

<b>Child's Name:</b> <i>Freddie Smith</i>	<b>DoB:</b> <i>02.03.12</i>	<b>Setting:</b> <i>Happy Times Nursery</i>	<b>Target Plan Number:</b> <i>1</i>
<b>Key Person/Supported By:</b> <i>K P Erson</i>		<b>Area of Concern (please indicate):</b> <i>Communication &amp; Interaction, Cognition &amp; Learning, Social, Emotional and Mental Health, Sensory and/or Physical Needs.</i>	
<b>Start Date:</b> <i>1<sup>st</sup> January 2015</i>		<b>Intended Review Date:</b> <i>10<sup>th</sup> February 2015</i>	

<b>What does the child find difficult?</b>	<b>Target</b>	<b>Who is going to help? When? What resources will the adult need? What does the adult need to do?</b>	<b>What does the child need to do to succeed?</b>
<i>1. Freddie is not able to join in with parts of the routine due to him not understanding the verbal instruction given</i>	<i>To follow a simple 1 key word instruction</i>	<ul style="list-style-type: none"> <li><i>All staff to use short, clear, consistent instructions alongside gesture and visual cues.</i></li> <li><i>Use Freddie's name before giving instruction.</i></li> <li><i>Use objects of reference alongside verbal instructions.</i></li> </ul>	<ul style="list-style-type: none"> <li><i>Put away a toy when requested (Tidy up time)</i></li> <li><i>Wash his hands when requested before snack.</i></li> </ul>
<i>2. Freddie is speaking using single words only</i>	<i>To begin to link 2 words together</i>	<ul style="list-style-type: none"> <li><i>Modelling 2 word phrases</i></li> <li><i>Staff to add a word onto Freddie's single word</i></li> <li><i>Follow recommendations from SALT</i></li> </ul>	<ul style="list-style-type: none"> <li><i>Repeat a 2 word phrase</i></li> <li><i>To say 'more apple/milk' at snack time.</i></li> </ul>

<b>Signed:</b> <i>A N Other</i>	<b>(Manager/SENCO)</b>
<b>Signed:</b> <i>J Smith</i>	<b>(Parent/Carer)</b>

Target	Has the target been achieved? Provide evidence
<p>1. To follow a simple 1 key word instruction</p>	<p>Achieved <input checked="" type="checkbox"/> Not achieved <input type="checkbox"/></p> <p>Freddie is now able to follow a 1 word instruction if he is shown an object or picture of reference e.g. At snack-time Freddie is shown a picture of the snack table and asked to get a cup. When a gesture for washing hands is shown he will go to the bathroom.</p>
<p>2. To begin to link 2 words together</p>	<p>Achieved <input type="checkbox"/> Not achieved <input checked="" type="checkbox"/></p> <p>Freddie occasionally echoes back 2 word phrases but is not spontaneously using 2 words. At snack time he will still point to milk jug saying 'milk'.</p>
<p><b>Parental Contribution/views</b></p> <p>Freddie's Mum states that she has been trying to reduce the words she uses when speaking to him at home. She believes this is having a positive impact.</p> <p>Mum informed us that SaLT has given her some leaflets with ideas for activities to support Freddie in putting 2 words together.</p> <p>Signed : <u>  <i>J Smith</i>  </u> Date: <u>  12.02.15  </u></p>	

**Further Planned Intervention**

**Cease EY SEND Support/monitor child's learning and development**

**Maintain at EY SEND Support**

**Referral to outside agency (Please specify): \_\_\_\_\_**

**Complete CAF**

**EHCNA Request**

**SENCO signature: *A N Other***

**Date: February 2015**

## Children's Specialist Service SEND Early Years Qualified Teachers

Our Early Years Qualified Teachers have significant teaching experience in Early Years learning environments, including identifying and teaching children with a range of additional needs.

