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CHILDREN, YOUNG PEOPLE & EDUCATION SCRUTINY PANEL

Wednesday, 2nd November, 2022 at 7.00 pm in the Conference Room, Civic Centre, Silver Street, Enfield, EN1 3XA

Membership:

Councillors: Elif Erbil (Chair), Gunes Akbulut (Vice Chair), Ahmet Oykener, Andrew Thorp, Adrian Grumi, Nelly Gyosheva, Suna Hurman and Ruby Sampson

AGENDA – PART 1

1. **WELCOME & APOLOGIES**

2. **MINUTES OF THE PREVIOUS MEETING** (Pages 1 - 4)

   To approve the minutes of the meeting held on 27 September 2022.

3. **DECLARATIONS OF INTEREST**

   Members of the Committee are invited to identify any disclosable pecuniary, other pecuniary or non-pecuniary interests relevant to the items on the agenda.

4. **SCHOOL ATTENDANCE** (Pages 5 - 16)

   To receive a report from Jo Fear, Service Manager Admissions.

5. **SEND PLACES** (Pages 17 - 140)

   To receive a report from Neil Best, Head of Strategic Resourcing &

Partnerships - Education and Barbara Thurogood, Head of SEN.

6.   WORK PROGRAMME 2022/23 (Pages 141 - 144)

To note the Children, Young People & Education Work Programme for 2022/23.

7.   DATE OF NEXT MEETING

To note the dates of the future meetings as follows:

Tuesday 10 January 2023
Thursday 23 March 2023

CHILDREN, YOUNG PEOPLE & EDUCATION SCRUTINY PANEL - 27.9.2022

MINUTES OF THE MEETING OF THE CHILDREN, YOUNG PEOPLE & EDUCATION SCRUTINY PANEL HELD ON TUESDAY, 27TH SEPTEMBER, 2022

MEMBERS: Councillors Elif Erbil, Gunes Akbulut, Ahmet Oykener, Andrew Thorp, Adrian Grumi, Nelly Gyosheva, Suna Hurman (Deputy Mayor) and Ruby Sampson

Officers: Anne Stoker (Director Children & Family Services), Sharon Burgess (Head of Safeguarding Adults & Quality), Bharat Ayer (Safeguarding Service Manager), Angela Bent (Head of Service Practice Improvement & Centre of Excellence), Cheryl Headon (Head of Schools Traded Services), Elise Merchant (Business Support Manager), Suzanne Connolly (Governance Officer)

Also Attending: Cllr Abdul Abdullahi (Cabinet Member for Children's Services), Press Officer

1. WELCOME & APOLOGIES

The Chair welcomed everyone to the meeting.

All members were present.

2. DECLARATIONS OF INTEREST

The following declarations of interest were received:

Cllr Andrew Thorp, Cllr Abdul Abdullahi and Cllr Suna Hurman each declared a non-pecuniary interest in item 6 in which they had children attending Enfield schools and eating school meals.

3. MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting were **AGREED**, subject to a correction to Cllr Abdul Abdullahi's title which should read Cabinet Member Children's Services).

4. ANNUAL SAFEGUARDING REPORT

Cllr Abdul Abdullahi, Cabinet Member for Children's Services, introduced the report which set out the achievements and challenges over the last year. It was noted that the report covered adults and children, however this panel was just to look at children.

Sharon Burgess, Head of Safeguarding Adults & Quality, thanked the panel for the opportunity to consult on the report, and Bharat Ayer, Safeguarding Services Manager, then highlighted the following key points:

1. The aim was to identify current and emerging risks from three areas:
   - Insight Groups led by the police
   - National Reviews
   - Safeguarding Ambassadors (youth engagement).

2. The annual report must meet legal requirements for both children and adults.

In response, members thanked officers for the detailed report and commented as follows:

1. Cllr Thorp queried the layout and format of the report asking why adults and children's were not separate in two different reports. Officers advised they had been in the past however the report had become very long. This would be considered for next year.
2. Cllr Thorp requested for the figures on page 33 to include percentages **ACTION** for Bharat Ayer.
3. Cllr Erbil asked for more details on Safeguarding Ambassadors. Officers advised there was one group currently, with up to 12 attending in each cohort. They were looking to engage with other groups run by youth support services, as well as involving peers.
   Members would welcome the opportunity to meet some of the Safeguarding Ambassadors **ACTION** for Anne Stoker.
4. Cllr Hurman felt increased advertising should take place around Safeguarding Ambassadors, for example in schools.
5. Cllr Akbulut was interested in the current number of children in need as the report data was for March 2022. Officers said there had been an increase in referrals.
6. Cllr Grumi asked about the number of completed assessments within 45 days which had decreased compared to previous years. Anne Stoker, Director Children & Family Services, stated that the figure was improving however there had been a nationwide issue with the recruitment and retention of social workers. The impact of Covid-19 was also still causing issues.

5. SELF-EVALUATION FRAMEWORK (SEF)

Cllr Abdul Abdullahi, Cabinet Member for Children's Services, introduced the report emphasising the excellent work of the department despite there being many challenges.

Angela Bent, Head of Service-Practice Improvement & Centre of Excellence, highlighted the key points from the report. Members extended their thanks for the clear layout of the report and then commented as follows:

1. Cllr Thorp asked if there were any current successes based on the 22/23 priorities. Officers stated that the middle managers development programme for service managers had been very successful and would be rolled out further. Enfield Talks had been launched with the first meeting

planned for October 2022. Also workforce recruitment was converting students into Social Worker Apprenticeships.

2. Cllr Akbulut raised concerns around the shortage of social workers and their caseloads. Officers acknowledged this issue, however the issue was nationwide with many leaving the profession. Support for staff was available, for example through the Employee Assistance Programme. There was also trauma support and time allocated to promote wellbeing. There were experienced managers and advanced practitioners to provide support, and teams worked well together.

3. Cllr Nelly asked about staff managing the culture within the borough. Anne Stoker advised that there was a wide range of diversity within the social worker team with the main aim being to ensure the family understand why they need support. Sometimes an interpreter was required.

6. QUALITY & CONSISTENCY OF SCHOOL MEALS ACROSS THE BOROUGH

Cheryl Headon, Head of Schools Traded Services, introduced the item highlighting the five key parts of the service as:

- The children
- The chefs
- The community
- The schools and parents
- Supply partners.

Members thanked Officers for the report and commented as follows:

1. Cllr Thorp felt that the report did not match the work programme as it did not include other traded partners. This may need to be revisited at a future meeting. **ACTION** for Cllr Erbil to consider.

