescence and Mental Health Service (CAMHS) assessment, social care reports etc.

The Local Authority has a responsibility to undertake a rigorous process in each case when considering a request for EHC needs assessment. The thresholds need to take account of a combination of factors:

- Relevant and purposeful action taken to address the needs.
- Severity and complexity of the individual child's needs.
- Resources already deployed to support the child and the progress made by the child.

SEN Support Plan

In some cases the evidence collected during the assessment process will lead to the decision that the child does not meet the threshold for an EHC needs assessment and that his/her needs can be met providing **SEN support*** at school or in the early years setting. If an EHC needs assessment is initiated it may not always lead to an Education, Health and Care plan. An SEN support (non statutory) plan will then be issued and the child's desired outcomes should be met with SEN support. Whilst this may set out some recommended special educational and/or other provisions, the Local Authority will not directly oversee the implementation of a non-statutory plan, nor will it have the legal status of an EHC plan. The purpose of an SEN support plan is simply to ensure that those providing for the child or young person can draw on the current advice and information gathered during the EHC needs assessment on working towards the child or young person's identified outcomes.

*For more information about **SEN Support** see **Appendix 5**.

4. Early Years Foundation Stage (EYFS)

It is expected that all Early Years settings implement guidance for both the SEN Code of Practice and the Early Years Foundation Stage. Both of these assume that the early years' framework needs to be carefully structured using three strands:

- Provision for the different starting points from which children develop their learning, building on what they can already do.
- Relevant and appropriate content which matches the different levels of young children's needs.
- Planned and purposeful activity which provides opportunities for learning, play and development both indoors and outdoors.

All early years providers are required to have arrangements in place to identify and support children with SEN or disabilities and to promote equality of opportunity for children in their care. These requirements are set out in the EYFS framework. The majority of children will have their special educational needs suitably addressed by these arrangements. However, there may be a small number of children who continue to experience a much higher level of difficulty than their peers in making progress.

A request to the Local Authority for an EHC needs assessment may be made from birth. Referrals will normally be made following regular monitoring and reviews by the setting using for example Individual Play Plans (IPP), alongside health, education and/or social care professionals. For details around early identification from birth to two, please refer to the Code of Practice p.81.

Requesting an Education, Health and Care needs assessment

Where, despite the setting having taken relevant and purposeful action to identify, assess and meet the special educational needs of the child, the child has not made expected progress, the setting should consider requesting an Education, Health and Care needs assessment (Code of Practice 2014, 5.49). The child's current rate of progress is of significant concern, despite receiving appropriately structured early education or therapeutic experiences, and the gap between his/her development and that of his/her peers continues to widen or the accepted prognosis for their diagnosis suggests that this will happen.

It is expected that there will be:

A consensus of those who work with the child in partnership with his/her parents, that the evidence provided by a range of adults involved (e.g. key person, external advisor, parent) indicate that the gap in levels of development is continuing to widen between the child and those of the same age.

- The differentiated provision for the child's education with additional SEN support has not resulted in any progress towards achieving learning or developmental targets.
- Evidence of the child having developmental levels significantly below those expected of children of the same age in certain areas (i.e. where a child's skills in several areas of learning are significantly below what would be expected at his/her chronological age).
- The evidence provided indicates a complex range of needs which are likely to have an increasing impact on progress.

Specific needs may include:

- Evidence of the child displaying emotional, behavioural and social difficulties which significantly and consistently interfere with his/her own learning or that of the group, despite the implementation of an individualised behaviour management programme and appropriate modifications to the educational environment.
- Evidence of the child experiencing sensory and/or physical difficulties to the extent that he/she continues to require additional equipment or regular visits for direct intervention or advice by specialist practitioners.
- A child with complex health needs that may affect access to learning opportunities and therefore progress.
- Evidence of ongoing communication and/or interaction difficulties, impeding his/her development of social relationships and causing significant barriers to learning (please refer to a standardised communication and interaction scale).

Tracking progress

The 'Early Years Outcomes' in the Early Years Foundation Stage (EYFS) is a useful resource that provide a bank of developmental milestones for children aged 0-5 years. This can be used to measure how children are developing and at what rate. The Early Years Outcomes are broad in nature and for children who make slower progress it is often difficult to evidence their progress when using these materials. Therefore it may be useful to breakdown the most relevant seven areas of learning into smaller steps to help monitor progress.