### Within your setting their role might be:

- Individual child observations
- Liaising with SENCO, Key Person and Parents to discuss recommendations
- Supporting SENCOs in completing additional needs paper work, including support in writing a request for an Education, Health and Care Needs Assessment
- Planning and monitoring intervention programmes
- Working directly with children with additional needs
- Delivering the training for Early Language Development Programme and monitoring children at risk of language delay
- Supporting the identification of "Gifted & Talented" Children
- Supporting the behaviour management coordinator with implementing SEAD (Social, Emotional Aspects of Development)
- Delivering the SENCo network updates
- Supporting and challenging continuous quality and improvement within the EYFS (Early Years Foundation Stage) Framework
- Identifying appropriate intervention for children at risk of developmental delay
- Reviewing the use of any EYIP (Early Years Inclusion Panel) funding or mentor support
- Monitoring the outcomes for children receiving EYIP support

### CSS SEND Early Years Qualified Teachers

#### CSS SEND Early Years Lead

#### Hadley Castle

#### Hadley Castle

#### The Wrekin

#### Lakeside South



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## Early Years Inclusion Mentors

Our Early Years Inclusion Mentors have a range of experience relevant to working with young children. They work in foundation settings across the authority. The main focus of their work will be addressing barriers to learning and promoting positive behaviour.

### Within your setting their role might be:

- To support the named individual child's needs, to work on a one to one basis as well as supporting the child within a group.
- To work alongside the referred child's Key Person modelling appropriate strategies etc.
- To accompany the class teacher or CSS SEND Early Years Qualified Teacher during home visits.
- To liaise with parents where appropriate.
- To attend TAC meetings where appropriate.
- To provide specific support for a child with behavioural problems, for visits or other events.

### However their role does not include:

- Carrying out the duties of a teaching assistant or practitioner.
- Working with other children experiencing behavioural difficulties or other problems.
- Leading groups of children.
- Remaining in a setting if the "named child" is absent

### Hadley Castle



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### The Wrekin



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The Early Years Inclusion Mentors are managed by

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COUNCIL



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**Protocol for  
Children's Specialist Service  
SEND Early Years Team  
working in settings and schools**

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### Responsibilities of the setting

Obtain parental permission for observation before contacting the EIQT
Welcome the teacher/mentor is welcomed and ensure the visitor book is signed
Agree confidentiality
Share relevant policies and procedures with the mentor
Arrange time for the setting/school practitioner to receive feedback from the teacher/mentor
Share planning with the teacher/mentor
Release time for the setting/school practitioner to be involved in writing IEP/IBP and reviewing it
Work towards shared targets on IEP/IBP
Notify teacher/mentor as soon as possible if a 'named child' is absent from the setting
Share relevant paperwork/ information with teacher/mentor
Arrange appointments between parents and teacher when required
Monitor use of any funding/resources/mentor time and to submit the review form to EYIP promptly
Provide staff to model and shadow in order to upskill the setting/school staff

### Responsibilities of the teacher/mentor

	Teacher	Mentor
Be sensitive to different ways of working and different styles of <i>delivery</i>	✓	✓
Agree confidentiality	✓	✓
Ensure the setting/school is clear about teacher/mentor input and timescales	✓	
Find out about policies (including Behaviour) and reward systems within the setting/school		✓
Agree with the setting/school how the targets may be met - 1:1 work, small group etc.		✓
Mentor to contact the appropriate teacher if there are concerns related to supporting the setting/school		✓
Provide regular feedback to the setting/school practitioners		✓
Build positive relationships with adults and children in the settings/schools	✓	✓
Maintain records of support, which will be shared with the setting/school before the reviews of IEP/IBP or EYIP support		✓

## Cognition and Learning Education Health and Care Needs Assessment (EHCNA) Guidance

Despite graduated school support, the pupil requires higher level specialist resourcing which is different from and additional to the SEN core offer, to access the full curriculum.

Extreme difficulties in accessing the curriculum through reading and writing, despite the use of a range of alternative methods.

There is clear evidence that external professionals such as advisory teachers, Educational Psychologists, have been involved in carrying out a comprehensive assessment of the pupil's strengths and difficulties. They will have advised on the pupil's plan. The impact of these strategies and interventions will have been evaluated over time (at least one term) and resulted in minimal progress.

Telford and Wrekin adhere to the British Psychological Society's definition of Dyslexia (1999):- 'Dyslexia is evident when accurate and fluent word reading and/or spelling develops very incompletely or with great difficulty. This focuses on literacy at the word level and implies that the problem is severe and persistent despite appropriate learning opportunities.'

The pupil may have general learning difficulties and attainments that are recorded at the 1<sup>st</sup> percentiles or lower for a range of skills, using standardised assessment.

The pupil's rate of progress will be consistently low relative to their cognitive ability.