2. A discussion took place around portion size and items running out. Officers stated it was impacted by items being pre-ordered, absences, parental control over choice and trends on the day. Issues were always investigated and reviewed.

3. Cllr Oykener was interested in the number of schools choosing other providers and their reasons. **ACTION** for Cheryl Headon.

7. WORK PROGRAMME 2022/23

NOTED the work programme for 2022/23.

8. DATE OF NEXT MEETING

NOTED the dates of future meetings as follows:

CHILDREN, YOUNG PEOPLE & EDUCATION SCRUTINY PANEL - 27.9.2022

Wednesday 2 November 2022
Tuesday 10 January 2023
Thursday 23 March 2023

All meetings commence at 7pm.

9.   EXCLUSION OF THE PRESS AND PUBLIC

The Committee agreed to passing a resolution under Section 100A of the Local Government Act 1972, excluding the press and public from the meeting for any items of business listed on part 2 of the agenda on the grounds that they involve the likely disclosure of exempt information as defined in paragraph 1 of Part 1 of Schedule 12A to the Act (as amended by the Local Government (Access to Information) (Variation) Order 2006).

10.   PART TWO ITEM - CONTAINING EXEMPT INFORMATION

11.   QUALITY & CONSISTENCY OF SCHOOL MEALS ACROSS THE BOROUGH

Following the Part 2 discussion the confidential report of Cheryl Headon was NOTED.

Actions:
1. Cllr Abdullahi to look at all suppliers of school meals across the borough to identify quality, quantity, nutritional value and feedback from children/parents, possibly via the Schools Forum.

The meeting ended at 8.45 pm.

London Borough of Enfield

Children, Young People & Education Scrutiny Panel - 2.11.22

Subject: School Attendance

Cabinet Member: Cllr Abdul Adullahi
Executive Director: Peter Nathan

Purpose of Report

1. This report provides Members with information about school attendance in Enfield and details work being caried out to improve attendance in our schools.
2. The law entitles every child of compulsory school age to an efficient, full-time education suitable to their age, aptitude, and any special educational need they may have. It is the legal responsibility of every parent to make sure their child receives that education either by attendance at a school or by education otherwise than at a school.

Background

Enfield Education Welfare Service

3.   Enfield has an established team of Education Welfare Officers who work in partnership with schools, agencies and families across the Borough offering a holistic approach to improving school attendance. In addition to carrying out the LA's statutory duties, the Service also offer a traded element to Enfield's academy and free schools. This can range from contributing to school assemblies about attendances issues, outreach work with families to the presentation of cases at court.

Main Considerations for the Panel

Impact of the Pandemic on Attendance and Enfield's Response.

4. In March 2021, the DfE issued guidance on the reopening of schools which confirmed that there would be a mandatory attendance expectation for all pupils. Whilst Enfield shared the view that all pupils should be in school, we acknowledged that some would find this difficult following such an unsettled period in education. Our approach in the first instance was to offer support to schools in contacting anxious or reluctant families to discuss any concerns, provide reassurance and encourage return to school. There was also concern that there could be an increase in the numbers of families deciding to withdraw their children from school to home educate (EHE) and the team were available to contact the families concerned to ensure that they were fully aware of their responsibility for providing education should they choose to follow this path and allowing them the opportunity to change their mind. Of the 112 cases where

contact was made, the parents of 16 children and young people decided they would remain in school rather than EHE.

Attendance Data Pre and Post Pandemic (no data collection took place 2019/2020)

2018-2019				
	Authorised %	Unauthorised %	Attendance %	PA %
SPECIALS - 6 Schools (663 Enrolments)				
National			89.9	28.8
Enfield	8	1.9	90.1	34.1
Outer London			90.1	30.2
PRIMARIES - 68 Schools (28,499 Enrolments)				
National			96	8.2
Enfield	2.9	1.4	95.7	10.2
Outer London			96.1	7.9
SECONDARIES - 22 Schools (20,695 Enrolments)				
National			94.5	13.7
Enfield	3.3	2.3	94.4	15
Outer London			95	12

SCHOOLS 2020-2021					
	Authorised %	Unauthorised %	Attendance %	PA %	COVID recorded Absence%
SPECIALS - 6 Schools (821 Enrolments)					
National	13.1	2.1	85.8	48.9	11.6
Enfield	10.5	1.5	88	36.8	18.3
Outer London	12.1	2	85.7	45.9	14
PRIMARIES - 68 Schools (26,762 Enrolments)					
National	2.7	0.9	96.4	8.8	18.7
Enfield	2.9	1.5	95.6	11.9	21.6
Outer London	2.7	1	96.2	8.7	20.5
SECONDARIES - 22 Schools (21,334 Enrolments)					
National	3.8	1.6	94.6	14.8	25
Enfield	3.6	2.2	94.2	17	26.6
Outer	3.5	1.5	95	13.1	24.6

London					

5. Data for the 2021/22 academic year is not yet available. However, data gathered by the DfE for 2020/21 shows that overall attendance levels are very similar to prepandemic levels in the primary and secondary sectors with an improvement within the special sector. There has, however, been a worrying increase in the level of persistent absence in both primary and secondary schools. Schools report that there has been an increase in the number of children and young people who are finding it difficult to attend school as well as an increase in the number who are missing school due to unauthorised absence for holidays.

6. During the 2021/22academic year, the Service has worked with schools and partners in the Authority to identify barriers to attendance. There has also been an increase number of academies who have engaged with the Service and accessed support and advice in relation to attendance issues in their schools.

7. Officers have been able to work with schools and families in person rather than through virtual platforms and suggest strategies for improving attendance.

8. As well as data analysis with school attendance leads to identify where action may be needed to improve attendance, officers have been working directly with families to encourage more engagement with school or signposting to other services such as the Parent Support Service, the Educational Psychology Service (EPS) and in some cases a referral to the Attendance Support Unit managed by West Lea School for secondary aged students who have very low levels of entrenched non attendance (less than 30%) known as Emotionally Based School Non- Attendance (EBSNA).

9. Working closely with the Enfield EPS, the Education Welfare Service has been involved in the delivery of workshops for parents/carers and professionals about children who find it difficult to attend school for emotional reasons. Further sessions are being held during the Autumn and Spring Terms (appendix 1).

10. The Virtual School has put in place Welfare Call to track attendance for all looked after children and those who are subject to a CP plan. Tracking is also in place for those involved with the Youth Justice Service. The Education Welfare Service has forged close links with Enfield's Virtual School and a representative attends a monthly meeting to review children and young people whose level of engagement in education is identified as a concern. A similar monthly meeting is also held to discuss engagement/attendance concerns in relation to those children and young people involved with the Youth Justice Service.

