



Yarrells School & Nursery

POLICY STATEMENT FOR ADDITIONAL AND SPECIAL EDUCATIONAL NEEDS AND DISABILITIES

Applicable for the whole school and Early Years Foundation Stage

Policy Lead (Position (and Initials)): **SENDCo (CC) and Deputy SENDCo (GR)**

Date of Last Review: **Jan 2022**

Date of Next Review: **Jan 2023**

Guiding Principles

This policy has been written with regard to:

- Equality Act 2010 and the Children and Families Act 2014
- Special Educational Needs Code of Practice 2014 (updated April 2020)
- Special Educational needs and Disability Regulations 2014
- Statutory guidance on Supporting Pupils with Medical Conditions 2014
- Health and Social Care Act 2012 and the Equality Act 2010
- Keeping Children Safe in Education 2022 (Updated Sept 2021)
- Working Together to Safeguard Children (Updated Dec 2020)

Terms

SEN refers to a Special Educational Need. As stated in the 2014 SEN Code of Practice:

A person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. At compulsory school age this means he or she has a significantly greater difficulty in learning than the majority of others the same age, or, has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools. Only children and young people who satisfy both elements of this definition have special educational needs.

AN refers to an additional need. Not identified as a Special Educational Need but a need none the less that is creating a barrier to learning. This could well be a social need.

SEND is a broader term that refers to an additional or special educational need or a need arising from a disability that requires service additional to that which is normally offered in school.

A child must not be regarded as having a learning difficulty solely because the language or form of language of the home is different from the language in which he or she will be taught.

Children can have special educational needs for a variety of reasons and for varying lengths of time. Some may be extremely able children who require extension and some may have specific literacy, numeracy or cognitive difficulties, which require specialist tuition and support. Others may have physical and/or sensory impairments.

Some needs are short term and subject specific, whilst, for example, as with dyslexic pupils, some difficulties persist and need long term provision.

“Dyslexia or specific learning difficulty is the term most often used to describe children who have significant difficulties in reading, writing, spelling and/or manipulation of numbers, which are not typical of their general level of performance. They may gain some skills in some subjects quickly and demonstrate a high level of ability orally, yet may encounter sustained difficulty in gaining literacy or numeracy skills.” (DfES 2001)

General Statement

Yarrells is an independent day school for boys and girls aged 2-13. Subject to places being available, Yarrells welcomes children of all faiths, cultures, races and family backgrounds. Yarrells values the individuality of all the children who attend irrespective of ethnicity, religion, attainment, age, disability, gender or background.

Under no circumstances will the cultural origins of a prospective pupil or member of staff disadvantage them in terms of access to the school or promotion within the school.

At Yarrells, the number of places is limited in order to maintain class sizes. Parents are advised to submit applications for a place as early as possible to avoid disappointment. If a class is full, parents may place their child on a waiting list.

According to the availability of places, children may be admitted into the school at any time, where they will be placed in the appropriate year group according to their age.

We are committed to making every possible provision to allow children full access to all aspects and areas of the curriculum.

We value the individuality of all of our children. We are committed to giving each child every reasonable opportunity to achieve the highest of standards. The achievements, attitudes and well-being of all our children matter. Yarrells promotes the individuality of all our children, irrespective of ethnicity, religion, attainment, age, disability, gender or background.

We aim to provide a positive and supporting environment where all children are provided with extensive and balanced learning opportunities. Our philosophy is that all children should have the chance to develop to their full potential. Support is given to children across the range of ability and throughout the age range.

We endeavour to ensure that no stigma is attached to this help and that learning support is seen as a normal and integral part of the school day. The outlook of staff and pupils is very positive and children are very supportive of each other.

Within any school, a good working relationship with parents is paramount to the education and development of every child. Working in partnership with parents is of major value and importance to Yarrells School in enabling it to provide a happy, caring and stable environment for children. We aim to form a good relationship with parents so that information regarding their children (be it developmental, emotional, social or health related) can be exchanged easily and comfortably by staff and parents.

Yarrells School is also committed to working with outside agencies as appropriate, in order to support the children that attend the School. We will seek out the advice and expertise of outside agencies and professionals where it is deemed to be in the best interests of the child.