**Supporting evidence will include:-**

Assessment, Planning and Review	Grouping for Teaching	Curriculum and Teaching Methods	Human Resources
<p>There is clear evidence that the level of professional input such as advisory teachers, educational psychologists have been on a regular basis.</p> <p>There has been a successive programme of advice from external agencies implemented over time.</p> <p>Consideration has taken place whether it is appropriate to support the family and child's needs through the CAF and TAC process.</p>	<p>The pupil has to access considerable additional targeted teaching in small groups or individually for at least half the day.</p> <p>The extent of additional and different organisation required is in excess of what would normally be provided in school provision ie as specified within the Local Offer.</p>	<p>Access to higher levels of differentiation normally provided within SEN support.</p> <p>Access to teaching of specific targeted skills using evidence based interventions such as Precision Teaching 1:1 daily,</p> <p>Toe by Toe, Beat Dyslexia small group 20 mins, 2x/week, Nesy-individual 20mins 3x/week</p>	<p>SENCO or specialist teacher to provide appropriate set targets for individual.</p> <p>Access to evidence based teaching programmes for literacy, numeracy and general learning difficulties.</p>

## Communication and Interaction Education Health and Care Needs Assessment (EHCNA) Guidance

Despite graduated school support, the pupil requires higher level specialist resourcing which is different from and additional to the SEN core offer, to access the full curriculum.

Speech, Language and Communication needs: **SLCN**

There is considerable evidence that the pupil displays:-

- Receptive and expressive language skills within the 1<sup>st</sup> and 2<sup>nd</sup> percentiles indicating a severe language delay or disorder.
- Significant difficulties understanding others.
- Significant difficulties communicating their thoughts and ideas with others
- Significant interaction difficulties as a result of their speech and language communication challenges.

Autistic Spectrum Disorder: **ASD**

- High levels of social isolation which prevents the establishment of consistent relationships with peers and /or adults.
- Highly atypical behaviours such as obsessive, challenging or withdrawn to the extent that it prevents their inclusion in a well planned and supported curriculum.
- Consistently unable to adapt to changes in routines in well planned time tables including highly differentiated class/subject teaching.
- Significant difficulties with social interaction.
- Presentation of high levels of anxiety associated with ASD that prevents access to curriculum and engagement with peers.
- Problems with language communication and imagination that impacts on engagement with peers and adults

**Supporting evidence will include:-**

<b>Assessment, Planning and Review</b>	<b>Grouping for Teaching</b>	<b>Curriculum and Teaching Methods</b>	<b>Human Resources</b>
<p>Evidence that over time regular TACs have been held with the family/carers and external professionals (meetings between school and parents do not constitute a TAC but can be appended to next TAC). Action plans have been implemented and evaluated.</p> <p>There is clear evidence that the level of professional input such as SALT, Advisory Teachers; Educational Psychologists; social worker; CAMHS workers etc has been on a regular basis.</p> <p>There has been a successive programme of advice in relation to communication and interaction /Autism from external agencies implemented over time.</p> <p>Systematic monitoring of students progress show that the interventions and provision is having a limited impact.</p>	<p>The school SEND offer is clear and accessible to all students parents/communities</p> <p>The pupil has access to considerable additional targeted teaching in small groups or individually for the significant part of each day.</p> <p>The extent of additional and different organisation required is in excess of what would normally be made from school provision through the graduated response i.e. is within the higher needs bracket above 15 hours support per week.</p> <p>Some pupils may have needs that are better met through more specialist provision such as SALTIS, advice from Outreach service, advisory teacher (ASD) service or educational psychology service.</p>	<p>Curriculum access through the usual mainstream groupings may not be appropriate for most areas of the academic curriculum.</p> <p>Extensive individualised programmes will be required to support the pupil’s social and emotional, communication and sensory needs.</p> <p>This may involve the use of autism-specific teaching techniques or alternative communication methods supported by appropriate equipment and materials. This should include Autism Environment Audit.</p> <p>Teaching interventions will be part of a multidisciplinary approach e.g. SALT, OT.</p> <p>Programmes may include:-</p> <p>Language Steps, Language Land, Listen with Lucy, Teaching Talking, Secondary Talk, Build to Express, Social Stories.</p>	<p>There is strong evidence that there is a whole school approach to meeting the needs of the pupil with communication and interaction difficulties / Autism i.e. Autism policy; strategic aims; development of in-house provision; commitment to training in this area.</p> <p>The SENCo should lead on assessment, planning and evaluation in liaison with pastoral staff and external professionals</p> <p>Teachers/TAs with additional qualifications in SEND and experience of working with pupils with social communication difficulties or Autism are likely to be involved in providing for the pupil.</p> <p>There is consistent active parent/carer involvement in programmes offered to support them and their child e.g. EarlyBird, EarlyBird Plus, Cygnets. Opportunities for parents to access parent support groups.</p> <p>e.g PODs, STAR Group,</p>