5. SEN Support in schools

Taken from Code of Practice (6.44 – 6.56)

Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special education provision in place. In order to assist this process schools in RBWM have a published offer of what they provide and how they work with children with SEN and this is made available to the public to view through the Local Offer.

This SEN support should take the form of a four part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes. This is known as a graduated approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to the SEN of children and young people.

Assess

In identifying a child as needing SEN support the class or subject teacher, working with the Special Educational Needs Co-ordinator (SENCO), should carry out a clear analysis of the pupil's needs. This should draw on the teacher's current assessment and experience of the pupil, as well as previous progress and attainment, and any information from other staff who knows the child. It should contrast the individual's development in comparison to their peers using national or standardised tests and data, the views and experience of parents, the pupil's own views and, if relevant, advice from external support services. Schools should take seriously any concerns raised by a parent. These should be recorded and compared to the setting's own assessment and information on how the pupil is developing.

This assessment should be reviewed regularly. This will help ensure that support and intervention are matched to need, barriers to learning are identified and managed, and that a clear picture of the interventions put in place and their effect is developed. For some types of SEN, the way in which a pupil responds to an intervention can be the most reliable method of developing a more accurate picture of need.

In some cases, outside professionals from health or social care may already be involved with the child. These professionals should liaise with the school to help inform the assessments. Where professionals are not already working with school staff the SENCO should contact them if the parents agree.

Plan

Where it is decided to provide a pupil with SEN support, the parents must be notified, although parents should have already been involved in forming the assessment of needs as outlined above. The teacher and the SENCO should agree in consultation with the parent and the pupil the adjustments, interventions and support to be put in place, as well as the expected impact on progress, development or behaviour, along with a clear date for review.

All teachers and support staff who work with the pupil should be made aware of their needs, the outcomes sought, the support provided and any teaching strategies or approaches that are required. This should also be recorded on the school's information and progress tracking system.

The support and intervention provided should directly relate to the outcomes identified as realistic for the pupil, and be based on reliable evidence of effectiveness, and should be provided by staff with sufficient skills and knowledge in the approach to implement it.

Parents should be fully aware of the planned support and interventions and, where appropriate, plans should seek parental involvement to reinforce or contribute to progress at home. The information should be readily available to be accessed by and discussed with the pupil's parents.

Do

The class or subject teacher should remain responsible for working with the child on a daily basis. Where the interventions involve group or one-to-one teaching away from the main class or subject teacher, class teachers should still retain responsibility for the pupils. They should work closely with any Teaching Assistants or specialist staff involved, to plan and assess the impact of support and interventions and how they can be linked to classroom teaching. The SENCO should support the class or subject teacher in the further assessment of the child's particular strengths and weaknesses, in problem solving and advising on the effective implementation of support.

Review

The effectiveness of the support and interventions and their impact on the pupil's progress should be reviewed in line with the agreed date. The impact and quality of the support and interventions should be evaluated, along with the views of the pupils needs. The class or subject teacher, working with the SENCO, should revise the support in light of the pupil's progress and development, deciding on any changes to the support and outcomes in consultation with the parent and pupil. Parents should have clear information about the impact of the support and interventions provided, enabling them to be involved in planning next steps.

It will be important that a school is able to demonstrate that its actions have been **purposeful, relevant and sustained**. A child/young person eligible for an EHC needs assessment will have been supported by the school for some time, drawing on the resources available within the school or setting, providing access to the curriculum through the normal teaching arrangements and the use of additional support and specialist advice.

Evidence

Evidence of the following will be important to enable the Local Authority to consider a request for an EHC needs assessment:

- Relevant and purposeful intervention, including details regarding the drawing up, implementation and review of at least two individualised education plans and/or provision maps with the involvement of parents/carers and child.
- Involvement of Local Authority targeted/specialist services, plus any other relevant external professionals (e.g. CAMHS, Paediatrician, Specialist Nurse). Schools will need to demonstrate **how** this professional involvement has informed the development and implementation of the special educational provision for the child/young person.
- Monitoring by the school of the child's progress over a period of time (covering at least two reviewed individual plans and provision maps) including external professionals' involvement and evidence of any changes in strategies and programmes as a result of that monitoring.
- Evaluation of the impact of the strategies in place on the child's learning and/or behaviour.

The Authority must be satisfied that the child's difficulties are exceptional, long-standing and have not been resolved, despite a range of interventions.

Children with the most severe and complex special educational needs will usually have been identified before statutory school age.