Our specific objectives are:

- ✓ That all pupils should have full access to a wide and varied curriculum and that this curriculum should help to equip them for their future school career and for adult life.
- ✓ To apply a whole school policy to meeting each child's individual needs following the guidelines of the 2014 SEN Code of Practice, Equality Act 2010 and the Children and Families Act 2014.
- ✓ To identify, at the earliest opportunity, barriers to learning and participation for pupils with SEND (see also curriculum and assessment policies)
- ✓ To provide different levels of intervention to match the child's level of need.
- ✓ To ensure that no child is discriminated against, in any area of school life, on the basis of his/her disability.
- ✓ To provide pastoral care and support for all children so that they develop in all areas and build a strong sense of self-esteem.
- ✓ To ensure that children's records include information relating to their individual needs, the interventions which have been provided to meet those needs and their outcomes.
- ✓ To conduct regular reviews of the child's progress.
- ✓ To work in partnership with parents at all stages.
- ✓ To include pupils in setting targets for their Individual Education Plan.
- ✓ To give each child the greatest opportunity and encouragement to reach their full potential.
- ✓ To enhance self-esteem through genuine praise and encouragement, and to offer opportunities for each child to find success in their areas of strength, whether this be in academic subjects, art, drama, music, or sport.
- ✓ To maintain a positive and effective working relationship with parents, pupils and other professionals who may, at times, provide extra support.

Children with Exceptional Abilities

Yarrells recognises that very able children have exceptional needs and therefore opportunities for curriculum extension and enrichment will be made available for these pupils in all phases from the Early Years onwards. Yarrells is committed to enriching the learning process for very able children and extending these pupils so they thrive in a challenging educational environment.

Admission policy: Equality and Inclusion

Children who apply for a place at Yarrells School will usually be accepted if the Head and SENDCO are satisfied that the school can meet the needs of the child.

Children entering the school will normally spend a day in the classroom with their year group. Teachers will provide feedback to the Head and SENDCO on their perceptions of the child's integration and general academic ability during the day.

Any child who, at admission interview, appears to have SEN, AN or SEND, may be referred to the SENDCO for further assessment so that the school is able to provide appropriate intervention on arrival.

Should a child already have identified SEN, AN or SEND, relevant reports should be made available to the school prior to, or at, the admission interview.

The school recognises its duty not to discriminate against pupils who have a disability, recognising the duties under the Equality Act 2010. It has a due regard to general duties to promote disability equality.

On registration, parents should give details about their child's disability. The school will then consult with the parents and where necessary, other professionals, to determine what reasonable adjustments could be made so the child has access to the school and its curriculum.

Medical conditions

Yarrells School has arrangements in place to support pupils with medical conditions as stated by The Children and Families Act 2014, and the statutory guidance on 'Supporting pupils at school with medical conditions'. Individual health care plans are in operation and state the type and level of support required to meet the individual needs of the pupils.

Roles and Responsibilities:

The **Head, assisted by the Senior Leadership Team**, has overall responsibility for the day-to-day management of all aspects of school work, including provision for children with SEN, AN and SEND.

The Special Educational Needs Coordinator (Head of Learning Support), working closely with other teachers, has responsibility for the day-to-day operation of the school's SEN policy and for coordinating provision for pupils with special educational needs.

The Deputy Special Education Needs Coordinator works within the Pre-prep department and has responsibility for liaising with teachers and teaching assistants within this department to coordinate provision for pupils with special educational needs.

All teaching staff are involved in the development of policy and procedures for identifying and making provision for pupils with SEN.

The SEN team, led by the SENDCO will:

- ✓ Help class teachers to identify and make provision, through normal classroom differentiation and support, for children with SEN, AN and SEND from Nursery through to the end of Prep school.
- ✓ Help class teachers to provide intervention
- ✓ Plan and implement interventions following the advice of outside agencies
- ✓ Provide specialist teaching, through withdrawal or in class, to individuals or groups, in response to needs identified
- ✓ Use Pupil Passports, when deemed helpful, at the end of the year or when there is a change of teacher, to aid the smooth transition into new classes with different teachers. This provides an opportunity for the pupils to highlight their individual needs and to share information that they feel is important about themselves as learners.
- ✓ Maintain SEN, AN and SEND records (updated termly and stored on ISAMS)
- ✓ Provide information on all children with SEN, AN and SEND to all members of staff who may be involved with them.
- ✓ Liaise with parents and involve them in the decision making when appropriate
- ✓ Liaise with outside agencies as appropriate, including Educational Psychologists, CAMHS, SALT, O.T's and physiotherapists
- ✓ Seek and respond to the views of the children themselves as appropriate.
- ✓ Ensure that suitable exam and assessment arrangements are made for children who cannot cope with the normal procedures.
- ✓ Attend Area 5 meetings when they are arranged