## Social, emotional and mental health difficulties Education Health and Care Needs Assessment (EHCNA) Guidance

Despite graduated school support, the pupil requires higher level specialist resourcing which is different from and additional to the SEND core offer, to access the full curriculum.

The pupil will have very limited access to the curriculum due to the significant, challenging behaviours they present.

These behaviours may be associated with a mental health condition.

There will be evidence of extreme, complex emotional and behavioural difficulties of considerable duration and frequency in a variety of school situations, resulting in adverse consequences for pupil and severely affecting other pupils and adults in a detrimental way (e.g. unpredictable, bizarre, obsessive, violent, dangerous or severely disruptive behaviour).

Extreme complex emotional behaviour difficulties can also include severe self harming and avoidance of social interaction.

### Supporting evidence will include:-

Assessment, Planning and Review	Grouping for Teaching	Curriculum and Teaching Methods	Human Resources
Evidence that over time regular TACs have been held with the family/carers and external professionals (meetings between school and parents do not constitute a TAC but can be appended to next TAC). Action plans have been implemented and evaluated.	The pupil has access to considerable additional targeted teaching in small groups or individually for the greater part of each day.  The extent of additional and different organisation required is in excess of what would normally be provided in school provision <i>i.e.</i> as	Additional activities and different activities will be required to retain the pupil's application and interest in the curriculum.  Alternative programmes of study should be provided using or setting up facilities within the school or off site provision where appropriate.	The SENCo should lead on assessment, planning and evaluation in liaison with pastoral staff and external professionals  Teachers/TAs with additional qualifications and/or experience of pupils with very significant emotional and behavioural difficulties are involved in providing

<p>Evidence that the family in which the child resides has received support from Early Help and Family Intervention Practitioners</p> <p>There is clear evidence that the level of professional input such as Advisory Teachers; Educational Psychologists; Social workers; CAMHS workers etc has been on a regular basis.</p> <p>There has been a successive programme of advice from external agencies implemented over time.</p> <p>Systematic monitoring of students progress show that the interventions and provision is having a limited impact.</p>	<p><i>specified within the Local Offer</i></p> <p>Some pupils may have needs that are better met through more specialist provision either for a short term measure or long term placement.</p>	<p>Extended individualised programmes of study, behaviour and emotional support will be required to access the curriculum. Interventions and support may include circle of friends, SEAL materials, peer mentoring, counselling support, visual timetables, individual learning passports, Build to Express.</p>	<p>for the pupil.</p> <p>Multiagency direct involvement is in place for pupils with substantial support from visiting specialists.</p> <p>There is strong evidence that there is a whole school approach to meeting the needs of the pupil with social, emotional and behavioural needs i.e. behaviour policy; strategic aims; development of in-house provision; commitment to training in this area</p> <p>There is consistent active parent/carer involvement in programmes offered to support them and their child i.e. Incredible years; Lets get Cooking; Why weight?;</p>
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## Sensory and Physical EHC Needs Assessment Guidance

### **Visual Impairment**

The pupil has a severe or profound visual impairment which impacts extremely upon behaviour and on individual learning/learning environment.

There will be evidence of long term curriculum access issues and there will be major training issues for staff supporting the pupil.

### **Hearing Impairment**

Children and Young People who have a permanent bilateral sensori-neural hearing loss which has resulted in considerable Receptive and /or Expressive linguistic delay as evidenced by scores on standardised linguistic assessments.

CYP who, when assessed using NatSIP Criteria (National Sensory Impairment Partnership) require ongoing regular frequent support, of at least fortnightly frequency, from a Teacher of the Deaf.

Without a high level of specialist SIS support, attainment levels are unlikely to reflect ability levels and will present a barrier to inclusion in local educational settings and progression to FE/HE/training/employment.