11. Our schools acknowledge, though, that there are cases where legal intervention is an appropriate strategy to improve attendance. Term time leave of absence for holidays is problematic and this year, schools have been encouraged to use penalty notices (PN) where holidays are likely to

be the reason for non-attendance. The Service issued 112 PNs during September 2022, two less than the whole of the 2021/22 academic year. Although our data is limited, the highest proportion of PNs have been issued to families who fall within the White Eastern European category. Further information is given in appendix 2.

The White Paper and New Non-Statutory Guidance on Improving Attendance

12. On 6 May 2022, the Department for Education released new non-statutory guidance "Working together to improve school attendance" to help schools, trusts, governing bodies, and local authorities maintain high levels of school attendance and improve consistency of support. It is not yet clear if and when this will become statutory guidance.

13. The document in appendix 3 sets out the expectations for schools, academy trusts and governing bodies and local authorities. The DfE has recognised that most LAs and schools will not be in a position to meet all the expectations until the beginning of the 2023/24 academic year.

14. Enfield intends to continue to build on the current services offered by the Education Welfare Service. In addition to the support offered to schools on an individual basis, the Service has planned a serries of on line training sessions for attendance leads due to be held later in the Autumn Term. Following on from these sessions, the LA will be coordinating an Attendance Forum involving all schools in Enfield. Colleagues from other support services such as Early Help and the Virtual School will be involved in the forum to ensure that there is clarity about the support available for families.

15. Individual Officers are continuing to discuss and analyse attendance data with schools and working with them to advise on the necessary enhancements to school attendance policies.

Conclusions

16. If the guidance issued by the DfE becomes statutory, there are resource implications for both schools and the LA. When the guidance was first published, the Department commented that this was a cost neutral policy.

17. Progress has been made in relation to the new guidance but further clarity is needed in relation to the status of the White Paper before all the recommendations are put in place.

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                   0208 132 1807

Date of report 2.11.22

Appendices

Background Papers
The following documents have been relied on in the preparation of this report:
White Paper
Non Statutory Guidance on Improving School Attendance

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Does your child find it difficult to attend school for emotional reasons?

Join the Educational Psychology Service at an online two-part workshop for parents and carers. We will:

- ▶ Learn more about anxiety
- ▶ Explore what feels helpful for your child and family
- ▶ Discuss working together with schools to help young people attend
- ▶ Share your thoughts and ideas with each other
- ▶ Identify what help and support is available
- ▶ Connect with other parents and carers with similar concerns
- ▶ Consider how we can look after ourselves when things are hard

Sign up here

EPS
ENFIELD Educational Psychology Service

Autumn Term Dates	Spring Term Dates
Session 1 Tuesday 8th November 13:30-14:30	Session 1 Tuesday 14th March 13:30-14:30
Session 2 Tuesday 15th November 13:30-14:30	Session 2 Tuesday 21st March 13:30-14:30

For more information, please email eps-sews@enfield.gov.uk

www.enfield.gov.uk

ENFIELD Council

Is emotionally based school non-attendance a concern for your school or setting?

EPS
ENFIELD Educational Psychology Service

Join the Educational Psychology Service at an online two-part workshop for schools. We will:

▶ Learn more about the factors which trigger and maintain anxiety

▶ Consider the issue through a trauma-informed lens

▶ Explore the assess-plan-do review cycle for pupils experiencing this issue

▶ Discuss partnership working with parents and young people

▶ Share good practice amongst schools

▶ Identify what is in place for parents, young people and schools

Sign up here

Autumn Term Dates

Session 1
Tuesday 8th November
16:00-17:00

Session 2
Tuesday 15th November
16:00-17:00

Spring Term Dates

Session 1
Tuesday 14th March 2023
16:00-17:00

Session 2
Tuesday 21st March 2023
16:00-17:00

For more information, please email eps-sews@enfield.gov.uk

www.enfield.gov.uk

ENFIELD Council

Penalty Notices

1. Overview last 4 academic years:

Academic Year	Number of Referrals Received	Number of PNs issued			Number paid	Number referred to Court cases
		LOA	ATT	Total		
2019-20	121	91	13	104	66	0 - all W/D due to court closures.
2020-21	45	11	24	35	26	3
2021-22	124	100	14	114	73	5
2022-23	120	112	0	112	10	New academic year

LOA = Leave of Absence

ATT = Attendance

2. From working in partnership with schools, we know that term time leave of absence is a recurring concern for many Enfield schools. In conversations with schools we are led to believe that White Eastern European are the group that are more likely to take unauthorised leave of absence during term time than any other ethnic group. However, we have not been able to analyse the data sufficiently to confirm this as we do not have a full information in relation to ethnicity.

3. Last academic year 2021/22, The referral form was redesigned, it provides points of clarity, is easier for schools to complete (than the previous version) and requests all the information EWS require. Of the 120 Referrals made in the first 4 weeks of September 2022 only 6 were missing the student ethnicity, these are recorded as unknown.

4. Analysis of 120 referrals made showed the following;

- All referrals received were for leave of absence; the majority for students leaving a minimum of 5 school days before the end of summer 22, or, students not returning until a minimum of 5 school days after the start of academic year 22/23. There are a few students who left before the end of last academic and did not return at the start of this academic year. There are 2 students (1 family) who returned at the start of the academic year, then had leave of absence from 12/09/2022.
- White Eastern European are the largest group; 49 referrals were made by for 23 families from 10 schools. 6 academies (2 secondaries, 6 primary) and 2 maintained primary.

- Turkish (28 referrals) and Turkish Cypriot (6 referrals) are the second largest group; 34 referrals were made for 19 families by 6 schools. 5 academies (1 secondary, 4 primary) and 1 maintained primary.
- No other ethnic groups had large numbers of students. There are 9 other ethnic groups with student numbers ranging from 1 to 6, many with siblings. For example, 6 referrals made stated Bangladeshi as ethnicity, this consisted of 4 families (2 with 2 children each).
- A total of 13 schools have made referrals for the issue of penalty notices, with more schools expected to submit requests before the October half term break.

Appendix 4

The White Paper and New Non-Statutory Guidance on Improving Attendance

The new non-statutory guidance on improving attendance sets out the following expectations for schools, governing bodies and academy trusts and local authorities.

1. Expectations of schools

To manage and improve attendance effectively, all schools are expected to:

• Develop and maintain a whole school culture that promotes the benefits of high attendance.
 • Have a clear school attendance policy which all staff, pupils and parents understand.
• Accurately complete admission and, with the exception of schools where all pupils are boarders, attendance registers and have effective day to day processes in place to follow-up absence.
• Regularly monitor and analyse attendance and absence data to identify pupils or cohorts that require support with their attendance and put effective strategies in place.
• Build strong relationships with families, listen to and understand barriers to attendance and work with families to remove them.
 • Share information and work collaboratively with other schools in the area, local authorities, and other partners when absence is at risk of becoming persistent or severe.