Where English is not a child's first language, objective information about language proficiency in their first/home language should be provided.

Use of school resources in responding to the needs of the child

When requesting an EHC needs assessment, the school will need to provide information to the Local Authority about how it has used its delegated resources for SEN to meet the needs of the child. This will include:

- Reference to the school's delegated budget. The school will be required to evidence that they require resources beyond £6000 per annum for the child.
- Evidence the use and outcomes of resources currently and previously used for a period of at **least 2 terms** (based on a 3 term year).
- Description of the type of resources required that will be beyond £6000.
- Prioritisation of the school's resources for the child under consideration
- Evidence of appropriate use of internal expertise and support e.g. SENCO, Inclusion Manager, Teaching Assistant, Emotional Literacy Support Assistant (ELSA), or similar.
- Evidence of appropriate involvement and use of external resources available

Schools should have regard to the Equality Act 2010 with regard to their responsibility to make reasonable adjustments to enable access for pupils to the curriculum and the physical environment of the school, without recourse to the need for a statement.

A checklist is provided in Appendix 2 (Quick Reference Checklist for Referral for EHC needs assessment) to support the process and ensure all the information is included to enable the Local Authority to make an informed decision.

6. Considering whether an EHC needs assessment is necessary

The Local Authority has a statutory responsibility for arrangements in relation to the small number of children and young people who have significant, complex and enduring special educational needs as described in Part 3 of the Children and Families Act 2014.

Under these arrangements, the purpose of any EHC needs assessment is to clarify the needs of the child and young person and the best means of securing progress in the following 4 key areas:

- Communication and Interaction
- Cognition and Learning
- Social, emotional and mental health
- Sensory and/or Physical Needs

Where a child or young person has significant needs in more than one of the four key areas, consideration will be given to the cumulative and interactive effects on learning as well as the actual achievement levels. It should be noted that low attainment may still reflect adequate progress relative to the child or young person's cognitive abilities and general development.

A child or young person who may have a detrimental effect on the education or welfare of another child or young person(s) does not in itself define a special educational need. Similarly, exclusion from school or school refusal does not in itself indicate that a child or young person requires an EHC needs assessment of his/her special educational needs.

The following characteristics and assessment descriptors are indicative of the four areas of need identified in the SEND Code of Practice.

I. Communication and interaction

Speech, Language and Communication

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.

Autism Spectrum Disorder (ASD)

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.

Examples of evidence required are shown below:

Characteristics for Communication & Interaction

- Language levels, receptive and or expressive significantly delayed/disordered.
- Speech is very difficult to understand even to the familiar listener.
- Severely impaired social communication skills.
- Severe difficulty in responding to social situations and adult direction.

Assessments

- At or below 1st centile on a **range** of subtests where standardised measures are available, usually conducted by a Speech and Language Therapist.
- Other checklists, observation schedules including specialist reports, should be referred to and copies attached as evidence where appropriate.

ii) Cognition and learning

Global Learning Difficulties

With effective early processes, children or young people with significant and complex learning difficulties will be identified by Community Health Services before school entry or early in the child or young person's school career. Their general level of academic attainment will be significant below that of their peers and there will be a commensurate slower rate of learning. This can range from moderate learning difficulties (MLD), severe learning difficulties (SLD) to profound and multiple learning difficulties (PMLD).

Children and young people with significant learning difficulties are likely to need support in **all** areas of the curriculum and may in addition have a physical disability or sensory impairment. They may also experience difficulty in concentrating and acquiring social and life skills. Whatever the level of learning difficulty, the key test of how far their learning needs are being met is whether they are making adequate progress given their difficulties, rather than being compared to the majority of their peers.

The Authority would not expect a referral for EHC needs assessment based solely on a child or young person's difficulties in cognition and learning to be made during the secondary phase, although it may be a significant factor in a request which is based on the cumulative and interactive effects of more than one difficulty in the four key areas.

Specific Learning Difficulties (SpLD)

Specific Learning Difficulties affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyspraxia and dyscalculia. There is an expectation that this need will generally be met at SEN support.

Examples of evidence required are shown below:

Characteristics for Cognition & Learning

- Difficulties in accessing the full National Curriculum at levels appropriate for a child or young person of similar age and ability.
- Significant discrepancies between curriculum areas or aspects of the curriculum (e.g. specific learning difficulties)
- Severe difficulty in accessing the full EYFS/National Curriculum at levels that is appropriate for children of a similar age and ability.