### **Physical**

The physical difficulties/medical condition is complex, severe and long-term. The pupil requires daily individual interventions from a suitably trained adult and support on a long term basis which is over and above that which schools are expected to provide which costs up to a nationally prescribed level per pupil per year. There will be clear evidence provided by the relevant medical consultant supporting the level of provision within the request information.

Such pupils may have additional learning, communication or behaviour difficulties requiring specialist intervention. They may exhibit emotional/behavioural problems (withdrawal, disaffection, reluctance to attend). Rate of learning may be affected by absences, fatigue, medication

<b>Assessment, Planning and Review</b>	<b>Grouping for Teaching</b>	<b>Curriculum and Teaching Methods</b>	<b>Human Resources</b>
<p>The LA undertakes identification, assessment and planning with a multi-professional focus and issues an Education, Health and Care Plan.</p> <p>The Education, Health and Care Plan will specify long-term outcomes and plans for provision. The Provision Map is drawn up from the long-term outcomes and should be reviewed at least three times a year.</p> <p>A Qualified Teacher of the Visually Impaired (QTVI) assists school/setting by assessing functional vision, assessing need for Braille or large print; advising on equipment required, assessing the school/setting access facilities and planning for learning and physical adaptations.</p> <p>The Provision Map will include vision specific targets, delivery methods and evaluation techniques.</p> <p>There is clear evidence that the level of professional input from Advisory Teachers and other allied professions is at a high level and ongoing, at least fortnightly in frequency.</p>	<p>The pupil has access to additional targeted teaching in group time or individually for part of each day. This may include:</p> <ul style="list-style-type: none"> <li>• Small group/individual time for practising new skills;</li> <li>• Individualised teaching of new or specialist skills</li> <li>• Training for mobility and independence in and around the school/setting</li> </ul> <p>Training in the use of specialist technological equipment.</p> <p>The pupil has access to considerable additional targeted teaching in small groups or individually for significant parts of the school day</p> <p>The extent of additional and different organisation required is in excess of what would normally be provided in school provision <i>i.e. is within the higher needs bracket above 15 hours support</i></p> <p>Some pupils may have needs that are better met through more specialist provision either for a short term measure or long term</p>	<p>Individualised programmes may be required. This may involve the use of specialised equipment or teaching techniques or alternative access methods such as Braille (including tactile media), large print use, specialist low vision aids or auditory means.</p> <p>Joint planning by the key-worker/teacher and the Qualified Teacher of the Visually Impaired or therapist or school nurse to give time for preparation and adaptation of accessible materials.</p> <p>Adaptation of teaching methods e.g. encouraging greater verbalization during lesson delivery, enabling handling or close inspection of materials.</p> <p>Usual mainstream groupings may not be appropriate for some areas of the academic curriculum. Extensive individualised programmes may be required.</p> <p>This may involve the use of specialised teaching techniques or alternative access methods supported by</p>	<p>Where the LA maintains Education Health and Care plan, SEND officers will monitor this via the Review on an annual basis in partnership with parents/carers SIS or therapists and other relevant specialist agencies.</p> <p>Advisory and direct teaching support/pre-tutoring from a Qualified Teacher of the Visually Impaired (QTVI), of at least fortnightly frequency.</p> <p>Involvement of other SIS professionals as recommended by the QTVI. These may include specialist mobility input, ICT and low vision aid referrals.</p> <p>Ongoing direct support and advice from external specialists will be provided as specified in the Education Health and Care plan.</p> <p>It is recommended that school/setting staff attend SIS-VI Annual Course and also school/setting based INSET is delivered. The SENCo should lead on planning and evaluation in partnership with parents/carers, the Sensory Inclusion Service and other relevant specialist agencies.</p> <p>Substantial support from visiting Teacher of the Deaf (between 1 and 3 visits per week) to advise and support the school in meeting the CYP needs.</p>