2. Expectations of academy trust boards and governing bodies of maintained schools

• Recognise the importance of school attendance and promote it across the school's ethos and policies.
• Ensure school leaders fulfil expectations and statutory duties.
• Regularly review attendance data, discuss, and challenge trends, and help school leaders focus improvement efforts on the individual pupils or cohorts who need it most.
• Ensure school staff receive adequate training on attendance.

3. Expectations of local authorities

• Rigorously track local attendance data to devise a strategic approach to attendance that prioritises the pupils, pupil cohorts and schools on which to provide support and focus its efforts on to unblock area wide barriers to attendance.
• Have a School Attendance Support Team which provides the following core functions free of charge to all schools (regardless of type):

a. Communication and advice: regularly bring schools together to communicate messages, provide advice and share best practice between schools and trusts within the area. o Targeting Support Meetings: hold termly conversations with schools, using their attendance data to identify pupils and cohorts at risk of poor attendance and agree targeted actions and access to services for those pupils.

b. Multi-disciplinary support for families: provide access to early help support workers to work intensively with families to provide practical whole-family support where needed to tackle the causes of absenteeism and unblock the barriers to attendance.

c. Legal intervention: take forward attendance legal intervention (using the full range of parental responsibility measures) where voluntary support has not been successful or engaged with.

d. Monitor and improve the attendance of children with a social worker through their Virtual School

London Borough of Enfield

2 November 2022

Subject: **SEND PLACES UPDATE**
Cabinet Member: **Cllr Abdul Abdullahi**
Executive Director: Tony Theodoulou

Purpose of Report

1. To provide an update on special educational need placements, current pressures and activities to increase the number of places within Enfield and to reduce out of borough expenditure.

2. Provide details of current and projected demand for SEND places, current provision both in-borough and out-of-borough and the related costs to the Council

3. To set out proposals for the introduction of large scale SEND provision

Relevance to the Council Plan

4. Good homes in well-connected neighbourhoods

5. This project will contribute to the Council's strategies and programmes for supporting communities through the delivery of education services to the benefit of the community.

6. Safe, Healthy and Confident communities

7. The Borough needs to ensure appropriate infrastructure is in place to allow the growth of the population. Increasing the capacity of special schools to provide high quality education within the borough to meet demand directly delivers essential services to protect and support vulnerable residents. This provision will aim to inspire and empower young people to reach their full potential.

8. An Economy that works for everyone

9. The provision of good quality schools and buildings helps to ensure a stable strong community enhancing skills and connecting local people to opportunities.

Background

10. In November 2021, EMT agreed that the Education Strategic Resourcing and Partnerships Service (ESRP) and the Construction Maintenance and Facilities Management Team (CMFM) should identify potential sites to establish brand new provision on a scale that would make a significant

contribution to addressing demand. The ESRP Service has identified four sites currently which have the potential to establish SEND provision.

11. The SEND Programme Board was set up in May 2022 as a formal governance body for the delivery of potential SEND schemes to provide governing steer, direction, oversight and assurance to the work of officers and service areas involved in all aspects of delivering the Programme. This is a cross directorate group of senior officers.

12. Four sites have been identified as having the potential to establish new SEND provision. sites are noted as follows:

   - Addison House, Addison Avenue, N14 4AL
   - Portcullis Lodge Car Park (opposite Civic Centre), EN1 3XA
   - Former Eldon Road Tuition Centre, Eldon Road, N9 8LG
   - Albany Youth & Community Centre & Caretaker's House, Bell Lane, EN3 5PA

13. Cabinet have agreed (subject to availability of Council funds), to prioritise taking forward the SEND Development Programme (beyond initial viability and early feasibility stage) to establish new SEND provision at Portcullis Lodge and Addison House. Bell Lane and the former Eldon Secondary Tuition Centre will be considered as a future phase of the Programme. Phasing of bringing forward sites is due to the Council's constraints to funding delivering all four sites

14. The approval of individual schemes will be subject to further feasibility, survey work, strategic business case, planning approval and inclusion in the Council's 10-year capital programme. Once included with the Capital Programme individual projects will be subject to the Council Governance procedures including future Key Decision reports.

15. The two priority sites have the potential to provide between 136 additional SEND places (this will rise to circa 184 places if all four sites are brought forward in a future phase of the programme).

16. The type of SEN provision will be identified for each site in consultation with the SEN team based on the demand for places, considering site constraints and suitability of accommodation that can be provided.

17. Alongside capital expenditure, it was agreed that the SEN service would negotiate with schools that had capacity through reduced form entries to increase the Additional Resource Bases and establish Designated Units in schools to support the increased numbers of children within SEND in line with the SEND Code of Practice to have the right and access to mainstream education.

18. Cabinet agreed that Portcullis and Addison House were the favoured sites that should be developed and would meet SEN placement demands.

19. Ina addition the work undertaken to develop these priority sites the Education Service have made an application to the Department for

Education (DfE) Free School Wave 2022 for these two sites. If either application is successful the DfE are likely to fund the development of the site (this may be through a financial contribution or by delivering the site(s) themselves) and a Free School provider will be selected by the DfE.

Main Considerations for the Panel

20. The number of children with Education Health and Care Plans has been increasing nationally since the commencement of the 2014 reforms. This is partially due to the extension of the age group from 18-25. The vagueness of the legislation that supports the assessment of need which in 98% of the time results in the issuing of an Education, Health and Care Plan.

21. Each year, the DfE run a comparative return of data, which is known as SEN 2. The data enables local authorities to review their SEN data and understand their performance against national and statistical neighbours. This return enables for scrutiny in strategic and operational practice.

22. In the academic year 2021/22 the SEN2 National data is as follows;

   - The EHCP Population is 355,566 EHCP's (0-19 only)
   - 9.2% growth since 2021
   - Number of New EHCP's increased by 77,000 up until February 2022
   - Percentage of pupils in school with an EHCP has increased to 4% in 2022 prior to this the rate had been 2.8%

23. In the academic year 21/22 SEN are maintaining 4109 EHCPs. Over a 12-month period there was an increase of just under 1% per month. The cumulative growth is just over 10%.

   Table 1 showing predicted EHCP growth over a 3-year period based on the 10% growth.