Assessments

- At or below 1st percentile across a **range** of standardised measures are available.
- Discrepancies seen in less than 1 in 100 of standardised sample (checklists or tests)
- At or below 1st percentile on a **range** of measures where standardised
- Early Years Foundation Stage Outcome measures all in lowest category.

iii) Social, emotional and mental health difficulties

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. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.

Examples of evidence required are shown below:

Characteristics for Social, Emotional and Mental Health

- Children and young people who present with Social, Emotional and Mental Health issues will display a range of behaviours at significant levels in learning, conduct and emotional areas. These areas are neither discrete nor mutually exclusive.
- Behaviours are likely to have persisted over time (at least 4 terms) and children or young people will not have shown positive responses to interventions.
- Learning behaviour may include – unwillingness to work without direct supervision, very low levels of on task behaviour, limited attention & concentration, poor rates of task completion lack of compliance with direction and instruction.
- Conduct behaviour may include: continual defiance, verbal and physical aggression, damage to property, lying and stealing.
- Emotional behaviour may include: constant anxiety, depressed/withdrawn behaviour, self injurious or obsessive behaviour, fear of attending school, inappropriate sexual behaviour.
- The child or young person's behaviour has required support including behaviour programmes (IBP, PSP). In spite of significant support the child or young person has failed to make appropriate progress.
- Behaviour impacts significantly upon attainments.
- Child or young person displays behaviour that is significantly outside levels expected for their age and ability.

Assessments

- Behaviours of concern assessed and monitored using an approach which analyses Antecedents, Behaviour and Consequences (ABC) and looks at the frequency, intensity and duration. Evidence should include the impact of these behaviours on learning over time.
- Classroom and playground observation using fixed interval or event sampling. Observational logs and behaviour reports contain evidence of a discrepancy when compared with peer norms using standardised questionnaires and assessments, such as Strengths & Difficulties Questionnaire, Qb test, Spence Anxiety scale, Becks scales etc.
- Objective measures of behaviour that demonstrates that behaviour, emotional and social difficulties are severe, persistent and long term.
- Observation, monitoring, and support from an ELSA has been given.
- There has been no progress during the last two terms in core curriculum areas.

iv) Sensory and/or physical needs

Children and Young People with sensory impairment and / or physical impairment will have a wide variety of learning needs. Sensory impairment ranging from profound to mild (see appendices) will all meet the criteria to be registered as partially hearing or partially sighted and result in some learning and/or access needs. Some students might have temporary, fluctuating or deteriorating sensory impairment which in turn will lead to different provision needs.

Physical impairments may arise from physical, neurological or metabolic causes that require specialised access to educational facilities and equipment.

Both Sensory and Physical impairments might be part of more complex learning and social needs. Successful inclusion in schools will require attention to the opportunities for students to access all aspects of their school life, academic and social opportunities. For some children or young people, emotional stress or physical fatigue may compound difficulties they might experience from their sensory or physical impairment.

Many of these children or young people will require some of the following:

- Flexible teaching and timetabling arrangements
- Appropriate seating, acoustic conditioning and lighting;
- Adaptations to the school physical environment;
- Adaptations to school policies and procedures;
- Access to alternative or augmentative forms of communication;
- Access to areas of the curriculum through modification, specialist aids, equipment and furniture;
- Regular and frequent access to specialist professional support.

A medical diagnosis or a disability does not necessarily imply special educational needs or the need for an EHC plan. Some children or young people who experience sensory, physical or neurological impairments can access the curriculum with minimum intervention and appropriate teaching strategies and / or adaptations and arrangements in accordance with the Equality Act 2010.

Any child or young person with significant sensory impairment is offered support from the Berkshire Sensory Consortium Service (SCS) from the point of diagnosis.

For all hearing, visual or multi-sensory impairment assessment there is an expectation that the assessment will be supported by a report from an appropriately qualified teacher specialist.

Hearing Impairment

Characteristics for Hearing Impairment

- Significant hearing impairment which reduces the opportunity for learning.
- Language delay as a result of hearing impairment.
- Difficulty accessing the curriculum without relevant aids and specialist 1:1 support.
- Difficulty accessing and developing social and emotional well being without training for providers and higher levels of opportunity for 1:1 work to develop relevant child or young person skills.
- Physical environment may need adaptations to maximise child or young person access to teaching.