The school follows the SEND Code of Practice 2014:0-25 years' graduated approach with regard to the identification, assessment and review of pupils with special educational needs.

Individual Learning Pathway (ILP)

This is a graduated response, from pathway one to pathway three, implemented to track and monitor the support and intervention provided for individuals. See the appendix for an example of the pathway through which records of intervention and progress are recorded.

ASSESS

All teachers are responsible and accountable for the progress and development of the pupils in their class.

High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. (Pathway One of ILP.)

Early identification and intervention is essential in order to help children make important progress as soon as possible.

Where progress is not adequate, it may be necessary to take some 'additional or different' action to enable the child to learn more effectively. This extra support is designed to be appropriate intervention to assist the child in progressing in the most effective way possible. (Pathways two and three).

Some children come to the school with reports of previous/present needs, prepared by educational psychologists or other professionals. Any teacher who is concerned about the performance or progress of a pupil will consult the SENDCO/Deputy SENDCO directly, further assessment will be conducted, if necessary.

In the event that parents are concerned about their child's progress or learning needs they are encouraged to bring this to the attention of the form tutor in the first instance.

Class and subject teachers, supported by the Heads of Assessment, analyse assessment to track the progress of all pupils. This enables them to identify pupils making less than expected progress given their age and individual circumstances. This can be characterised by progress which:

- is significantly slower than that of their peers starting from the same baseline
- fails to match or better the child's previous rate of progress
- fails to close the attainment gap between the child and their peers
- widens the attainment gap

The first response to such progress is to provide **high quality teaching** targeted at their areas of weakness.

Where progress continues to be less than expected the class or subject teacher, working with the SENDCO/Deputy SENDCO, extra teaching or learning support is put into place. The pupil's response to such support can help identify their particular needs. For some children, SEN can be identified at an early age. However, for other children and young people difficulties become evident only as they develop. It is recognised that parents know their children best and it is important that they are part of the process (Wave 2 and 3 ILP).

Plan and Do

Specialist provision:

Following a gathering of information from within the school based on formative assessments and observations, parents are met to ascertain a more complete picture of the child's needs.

Specialist tuition is provided on a 1:1 or small group basis. The number of lessons per week will depend on the severity of the difficulty and these will be time tabled taking into account the child's need to be in their mainstream lessons. In-class support can be provided to assist a child where necessary.

As stated, the amount of individual support a pupil receives is variable and dependent upon need. This is reviewed regularly to reduce or increase lessons as necessary.

A variety of specialist interventions are in place such as: ELSA, Ready Steady Play, Let's Move, Let's Talk, Rainbow Road and Speech and Language sessions. A baseline measure is taken at the start of the intervention and reviewed half-termly, appropriate targets are set through liaison with the teachers and teaching assistants. Parents are informed of the interventions that their child/children are attending.

Review

IEPs are useful in the senior part of the school when there are numerous teachers working with the pupils to provide clear information and targets. They are reviewed termly. They are also used in the Junior and Pre Prep departments when it is deemed necessary.

ILP's are also reviewed termly and updated.

The pupil must experience success and therefore targets should:

- ✓ Identify specifically what the pupil can do and then list the targets in the form of bullet points.
- ✓ Be expressed positively, eliminating as many opportunities for failure as possible
- ✓ Promote success
- ✓ Be motivating, challenging, interesting and relevant to pupils' needs, i.e. linked to the curriculum

Specific problems and ways to encourage pupils are discussed in detail at staff meetings.

The impact of the interventions are reviewed half-termly and parents are informed.

Within Early Years, pupils' progress is tracked closely through their individual learning profiles. They are closely monitored and reviewed regularly.

Children, young people and parents will continue to be at the centre of decision making, and parents will be fully informed and involved with how their child is progressing.