2022/23 Academic Year	2023/24 Academic Year	2024/25 Academic Year
4,348	4,807	5,314

24. Developing SEN provision will support the demand, but pursuing the SEND principles of inclusion by having more schools with Additional Resourced Bases and Designated Units will enable more children to remain within the locality of Enfield as set out in our Inclusion Charter and SEND Strategy.

25. Enfield SEN Services currently commissions 721 (16.8%of total case-load {August 21-22}) places out of borough in both the Maintained, Independent and FE sector. In the same period in the previous year, 633 17.1% were being educated out of borough. The percentage reflects the true nature of the growth of EHCPs (number increase is 583 including the deficit of migration).

26. The average cost to the Council for Pupil with an ECHP is circa £14,000. Costs variation is dependent on level of need. Comparatively, an out-of-borough placement is circa £25.5k pa compared to £11.52k for a place in-borough. In addition, average transport costs are more than twice as expensive for out-of-borough pupils at circa £15.18k versus £7.4k

27. In compulsory education, (5-19) i.e. maintained, special and independent and residential there are 480 commissioned places.

28. In the previous academic year for the same cohort, Enfield commissioned 468 places

Table 2 Number of children and young people educated out of borough.

School Type	Pupil Count
Independent	15
Independent Special	103
Maintained - ARP	11
Maintained Mainstream	213
Maintained Special	104
Non-maintained special	14
Nursery - PVI	8
Grand Total	**468**

29. This results in children and young people being separated from their communities, with longer travel journeys to schools, (this is challenging for some of our more complex children). It also increases travel assistance costs which puts significant pressure on the high needs block and council general funds.

30. Currently the SEN Services through the establishments of ARPS and Units provides education in borough for children and young people whose parents would like them to attend a mainstream school and for children in Units to enable them to have the opportunity of inclusion and the chance to thrive.

31. To date the SEN services have established the following provision in Enfield

Table 3 Designated Units in Enfield

School Name	Designated Unit Type	Number of Children	Year Groups	Start Date
Debohun	Autism & Complex Needs	30	Reception to year 6	September 2021
Brimsdown	ASD &	10	KS2	June 22

	Complex needs		(age 7-11)	
Lavender	ASD & Complex	10	Early Years and KS1	September 2022
Total Places Created		**50**		

Table 4 Additional Resourced Provision in Enfield

School Name	Designated Unit Type	Number of Children	Year Groups	Start Date
Eldon	Autism & Complex needs	10	Early Years	January 2023
Firs Farm	Autism & Complex Needs	8	Early Years and KS1	September 2021
Highfield	Autism & Complex Needs	8	KS1 & KS2	Sept 22
Raynham	Autism & Complex	8	KS2	April 2022
Secondary ARPS				
Chace Community	Autism & Complex Needs	12	KS3,4&5	September 2022
ST Anne's	Autism	16	KS3&4	September 2022
St Ignatius	SLRB (DLD)	8	KS3&4	September 2022
Total Places Created		**78**		

32. The placements created by SEN has not resulted in any capital funding and has increased capacity based on place led funding from the High Needs Block and this is at a cost of:

> £1,258,920 for Additional Resourced Bases
> £899,500 for Designated Units

33. SEN are in negotiation with the following settings to increase provision over the academic years 22/23 and 23/24
   - Oakthorpe
   - Bush Hill Park
   - Enfield Grammar
   - Fleecefield
   - Chesterfield

34. To ensure consistency the number of requests for EHC Needs Assessment (EHCNA) the SEN Service has reviewed its operational delivery including its SEN Panel where decisions for EHCNA and decisions to issue and EHCP are made. The new changes have resulted

in 23% fewer needs assessments undertaken and 10% less EHCPS have been issued.

35. EHCPS are reviewed regularly to ensure they are appropriate to meet the needs of children and young people and ceased where appropriate.

Conclusions

36. Whilst capital projects are still undergoing discussion, more local places are being created by the SEND service to meet the demand.

37. There is more SEND operational rigour to scrutinise systems and processes to ensure EHCPs are meeting the needs of children and young people, that they are reviewed in line with statutory time-lines and ceased where appropriate.

38. The development of Early intervention models, such as Enfield Communication Advisory Support services has meant that there is an offer to support children and young people with communication needs to prevent the need for an EHCP.

39. The development of the Inclusion Charter also means that there is more push in line with DFE expectations that schools provide more support to reduce the need for an EHCP.

40. Approval by Cabinet of development work for priority projects at Portcullis Lodge and Addison House requires a further commitment of significant funding which requires capital borrowing. This will be presented to Full Council in November and if approved be included in the 10-year Capital programme. The funds required to deliver both schemes are circa £26M.

41. SEN are holding a Speech and Language Summit with health to make certain that there is a credible offer to meet the speech and language needs of our community and to ensure that children do not need a EHCP to access speech and language provision from health.

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Date of report

Appendices

Background Papers
The following documents have been relied on in the preparation of this report:

Enfield's Special Educational Needs and Disabilities Partnership Strategy
2023-2027

www.enfield.gov.uk

In partnership with

North Central London Integrated Care System

Our Voice

ENFIELD Council

Document Control

Scope	Enfield's Special Educational Needs and Disabilities (SEND) Partnership Strategy sets out our shared vision, principles and priorities as we work together over the next four years to support our children and young people with SEND (up to the age of 25) and their families.
Approved by	Full Council on 12 October 2022
Cabinet Member	**Cllr Abdul Abdullahi**, Cabinet Member for Children's Services
Director	Peter Nathan, Director of Education
Document Author	Corporate Strategy Service
Review	Enfield's SEND Partnership Board are responsible for monitoring and reviewing this strategy.

This strategy will be reviewed every 2 years and where necessary, updated to respond to local and national change.

The associated joint Action Plan will be kept up to date and will be regularly reviewed throughout the lifecycle of the strategy. Individual actions are the responsibility of the named partner, who is required to report on progress through their internal governance structures, as well as to the SEND Partnership Board. |

Contents

Foreword

Our vision is for all our children and young people with Special Educational Needs and Disabilities to have high aspirations and to achieve positive lifelong outcomes.

The Special Education Needs and Disabilities (SEND) Partnership has high aspirations for every child and young person with SEND in Enfield. We want them to achieve their best in the early years and throughout their education; in their social development, health and wellbeing; and as they take their next step towards independence and adulthood.

This strategy sets out our commitment to making sure our children, young people and families can access what they need locally to thrive in all areas of their lives – the right services and support, at the right time and in the right place. At the heart of our work is also a commitment across our partnership to champion inclusion, and to recognise the strength of our community as we work together with our children, young people and families to drive forward our ambitious SEND agenda in Enfield.