Assessments

Degree of Hearing impairment will generally be severe or profound although additional factors such as a late diagnosis or deteriorating loss will be taken in to consideration.

Despite support from specialist teachers, trained support assistants and provision from within the school's own resources the pupil has :

- Language and communication development delayed by two years or more.
- Specialist equipment that requires ongoing daily support for its effective use.
- Personal and social learning support needs beyond that normally present in their peer group.
- A complex provision requiring input from a significant number of professionals (more than five) because of multiple needs.

Visual Impairment

Characteristics for Visual Impairment

- The child or young person has significant vision impairment and/or a deteriorating condition affecting vision.
- The child or young person's lack of vision severely impairs access to the curriculum.
- The child or young person requires near vision working, large print or braille medium
- The child or young person's attainments in National Curriculum core subjects is / or likely to be below potential indicated from other assessments, there may be an uneven pattern of progress and attainment. However appropriate provision should reduce the likelihood of long term attainment below age appropriate profile.
- The child or young person is likely to require specific Mobility and Living skills training to develop independence.

Assessments

Degree of Vision impairment will generally be severe or profound although additional factors such as a late diagnosis, deteriorating loss will be taken in to consideration.

Despite support from specialist teachers, trained support assistants and provision from within the school's own resources the pupil has

- Substantial modification requirements to access curriculum materials.
- Requirement for daily support to develop independence and mobility.
- Specialist equipment where the pupil requires ongoing daily support for its effective use e.g. Braille, tactile, speech access technology.
- Personal and social learning support needs beyond that normally present in their peer group.
- A complex provision requiring input from a significant number of professionals (more than five) because of multiple needs.

Multi-sensory Impairments

Characteristics for Multi-Sensory Impairment

- The child or young person has a hearing and vision impairment where in both modalities it meets the criteria for mild vision / hearing loss.
- The combination of vision and hearing impairment loss result in the child or young person having difficulty accessing learning unless substantial adaptations of teaching materials and delivery occurs .
- The pupils require regular 1:1 support to maintain learning and pace relative to potential outcome.
- Specialist support is required to develop mobility and independent living skills.

Assessments

Degree of Multi-sensory impairment will generally be moderate, severe or profound although additional factors such as a late diagnosis, deteriorating loss will be taken in to consideration.

Despite support from specialist teachers, trained support assistants and provision from within the school's own resources the pupil has :

- Language and communication development delayed by two years or more.
- Substantial modification requirements to access all curriculum materials.
- Requirement for daily support to develop independence and mobility.
- Specialist equipment where the pupil requires ongoing daily support for its effective use
- Personal and social learning support needs beyond that normally present in their peer group.
- A complex provision requiring input from a significant number of professionals (more than five) because of multiple needs.

Physical/Medical Disability

Characteristics for Physical/Medical Disability

- Significant physical, neurological or medical needs arising from a pre-existing or acquired condition which impacts on the child or young person's overall development and which is likely to persist over time.
- The need for mechanical or technological aids or assisted and augmentative communication to allow curriculum access.
- The child or young person's disability significantly affects their mobility in the educational setting despite reasonable adjustments in accordance with the Equality Act 2010.

Assessments

- Assessments should be supported by evidence/assessment from a community paediatrician, specialist medical consultant and therapists such as an Occupational Therapist/Physiotherapist/Speech & Language Therapist.
- Evidence that despite reasonable adjustments made by the school the child or young person's physical/neurological/ medical condition significantly impacts on their access to the curriculum.
- The child or young person has substantial difficulty accessing the curriculum without substantial adaptation of teaching materials resulting in attainment levels significantly below the child or young person's other assessed abilities.
- Assessments indicate specialist support is required for mobility and independent living skills.

7. Issuing an Education, Health and Care Plan

The Local Authority will consider two strands when it decides whether or not to issue an Education, Health and Care plan at the conclusion of an EHC assessment:

The child's learning difficulties

- Does the information on the child's learning difficulties provided in the advice for the EHC assessment broadly accord with the original evidence presented by the education setting?
- If not, are there aspects of the child's learning difficulties which the education setting may have overlooked and which, with the benefit of advice, equipment or other provision, setting could effectively address through their *SEN Support*.

The child's special educational provision

- Do the proposals for the child's special educational provision arising from any of the assessment advice indicate that the special educational provision being made by the education setting, including teaching strategies or other approaches, is appropriate to the child's learning difficulties?
- If not, are there approaches which, with the benefit of advice, equipment or other provision, the education setting could effectively address through their *SEN support*.