The Four Categories of SEN

Special educational provision should be matched to the child's identified SEN. Children's SEN are generally thought of in the following four broad areas of need and support – see Chapter 6, paragraph 6.28 onwards, for a fuller explanation:

- **communication and interaction**, including: Speech, Language and Communication Needs
- **cognition and learning**, when children learn at a slower pace than their peers, even with appropriate differentiation. They include:
 - MLD- Moderate Learning Difficulties
 - SLD- Specific Learning Difficulties
 - PMLD- Profound and Multiple Learning Difficulties
 - Spld – This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia
- **behaviour, social and emotional development**, they include:
 - ADD

ADHD

Attachment Disorder

There are a wide range of difficulties that manifest themselves in many ways. For eg becoming isolated, withdrawn, displaying challenging, disruptive behaviour. They may be reflective of underlying mental health conditions such as anxiety, depression, self-harming, substance misuse, eating disorders or other physical symptoms that are medically unexplained.

- **sensory and/or physical disability and medical needs**, including:
 - Vision impairment
 - Hearing impairment
 - Multi-sensory impairment
 - Diagnosed medical condition

Individual children often have needs that cut across all these areas and their needs may change over time. For instance speech, language and communication needs can also be a feature of a number of other areas of SEN, and children with an Autism Spectrum Disorder may have needs across all areas. The special educational provision made for a child is based on an understanding of their particular learning profile.

Where a pupil has an EHC plan, the local authority will review the plan as a minimum, every twelve months.

Involving Specialists

Where a pupil continues to make less than expected progress, despite evidence-based support and interventions that are matched to the pupil's area of need, specialist, external assessments may be recommended and, if necessary, an EHCP assessment requested.

Complaints:

If any parents or members of staff have any complaints about the provision for children with special educational needs they should report it to the Head or SENDCO. Every effort will be made to resolve the complaint.

Staff training

Whenever the opportunity arises staff are encouraged to attend different courses to broaden their knowledge on Special Educational Needs. Certain resources are available at school for reference.

Confidentiality

To meet the needs of all our children in our care it may be necessary at times to share information in order to support the children's development. Yarrells School may also need to seek help and advice from outside professionals. All information will be on a need to know basis and the parents' permission will be requested.

The Local Offer

The purpose of the local offer is to enable parents and young people to see more clearly what services are available in their area and how to access them. It includes provision from birth to 25, across education, health and social care. Yarrells School's Local Offer has been published.

Appendix 1: SEN support in early years

Assess Plan Do Review

SEN support in the early years

5.36 It is particularly important in the early years that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life (Chapter 8, Preparing for adulthood from the earliest years).

5.37 Where a setting identifies a child as having SEN they **must** work in partnership with parents to establish the support the child needs.

5.38 Where a setting makes special educational provision for a child with SEN they should inform the parents and a maintained nursery school **must** inform the parents. All settings should adopt a graduated approach with four stages of action: assess, plan, do and review.

Assess

In identifying a child as needing SEN support, the early years practitioner, working with the setting SENDCO and the child's parents, will have carried out an analysis of the child's needs. This initial assessment should be reviewed regularly to ensure that support is matched to need. Where there is little or no improvement in the child's progress, more specialist assessment may be called for from specialist teachers or from health, social services or other agencies beyond the setting. Where professionals are not already working with the setting, the SENDCO should contact them, with the parents' agreement.

Plan

Where it is decided to provide SEN support, and having formally notified the parents, (see 5.38 above), the practitioner and the SENDCO should agree, in consultation with the parent, the outcomes they are seeking, the interventions and support to be put in place, the expected impact on progress, development or behaviour, and a clear date for review. Plans should take into account the views of the child. The support and intervention provided should be selected to meet the outcomes identified for the child, based on reliable evidence of effectiveness, and provided by practitioners with relevant skills and knowledge. Any related staff development needs should be identified and addressed.

5.41 Parents should be involved in planning support and, where appropriate, in reinforcing the provision or contributing to progress at home.

Do

5.42 The early years practitioner, usually the child's key person, remains responsible for working with the child on a daily basis. With support from the SENDCO, they should oversee the implementation of the interventions or programmes agreed as part of SEN support. The SENDCO should support the practitioner in assessing the child's response to the action taken, in problem solving and advising on the effective implementation of support.