As a SEND Partnership, we recognise that there are an increasing number of children and young people being identified with SEND, and across the national and local systems there are financial pressures and challenges. Through efficient monitoring, joint commissioning, and service improvements we are working hard to make sure we continue to meet the changing needs of our children, young people and families in Enfield.

This strategy has been developed with the hard work and dedication of local stakeholders, drawing on their lived experience and expertise. We would like to take this opportunity to formally thank all who have contributed and given their time.
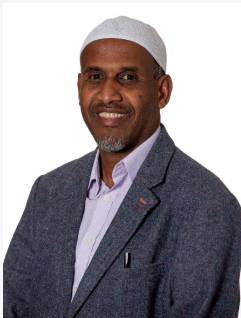
Cllr Abdul Abdullahi
Cabinet Member for Children's Services

Introduction

Enfield's Special Educational Needs and Disabilities (SEND) Partnership Strategy 2023-27 replaces the SEND Education Strategy published in 2018. The new strategy is for our children and young people with SEND up to the age of 25, and sets out:

"Our vision" for what we want life to be like for our children and young people with SEND.

"Our four principles" that guide our actions and our decisions across the SEND Partnership and workforce.

"Our five priorities" that set out what we will be working together to deliver over the next four years.

"Our governance structure" that sets out who is responsible for delivering; monitoring and reviewing this strategy and how we will track our progress.

The role of our SEND Partnership Board

The SEND Partnership Board are responsible for overseeing and delivering this strategy and our action plan. The SEND Partnership brings together representatives from our parent and carer groups and expertise from education, health, social care and the voluntary and community sector. The partnership is chaired by Enfield Council's Director of Education.

How we developed the SEND Partnership Strategy

In 2021, the SEND Partnership Strategy Development Group was established to help share experiences, provide context and give guidance on this strategy and future action plan. The multi-agency group included expertise from education, health, social care and the voluntary sector. Members worked closely with the Council's Corporate Strategy Service and met regularly to shape the strategy. The expertise and experience of our Strategy Development Group was brought together with research, local evidence of need and benchmarking of other local authorities to inform our first draft.

We then carried out engagement with members of the SEND Partnership and local stakeholders. We used a variety of different methods to gain feedback from colleagues, local practitioners, parents, carers and individuals with lived experience. This included focus groups, questionnaires, engaging through existing forums and attending the annual Our Voice conference (attended by over 80 parents and carers).

All About Us, our local network of child and young person SEND participation groups shared their views on being safe, healthy, happy, included and prepared for their independence and adulthood. We also met with the VIPs SEND Youth Groups on three occasions at our youth centres to hear their experiences of being included at school and in their communities.

The views and ideas shared with us during our engagement have helped us to better understand experiences locally; what is working well and what needs to be improved. Our SEND Partnership Strategy is a stronger document because of their contributions.

The National SEND System

A great deal has changed in the national SEND system, since the Lamb inquiry called for a "radical overhaul" in 2009.[1] This included the introduction of the Children and Families Act (2014), the SEND Code of Practice: 0 to 25 years (2014/15) and the Care Act (2014).

At the centre of the reforms was a call for earlier identification of SEND, joined up working between education, health and social care services, and an emphasis on a child-centred approach, which placed the voice of the child, young person and their family at the heart of decision making. The Care Act (2014) also set out that young people at the age of 18 with care and support needs would undergo an assessment in line with any existing plans such as their Education Health and Care Plan (EHCP). This would set out their care and support needs and the resources allocated.

We are now over eight years on from the introduction of the 2014 reforms and 13 years on from the Lamb Inquiry. While important progress has been made, the Government acknowledges that there are ongoing challenges across the SEND system, and many of the issues and inequalities faced by our children, young people and their families have been exacerbated by the effects of the COVID-19 pandemic and the resulting lockdowns.[2]

As part of the Government's work to support children and young people with SEND they have recently published a new National Disability Strategy (2021), which is committed to improving the experience of disabled children and young people at school and while accessing education. The Government has also published a national strategy for improving the lives of autistic people and their families and carers in England. Most recently Ofsted and the Care Quality Commission (CQC) has consulted on proposals for a new joint framework for inspecting local provision for children and young people with SEND, with new inspections to be introduced in 2023.

Additionally, an Independent Review of Children's Social Care and the Government's 'SEND Review: Right Support, right place, right time', have also been published. The SEND Review importantly has identified three key challenges facing our children, young people and families across the country at present.[3] These are:

1.	Navigating the SEND system and alternative provision is not a positive experience for too many children, young people and their families.
2.	Outcomes for children and young people with SEND or in alternative provision are consistently worse than their peers across every measure.
3.	Despite the continuing and unprecedented investment, the system is not financially sustainable.

The SEND Review has set out the Government's plans to respond to these challenges. They intend to strengthen the SEND system, including through: early and consistent identification of SEN in the early years; improved workforce development; a standardised and digitised EHCP process and template; clearer systems, roles, accountability, and funding reforms.