Issuing an Education, Health and Care Plan

In deciding whether to draw up an EHC plan, the LA will consider all the information from the EHC assessment in the light of the evidence put forward by the parent or the education setting at the beginning of the assessment. It will consider whether there is evidence specific to the individual circumstances of the case that indicates that an EHC plan should be made irrespective of the threshold in this document.

In deciding that it must make a statutory plan, the Local Authority must be satisfied that the information that emerges from the EHC assessment confirms the child has SEN that:

- are significant and/or complex; and
- remain or have not been remedied sufficiently, despite the education setting, with the help of external specialists, having taken relevant and purposeful action to meet the learning difficulties; and

- may require the LA to determine the child's special educational provision – particularly if this calls for special educational provision which cannot reasonably be provided within the resources normally available to mainstream maintained schools and settings in the area.

Deciding not to issue an EHC plan

The LA may conclude, as a result of the EHC assessment, that the child's SEN **can** be met from the resources within the education setting, with or without the intervention of a professional service from outside, e.g. provision can be made through the setting's SEND local offer.

It will not issue an EHC plan where:

- the information on the child's learning difficulties does not accord with the evidence presented by the education setting for consideration by the LA before the assessment commenced.
- the proposals for the child's special educational provision being made by the education setting, including teaching strategies or other approaches, are appropriate to the child's learning difficulties and do not call for resources beyond those usually available to the school.
- there are approaches, which with the benefit of advice, equipment or other provision the education setting could effectively adopt within its resources.

The EHC assessment will have contributed significantly to the education setting, parents' and the LA's knowledge of the child. The LA will therefore consider issuing an **SEN support plan***; setting out reasons for its conclusions, with supporting evidence from the EHC assessment. All advice collected as part of the assessment will be sent to parents, and, subject to their agreement, to the child's education setting and any other professionals who have given advice during the assessment process.

*Where a child or young person has been identified as having SEN, schools and early year's providers should take action to remove barriers to learning and put effective special educational needs in place, described as SEN support.

CYPDS

Version 3: December 2015

Review: July 2016

Appendices

- APPENDIX 1** RBWM SEND Panel - A decision pro-forma for assessing applications for EHC needs assessment
- APPENDIX 2** Quick reference checklist for referral for EHC assessment
- APPENDIX 3** RBWM Guidance for Requesting an Education, Health & Care Plan Assessment
- APPENDIX 4:** Taken from Gov.UK: SEN (Special Educational Needs) support
- APPENDIX 5:** Sensory Loss Tables Guidelines

APPENDIX 1

Royal Borough of Windsor & Maidenhead SEND Panel

Decision for assessing applications for EHC needs assessment

The pro-forma is used to ensure equity around the decision making process, but if there is a compelling reason to warrant a departure from RBWM guidance regarding a child or young person's individual Special Educational Needs, this will be considered.

Page 145, para 9.14 of the Code of Practice states:

In considering whether an EHC needs assessment is necessary, the local authority should consider whether there is evidence that despite the early year's provider, school or post-16 institution having taken relevant and purposeful action to identify, assess and meet the SEN of the child or young person, the child or young person has not made expected progress. To inform their decision, the local authority will need to take into account **a wide range of evidence**, and should pay particular attention to:

- Evidence of academic attainment (or developmental milestones in younger children) and rate of progress
- Information about the nature, extent and context of the SEN
- Evidence of the action already being taken by the EY provider, school or post-16 institution to meet the SEN
- Evidence that where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided
- Evidence of the child or young person's physical, emotional and social development and health needs, drawing on relevant evidence from clinicians and other health professionals and what has been done to meet these by other agencies, and
- Where a young person is aged 18 or over, the local authority must consider whether the young person requires additional time, in comparison to the majority of others of the same age who do not have SEN, to complete their education or training. Remaining in formal education or training should help young people to achieve education and training outcomes, building on what they have learned before and preparing them for adult life.

Decision pro-forma for applications for EHC needs assessment

Child's name:

Date of panel meeting:

Date of birth:

Current school/setting:

Checklist for each application (rated 0 to 3 for the left side box based on the evidence provided in the application, and comment on likelihood of need to proceed in the right hand box).