Review

5.43 The effectiveness of the support and its impact on the child's progress should be reviewed in line with the agreed date. The impact and quality of the support should be evaluated by the practitioner and the SENDCO working with the child's parents and taking into account the child's views. They should agree any changes to the outcomes and support for the child in light of the child's progress and development. Parents should have clear information about the impact of the support provided and be involved in planning next steps.

5.44 This cycle of action should be revisited in increasing detail and with increasing frequency, to identify the best way of securing good progress. At each stage parents should be engaged with the setting, contributing their insights to assessment and planning. Intended outcomes should be shared with parents and reviewed with them, along with action taken by the setting, at agreed times.

5.45 The graduated approach should be led and co-ordinated by the setting SENDCO working with and supporting individual practitioners in the setting and informed by EYFS materials, the Early Years Outcomes guidance and Early Support resources (information is available at the National Children's Bureau website – see the References section under Chapter 5 for the link).

5.46 Where a child has an EHC plan, the local authority **must** review that plan as a minimum every twelve months. As part of the review, the local authority can ask settings, and require maintained nursery schools, to convene and hold the annual review meeting on its behalf. Further information about EHC plan reviews and the role of early years settings is in Chapter 9, Education, Health and Care needs assessments and plans.

Transition

SEN support should include planning and preparing for transition, before a child moves into another setting or school. This can also include a review of the SEN support being provided or the EHC plan. To support the transition, information should be shared by the current setting with the receiving setting or school.

Communication and interaction

6.28 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.

6.29 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.

Cognition and learning

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

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children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

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

Social, emotional and mental health difficulties

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

6.33 Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour so it does not adversely affect other pupils. The Department for Education publishes guidance on managing pupils' mental health and behaviour difficulties in schools – see the References section under Chapter 6 for a link.

Sensory and/or physical needs

6.34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health (see the References section under Chapter 6 for a link).

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

APPENDIX 3: INITIAL REQUEST FOR A REFERRAL

Once the SENDCO, class teacher and Head have conferred, and concerns have been raised with parents, it may be agreed that a child should be referred for a special needs assessment. Parents often direct their appointed Educational Psychologist to conduct the assessment. Alternatively, they should write to their Local Authority, if they would like to request their support. They apply based on their postcode.

The Local Authority should then contact the school, asking for a report. The SENDCO will complete a report written according to the guidelines in Appendix 5.

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APPENDIX 4: DEFINITIONS

Code of Practice

A guide to schools and local education authorities (LEAs) about the help they can give to children with special educational needs. Schools and LEAs must have regard to the Code when they deal with a child with special educational needs.

Learning difficulties

A child has learning difficulties if he or she finds it much harder to learn than most children of the same age.

Local Authority (LA)

Local government body responsible for providing education and for making statutory assessments and maintaining statements

Special Educational Needs (SEN)

A person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. At compulsory school age this means he or she has a significantly greater difficulty in learning than the majority of others the same age, or, has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools. Only children and young people who satisfy both elements of this definition have special educational needs.

Special educational provision

The special help given to children with special educational needs.

Special school

A school which is specially organised to give help to pupils with special educational needs.

Statutory assessment

A very detailed examination of a child's special educational needs. It may lead to a statement.

ADD (Attention Deficit Disorder) The essential feature is a short attention span, which may or may not co-exist with hyperactivity.

ADHD (Attention Deficit Hyperactivity Disorder) is a hyperkinetic disorder, characterised by grossly impaired attention and over activity in all areas of a child's life. It may be a predominantly inattentive type, when attention problems are paramount, or the hyperactive-impulsive type, when hyperactivity and impulsivity are predominant, or a combined type, in which both are equally evident.

Asperger's Syndrome is occasionally referred to as "high IQ autism", sometimes seen as a variant of autism, sometimes as a separate condition. It is characterised by lack of empathy and capacity for social relationships, pedantic speech and preoccupations with special interests. There may be a delay in non-verbal development and motor clumsiness.

Autism is a pervasive developmental disorder with abnormalities in verbal and non-verbal communication and social interaction. In addition the child is likely to show mannerisms, resistance to change, attachment to unusual objects and acute emotional reactions of excitement.