The SEND Partnership welcome the Government's recent review and commitment to strengthening the SEND system. We support a more inclusive, easier to navigate and sustainably funded SEND system with clear accountabilities and roles, which places the needs and aspirations of our children and young people at its heart. This strategy enables us to deliver this commitment.
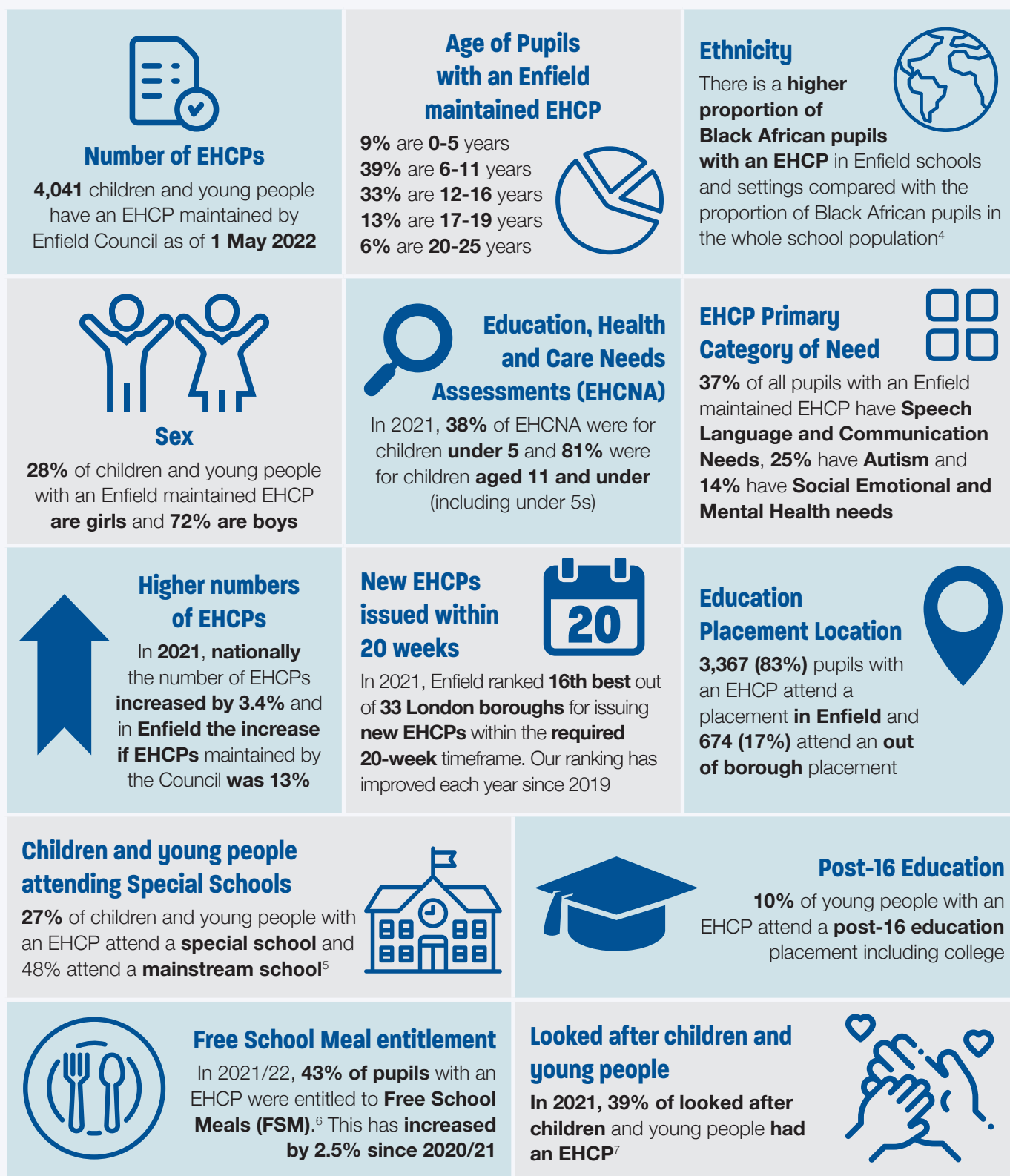
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1 Department for Children, Schools and Families, Lamb Inquiry (2009) 'Special educational needs and parental confidence' cited in Ofsted, (2021) SEND: old Issues, new issues, next steps.
2 Council for Disabled Children (2022) Investing in early intervention
3 SEND Review: Right Support, right place, right time

The Local Picture

About our Children and Young People with Education, Health and Care Plans

Number of EHCPs

4,041 children and young people have an EHCP maintained by Enfield Council as of **1 May 2022**

Age of Pupils with an Enfield maintained EHCP

9% are **0-5** years
39% are **6-11** years
33% are **12-16** years
13% are **17-19** years
6% are **20-25** years

Ethnicity

There is a **higher proportion of Black African pupils with an EHCP** in Enfield schools and settings compared with the proportion of Black African pupils in the whole school population[4]

Sex

28% of children and young people with an Enfield maintained EHCP **are girls** and **72% are boys**

Education, Health and Care Needs Assessments (EHCNA)

In 2021, **38%** of EHCNA were for children **under 5** and **81%** were for children **aged 11 and under** (including under 5s)

EHCP Primary Category of Need

37% of all pupils with an Enfield maintained EHCP have **Speech Language and Communication Needs**, **25%** have **Autism** and **14%** have **Social Emotional and Mental Health needs**

Higher numbers of EHCPs

In **2021**, **nationally** the number of EHCPs **increased by 3.4%** and in **Enfield the increase if EHCPs** maintained by the Council **was 13%**

New EHCPs issued within 20 weeks

In 2021, Enfield ranked **16th best** out of **33 London boroughs** for issuing **new EHCPs** within the **required 20-week** timeframe. Our ranking has improved each year since 2019

Education Placement Location

3,367 (83%) pupils with an EHCP attend a placement **in Enfield** and **674 (17%)** attend an **out of borough** placement

Children and young people attending Special Schools

27% of children and young people with an EHCP attend a **special school** and 48% attend a **mainstream school**[5]

Post-16 Education

10% of young people with an EHCP attend a **post-16 education** placement including college

Free School Meal entitlement

In 2021/22, **43% of pupils** with an EHCP were entitled to **Free School Meals (FSM)**.[6] This has **increased by 2.5% since 2020/21**

Looked after children and young people

In 2021, 39% of looked after children and young people **had an EHCP**[7]

4 Include state-funded nursery, primary, secondary, and special schools, non-maintained special schools and pupil referral units.
5 A further 10% of pupils attend a post-16 setting or college and our remaining pupils attend a range of settings including independent schools and elective home education. Just over 1% of pupils are not in Education, Employment or Training (NEET), and 2.5% of pupils are awaiting an education placement.
6 Totals include Enfield state-funded nursery, primary, secondary and special schools, non-maintained special schools and pupil referral units.
7 All provision included in school and alternative provision census.

Absences

Overall, children and young people with EHCPs on average missed **11.8% of available sessions** in the 2020/21 academic year.[8] Overall Pupils without SEND missed 5.1% of available sessions

Exclusions

In 2019/20, just under 4% of all pupils had an EHCP, however they represented 11% of pupils with a fixed term exclusion. Zero pupils with an EHCP were permanently excluded from Enfield schools.

Supported Internships

From the 2020/21 cohort, **80% of students** (25 people) **were offered a job** at the end of their supported internship programme

About our Children and Young People receiving Special Educational Needs (SEN) Support at their Enfield school or setting

Number of pupils receiving SEN Support

In 2022, around **10.6% or 5,896 pupils** were receiving **SEN support** at Enfield mainstream schools

5-16
Age of pupils receiving SEN Support

In 2022, **10.5%** of children **attending** Enfield mainstream **primary schools** and **10.7%** young people attending **Enfield secondary schools receive SEN Support**

Ethnicity

Black African, Black Caribbean, White British and White Turkish pupils are **overrepresented** in the proportion of children and young people receiving SEN Support[9]

Sex

In 2021/22, 38% of children and young people receiving SEN Support were **girls** and **62%** were **boys**

SEN Support Primary Category of Need

In 2021/22, **30%** of pupils **receiving SEN Support had Speech Language and Communication Needs, 22%** had **Social Emotional and Mental Health** needs and almost **21%** had a **Moderate Learning Difficulty**

Free School Meal entitlement

In 2021/22, almost **37%** of pupils who received **SEN support** were entitled to **Free School Meals (FSM)**. This has **increased by 4%** since **2020/21**

Looked after children and young people

In 2021, 25% of looked after children and young people received **SEN Support**

Exclusions

In 2019/20, just under **4% of all pupils had an EHCP,** however they represented **11%** of pupils with a fixed term exclusion. Zero pupils with an **EHCP** were **permanently excluded from** Enfield schools

Absences

Overall, children and young people who received SEN support on average **missed 7% of available sessions** in the 2020/21 academic year

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8   A session refers to a school half day either in the morning or afternoon. Includes both authorised and unauthorised absences.
9   Compared with the proportion of Black African, Black Caribbean, White British and White Turkish pupils in the whole school population.