Evidence of Need

0 = no evidence of need provided

1 = sketchy or insufficient evidence of need

2 = adequate information of evidence of need

3 = excellent and informative information,
on evidence of need

Indication to proceed

0 = highly unlikely

1 = possible

2 = likely

3 = clear cut

	Evidence of Need	Indication for proceeding
Academic attainment		
Info on the SEN		
Action taken so far		
How much and for how long		
PSHE needs and health support		
Over 18 need for education		
How different from majority		
Statement of outcomes sought		
	Total:	

Guidance for making a decision

Evidence of need	Indication to proceed
15 or above: Clear evidence of need	15 or above: proceed
10 to 14: some evidence of need, but not clear	10 -14: request more info
Below 10: insufficient evidence of need	Below 10: Decision not to proceed

Decision to proceed: YES/NO

Further notes:

APPENDIX 2

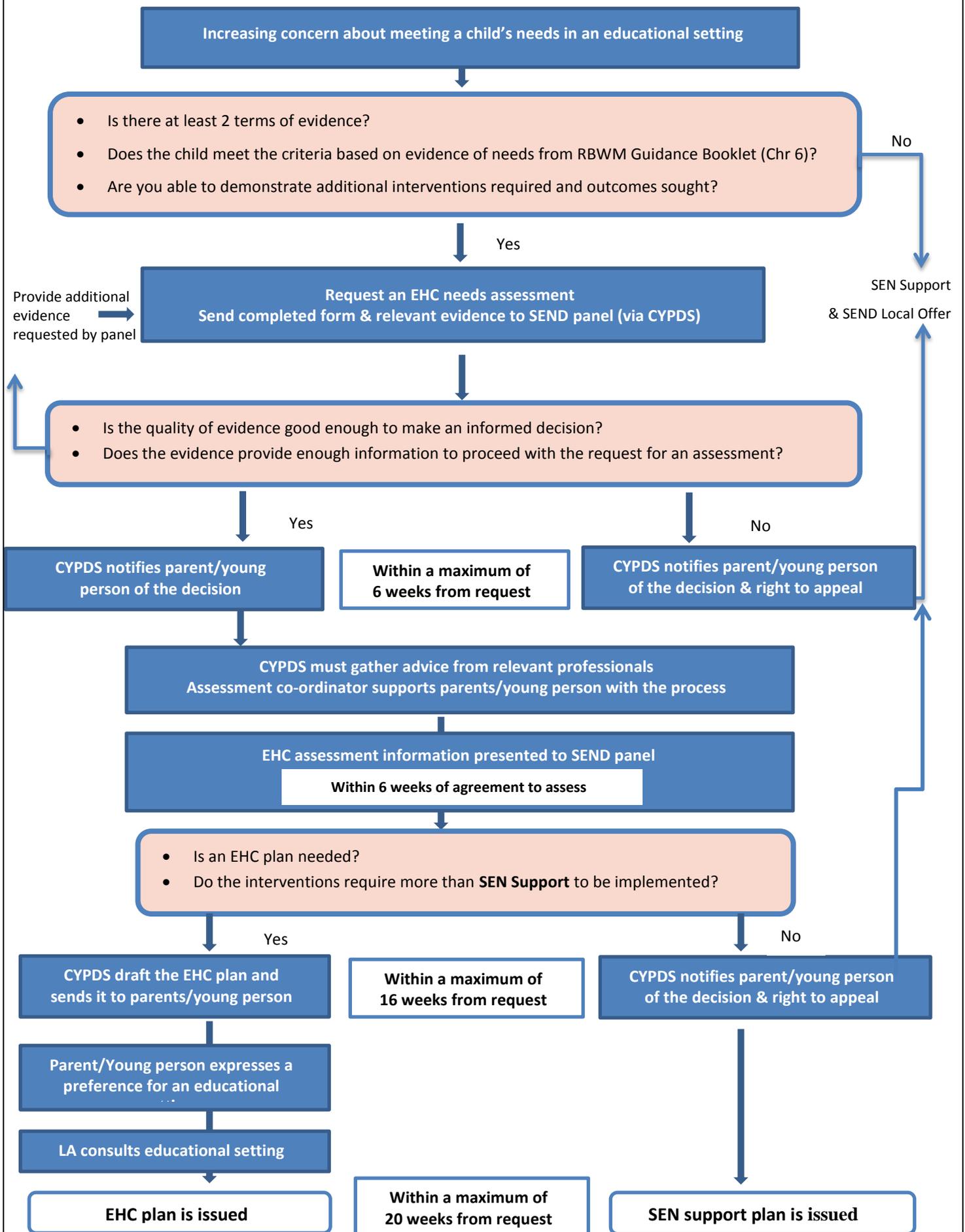
QUICK REFERENCE CHECKLIST FOR REFERRAL FOR EHC ASSESSMENT

The checklist below will help you to ensure that you have provided a comprehensive evidence base. If you cannot check all statements, it may be helpful to contact the CYPDS or wait until you have more evidence to ensure the panel are able to make an informed decision.