Cerebral Palsy is a permanent disability of movement arising from damage or dysfunction of the brain. Motor impairment affects muscular power and tone as well as posture.

Delicate

This term is no longer used by the DfES. It was defined to include those children who were not otherwise covered by categories listed in the 1959 Handicapped Pupils and Special Schools Regulations who, by reason of impaired physical condition, need a change of environment and cannot, without risk to their health or emotional development, be educated under the normal regime of ordinary schools.

Down's Syndrome is the most common chromosomal abnormality involving an extra chromosome at position 21. In 19 out of 20 cases the cause is an additional free chromosome arising from an abnormality of cell division. In the remainder (translocation type) the extra chromosome is displaced from a different site.

Dyscalculia is the maths equivalent of dyslexia. The two may co-occur.

Dyslexia is a marked impairment of the development of reading and spelling which cannot be explained by a general intellectual disability or inadequate care or education (hearing, visual and neurological disorders having been ruled out). There is no universally agreed definition of the term. Some people use the phrases *specific learning difficulty* in place of *dyslexia* while others use it to mean something a little different.

Dyspraxia is impaired performance of skilled movements despite abilities within the average range and no significant findings on standard neurological examination.

- i. *Ideational dyspraxia* difficulties with planning a sequence of movements. In the school age child this is usually seen in problems with organising tasks, equipment and ideas.
- ii. *Ideo-motor dyspraxia* is applied to children who know what they want to do but find it hard to do it. Movements are clumsy, slow and awkward.
- iii. *Verbal dyspraxia* is frequently associated with more generalised dyspraxia. The problems may involve muscle groups needed to signal facial expression, which can lead to a child difficulty in the following: control of speech apparatus (jaw, lips, tongue, etc.), sequencing sounds to make a word or a sentence, feeding, controlling breathing and the production of sound.

Emotional and behavioural difficulties. There is no absolute definition of this term. Problems are clearer and greater than sporadic naughtiness or moodiness but are not so great as to be classed a mental illness. EBD may be manifest as withdrawn, depressive, aggressive or self-injurious tendencies. Children are seen to be on a continuum and whether they are classified as having EBD will depend on the severity, abnormality or cumulative effect of the behaviour.

The term is not usually used to cover delinquent behaviour as such, although many delinquents may have an emotional and behaviour difficulty.

Epilepsy is present when there is a repeated paroxysmal discharge in the brain producing sudden episodic involuntary alterations of movement or sensory experience. It is the most common cause of seizures (sudden episodes of loss of muscle power).

Hearing impairment can be classified according to its cause (conductive, sensorineural or mixed) or its degree: mild (15 to 30dB loss), moderate (30 to 65 dB loss), severe (65 to 95 dB loss) or profound (greater than 95 dB loss). Generalisation from an average loss may, however, be misleading since severity may vary depending on the pitch and tone of the sound. Other factors include problems with background noise. Some children suffer from a loss in a certain range of frequencies (high loss has been associated with reading difficulties). Past hearing loss may lead to continuing problems.

Physical impairment refers to those physical disabilities, which, without action by the school or LEA, limit the child's access to the full curriculum without close adult supervision and/or substantial adaptation of teaching materials or the environment. There is often an associated difficulty in visual perception.

NB The use of the terms *impairment* and *disability* here differ from their more common meanings in which impairment implies any physical defect, no matter how slight, and disability refers to an impairment which prevents a person from carrying out activities considered within his/her normal context to be normal.

Specific developmental disorders or speech and language include specific delays in articulation and speech sound production, expressive language use and receptive understanding of language.

Specific learning difficulties are problems which are not typical of the child's general level of performance.

Tourette's Syndrome is characterised by convulsive muscular jerking, inarticulate cries and coprolalia (the emission of obscene utterances) and echolalia (the automatic repetition of sounds heard). The condition is now regarded as present if both motor and vocal tics are present, even if there is an absence of coprolalia.

Visual impairment is normally subdivided into blindness and partial sight. Blind children are those whose sight is so defective that they require education by methods not involving the use of the sight. Partially sighted children cannot follow the normal regime of an ordinary school but can be educated by special methods involving the use of sight.

Definitions with reference to Gabbitas Educational Consultants and DfES.