<p>There is clear evidence of the need for ongoing School/</p> <p>Teacher of the Deaf planning meetings to meet pupil need with at least annual video recording by Sensory Inclusion Service to plot longitudinal linguistic progress and development of the skills essential to access the curriculum.</p> <p>Provision is reviewed at least annually, with those involved in meeting the CYP's needs.</p> <p>A decision is made at each Review as to whether the pupil continues to require a high level of intervention and is monitored by SEND officers annually.</p> <p>The Provision Map will include vision specific targets, delivery methods and evaluation techniques.</p> <p>The Education, Health and Care plan will be reviewed at least annually with those involved in meeting the needs of the pupil contributing to the Review. A decision is made at each Review as to whether the pupil continues to require and Education, Health and Care plan. Or whether the needs of the pupil can be met at School Support Level.</p> <p>The LA monitors the outcome of the Review annually.</p> <p>The LA undertakes identification, assessment and planning</p>	<p>placement.</p> <p>The Teacher of the Deaf liaises with the SENCo/ class teacher and/or subject teachers on issues such as</p> <ul style="list-style-type: none"> <li>a) Acoustics</li> <li>b) Radio Aid use</li> <li>c) Social and emotional issues</li> <li>d) Curriculum access</li> <li>e) Inclusion issues</li> </ul> <p>The pupil has access to additional targeted teaching in group time or individually for part of each day. This may include:</p> <ul style="list-style-type: none"> <li>• Small group/individual time for practising new skills;</li> <li>• Individualised teaching of new or specialist skills</li> <li>• Training for mobility and independence in and around the school/setting</li> </ul> <p>Training in the use of specialist technological equipment.</p>	<p>appropriate equipment and materials. Intervention may include :</p> <p>Weekly hearing aid, radio aid checks and electro-acoustic testing of this equipment by the Teacher of the Deaf.</p> <p>Advisory and direct teaching support/pre- tutoring from Teacher of the Deaf.</p> <p>Subject specific issues addressed, advice and implementation on appropriate access arrangements for internal and external examinations</p> <p>Individualised programmes may be required. This may involve the use of specialised teaching techniques or alternative access methods such as Braille (including tactile media), large print use, specialist low vision aids or auditory means.</p> <p>Joint planning by the key-worker/teacher and the Qualified Teacher of the Visually Impaired to give time for preparation and</p>	<p>Additional TA support time will probably be required in many lessons. For some pupils with exceptional needs there may be a requirement for support in school situations outside the classroom.</p> <p>There is strong evidence that there is a whole school approach to meeting the needs of the pupil with hearing loss ( inclusion policy; strategic aims; development of in-house provision; commitment to training such as uptake of places offered on the Sensory Inclusion Service one day course and school based INSET)</p> <p>There is consistent active parent/carer involvement in programmes offered to support the family and CYP.</p> <p>Where the LA maintains Education Health and Care Plan, LA officers will monitor this via the Annual Review in partnership with</p>
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<p>with a multi-professional focus and issues an Education, Health and Care Plan.</p> <p>The Education, Health and Care Plan will specify long-term goals and plans for provision. The IEP is drawn up from the long-term goals and should be reviewed not less than three times a year.</p> <p>A Qualified Teacher of the Visually Impaired (QTVI) assists school/setting by assessing functional vision, assessing need for Braille or large print; advising on equipment required, assessing the school/setting access facilities and planning for learning and physical adaptations.</p> <p>The Provision Map will include vision specific targets, delivery methods and evaluation techniques.</p> <p>The Education, Health and Care Plan is reviewed annually with those involved in meeting the needs of the pupil contributing to the Annual Review. A decision is made at each Annual Review as to whether the pupil continues to require and Education, Health and Care Plan. Or whether the needs of the pupil can be met at School Support Level.</p> <p>The LA monitors the outcome of the Annual Review.</p>		<p>adaptation of accessible materials.</p> <p>Adaptation of teaching methods e.g. encouraging greater verbalization during lesson delivery, enabling handling or close inspection of materials</p> <p>Individualised programmes may be required. This may involve the use of specialised teaching techniques or alternative access methods such as Braille (including tactile media), large print use, specialist low vision aids or auditory means.</p> <p>Joint planning by the key-worker/teacher and the Qualified Teacher of the Visually Impaired to give time for preparation and adaptation of accessible materials.</p> <p>Adaptation of teaching methods e.g. encouraging greater verbalization during lesson delivery, enabling handling or close inspection of materials</p>	<p>parents/carers SIS and other relevant specialist agencies.</p> <p>Advisory and direct teaching support/pre-tutoring from a Qualified Teacher of the Visually Impaired (QTVI).</p> <p>Involvement of other SIS professionals as recommended by the QTVI. These may include specialist mobility input, ICT and low vision aid referrals.</p> <p>Ongoing direct support and advice from external specialists will be provided as specified in the Education Health and Care Plan.</p> <p>It is recommended that school/setting staff attend SIS-VI Annual Course and also school/setting based INSET is delivered.</p>
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