EVIDENCE BASE	Early Years setting	School
Evidence that the child's performance has remained at a significantly low level compared with the majority of children or young people, despite intervention. Progress is not commensurate with ability.		
Evidence that parents and the child been actively involved and their views incorporated in the child or young person's individual plan.		
Evidence that SMART targets have been put in place and reviewed and evaluated at least termly		
Evidence of consultations with external specialists (e.g. EP, Salt) and how recommendations have been implemented. Evidence that the child's progress has been tracked and that it continues to be significantly less than would be expected of a child or young person of similar age and ability/ developmental level.		
Evidence that strategies used and specific teaching interventions have been thoroughly evaluated over a period of no less than 2 terms (based on 3 term year). That modification has taken place and alternatives tried.		
Evidence that the school has provided the additional support if required (equivalent to approximately 16 hours per week)		
Support over a period of 2 terms and the evidence clearly specifies how the support was used.		
Include a costed individual provision map and evidence of the impact of these interventions.		
Evidence of increased access to technology or other resources and adaptations where appropriate.		

APPENDIX 3

RBWM Guidelines for Requesting an Education, Health & Care Plan Assessment



APPENDIX 4

Taken from Gov.UK: SEN (Special Educational Needs) support

Your child will get special educational needs (SEN) support at their school or college.

Your child may need an [EHC plan](#) if they need more support than their school provides.

Children under 5

SEN support for children under 5 includes:

- a written progress check when your child is 2 years old
- a child health visitor carrying out a health check for your child if they're aged 2 to 3
- a written assessment in the summer term of your child's first year of primary school
- making reasonable adjustments for disabled children, e.g. providing aids like tactile signs

Nurseries, playgroups and child-minders registered with OFSTED follow the [Early Years Foundation Stage](#) (EYFS) framework.

The framework makes sure that there is support in place for children with SEN needs.

Talk to a doctor or health adviser if you think your child has SEN but they don't go to a nursery, playgroup or child-minder.

They'll tell you what support options are available.

Children between 5 and 15

Talk to the teacher or the SEN coordinator (SENCO) if you think your child needs:

- a special learning programme
- extra help from a teacher or assistant
- to work in a smaller group
- observation in class or at break
- help taking part in class activities
- extra encouragement in their learning, e.g. to ask questions or to try something they find difficult
- help communicating with other children
- support with physical or personal care difficulties, e.g. eating, getting around school safely or using the toilet

Young people aged 16 or over in further education

Contact the college or academy before your child starts further education to make sure that they can meet your child's needs.

The college and your local authority will talk to your child about the support they need.

APPENDIX 5

Hearing Impairment

The British Society of Audiology descriptors have been adopted for hearing loss. These descriptors are based on the average hearing threshold levels at 250, 500, 1000, 2000 and 4000Hz in the better ear where *no response* is taken to have a value of 130 dBHL.

Mild hearing loss	Unaided threshold 21-40 dBHL
Moderate hearing loss	Unaided threshold 41-70 dBHL
Severe hearing loss	Unaided threshold 71-95 dBHL
Profound hearing loss	Unaided threshold in excess of 95 dBHL

Visual Impairment

Mild vision loss	Within the range 6/12 – 6/18 Snellen/Kay (LogMAR 0.3 - 0.48)
Moderate vision loss	Less than 6/18 – 6/36 Snellen/Kay (LogMAR 0.5 - 0.78)
Severe vision loss	Less than 6/36 - 6/60 Snellen/Kay (LogMAR 0.8 - 1.00)
Profound vision loss	Less than 6/60 Snellen/Kay (LogMAR 1.02)

Multi-sensory Impairments

Mild multi-sensory loss	Dual impairment with a mild loss in both modalities
Moderate multi-sensory loss	Dual impairment with a moderate loss in both or the most affected modality
Severe multi-sensory loss	Dual impairment with a severe loss in both or the most affected modality
Profound multi-sensory loss	Dual impairment with a profound loss in both or the most affected modality