For Additional definitions – see glossary in school's copy of the Special Educational needs and disability Code of Practice:0-25 years

Yarrells Preparatory School

Individual Education Plan September 2021



Pupil's Name	
Year Group	
Review Date	
Learning Bias	Spatial Verbal Non-Verbal

Specific Area of Concern	Target Areas and Key Objectives	Strategies, Activities, Resources and Support/Monitoring Arrangements	Review of Progress and Future Action
Notes/Comments/Other Relevant Information			

Parental/guardian:

Tutor:

Deputy SENDCO/ SENDCO:

Date:

Individual Learning Pathway

Yarrells Preparatory School

Individual Learning Pathway

2021-2022



Name				
Tutor				
Areas of concern				
Please highlight: Autumn - AUT Spring - SPR Summer - SUM	<p>Pathway 1 Support and Strategies for All High quality teaching (effective differentiation, deployment of TA, focus groups) and classroom environment</p>	<p>Pathway 2 Support and Strategies for Some Intervention/effective differentiation</p>	<p>Pathway 3 Support and Strategies for a Few SEND A, G & T</p>	
<p>Cognition and Learning</p>	Clear objectives Key vocab and visual cues displayed Visual timetable Multisensory learning Instructions chunked and displayed clearly Carefully devised seating plan Dyslexia friendly strategies, e.g. visuals, pastel paper, 14 font Resources available to support independent learning, e.g. concrete resources, learning wall, high frequency words, 100 square Use of ICT	TA support In-class teacher support Regular focused individual reading Specific reading scheme Supplementary groups: Reading Spelling PASS PAT Phonics Maths	Referral to outside agencies IEP Pupil passport Resources: Plus 1 or Power of 2 for maths Toe by Toe Dyslexia Assessment modifications: Extra time Reader Scribe Small group setting	1:1 work on individualised targets Year change for some lessons Scholarship Tuition Participation in Gifted and Talented events in Yarrells and in other schools Competitions Extra maths focus group

	Alternative methods of recording Writing frames	Opportunities to over-learn Individualised dyslexia-friendly strategies, e.g. acetates	Individual	
Communication and Interaction	Positive models of speaking and listening Active listening encouraged and modelled Re-modelling of accurate speech Re-iterating/chunking/reducing instructional load. Recording information given orally on whiteboards to reinforce understanding of language Talking partners Opportunities to speak in a larger group Jigsaw circle time Team building exercises Drama, music, poetry and dance festivals House assemblies Homework diaries Fund raising for charities and visiting local community Competitions, e.g. The Y Factor	Pre-tutoring vocabulary for the week. Expressive language skills group Focus group/individual EAL LAMDA; focus on confident speech and opportunity to gain qualifications ELSA Ready Steady Play	Referral to outside agencies IEP Pupil passport Individualised speech and language following specialist support (SALT) 1:1 Pre-learning	Opportunities to present in assemblies, larger audience, public speaking Leading campaigns for charity work
Behavioural, Emotional and social development	Whole school rewards Subject/class rewards Buddy time jigsaw circle times Choices always given and the taking of responsibility for decisions encouraged Time to discuss any social issues Language of emotion modelled and used regularly in class. Clearly structured routines and expectations Visual cues/reinforcement Clear explanations of decisions/changes Mindfulness	ELSA Ready Steady Play	Referral to outside agencies IBP Pupil passport Specialist support Development of social skills using social stories Individual reward system Report card Anger management programme	Opportunities to guide and counsel peers Buddy work Provide experiences beyond Yarrells
Sensory and Physical and Medical Needs	Awareness and adaption of environment to meet sensory and physical needs Regular differentiated sporting/gross motor opportunities Writing guidelines/colour-coded guidelines Brain gym Regular opportunities to develop fine motor skills Movement breaks	Let's Move Rainbow road Handwriting group Following in class advice from OT/Physio Hearing aids Group teaching with specialist teacher Special resources: Thera-bands Therapy putty Postural control wedges Wobble cushion Specialist writing equipment e.g. triangular pencils, pencil grip Sloped writing board	Referral to outside agencies IEP Pupil passport Individualised support following programmes from OT/Physio specialists: 1:1 gross motor skill development 1:1 fine motor skill development	Accelerated grouping for sport Encouragement of participation in wider events and competitions – county, regional and national level