Successes and Challenges

The new SEND Partnership Strategy builds on the crucial progress made since the publication of our SEND Education Strategy in July 2018. Our previous Strategy focused on three important priorities, including: early identification of need; improving access and participation in schools and settings; and supporting a successful transition to adulthood. These are some our key successes:

- The Council's SEN Service has received additional funding and have increased their workforce from 8 to 15 SEN Officers.

- The Council has recruited a Designated Social Care Officer (DSCO) who is tripartite funded by Children's Social Care, Adult's Social Care and the SEN Service.

- Area SENCo support in the Early Years SEND Team has increased by the equivalent of 1 full time member of staff to support Private, Voluntary and Independent (PVI) settings, to be more inclusive in their SEND Offer and to support the transition to reception.

- £1,000,000 was invested from the Designated Schools Grant, to develop Early Intervention Services to support speech, language and communication needs (SLCN) through the new Enfield Communication and Support Service (ECASS); Autism and neurodiversity through the expansion of the Enfield Advisory Service for Autism (EASA); and Social Emotional and Mental Health needs, through Enfield Trauma Informed Practice in Schools and Settings (E-TIPSS).

- An application process for new Special (Additional) Resourced Provisions (ARPs) was created and 6 new ARPs have been approved. ARPs provide placements for children and young people who can access a mainstream curriculum for parts of the school day. The ARP facilities can be in an allocated space within the school or could be virtual where the resources are provided to children and young people within their mainstream lessons. We now offer 180 ARP places across 17 schools and settings.

- The first designated unit was developed in a mainstream school to make sure children have the right to mainstream education – we currently have 40 places in 3 units and we have plans to offer a further 80 places in 8 units across primary and secondary schools in Enfield. Designated units provide placements for children and young people with complex needs who will find it challenging to access a full mainstream curriculum. They access specialist support and attend mainstream classes where they can participate, including lessons and activities such as Physical Education (PE), assembly or lunch.

- A new special school has been built opened in September 2022. The opening of Salmons Brook School means that by September 2025, 70 pupils with Social, Emotional and Mental Health (SEMH) needs will be educated locally in a school that meets their needs.

- Mental Health Support Teams (MHSTs) have been in Enfield since 2019 and 49 education sites have been offered support.

- The Educational Psychology Service has provided the Emotional Literacy Support Assistants (ELSAs) programme since 2020. There are now 52 ELSAs working across 29 schools, providing interventions to support children's social and emotional development.

- The number and range of local play and leisure opportunities and activities for children and young people with SEND has increased, including through Enfield's Summer University programme. This programme offers a diverse range of learning courses and fun activities during the summer holidays. The 2021 Summer University included courses and activities for young people with SEND, including Drama for All, Strike Back Martial Arts, and Dance 4 Fun. 78 young people with SEND participated in the 2021 programme.

- The statutory assessment process has been simplified in collaboration with schools and parent/carers. We have also set up a new annual review quality assurance process to help us make sure EHCPs are of a consistently high standard. So far in 2022, we have on averaged produced 79.4% (excluding exceptions) of EHCPs within 20 weeks.

- A network of "All About Us" participation groups have been established in 5 settings so far. All About Us is collaboratively delivered by the Council, schools, local youth groups, as well as parent/carers. All About Us supports children and young people with SEND to shape services and support in Enfield.

- The existing, successful Nurture Group offer has been reviewed to allow more schools to host a group and to provide support through a Nurture Group Outreach offer. The number of Nurture Groups has now increased from 14 to 20, with over 200 children supported each year.

Similar to the national picture, the SEND Partnership recognises that there are ongoing challenges and frustrations for our children, young people and their families. Importantly, our parent and carer forum, Our Voice has raised nine crucial areas on behalf of our local families. These are:

Over the next four years, the SEND Partnership are committed to reducing parental frustration, upskilling our early years settings, schools and colleges around inclusion, enhancing the annual review process, delivering effective early intervention, and improving outcomes for children and young people.

Our Vision

Our vision is for all our children and young people with Special Educational Needs and Disabilities to have high aspirations and to achieve positive lifelong outcomes.

In practice, this means making sure all our children and young people with SEND are safe, healthy, happy and included in their educational setting and communities. We want our children and young people to discover and achieve their goals and we want to empower them to be at the heart of decision making, so that they can make positive choices about their lives and futures.

As our children and young people grow up, we want them to feel confident and prepared for adulthood and their independence, with the skills and opportunities they need to thrive. Together, our collective ambition is to make Enfield an inclusive borough where "SEND is everyone's business". An inclusive Enfield is a place where diversity and difference are understood and celebrated, and where barriers are minimised or removed.

Our Principles

Principle 1: Listen to our children, young people and families and make sure they are at the heart of decisions about themselves and their borough

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The SEND Partnership will work in a way that recognises, promotes and respects the views of the child [or young person] and their family.[10] This important principle is crucial to making sure we take the right steps to better understand their lived experiences and how this affects them every day. We can better know how to support the needs of our children, young people and families, by building trusting relationships and making sure they have an active and collaborative role in shaping the decisions that affect their lives.

Principle 2: Empower and enable our children, young people and families to be as independent as they can be

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The SEND Partnership will work together with our children, young people and families to utilise and build on their strengths to help them live independent and fulfilling lives.[11] Focusing on the strengths of our families is not about less support and services.[12] Instead, it's about working together with our children, young people and families to find solutions, and helping them to recognise the strengths, skills, assets and the capability they have to effect positive outcomes in their own lives.[13] This includes providing the right help to support our children and young people to acquire and develop the knowledge and skills they need to learn and for day to day life.

Principle 3: Work together to deliver the right support, in the right place and at the right time

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The workforce across the SEND Partnership will work together to meet the needs of our families. When we talk about the 'right time' this means identifying needs at the earliest possible opportunity. The 'right support' might include universal services that are available for all our children and young people, or where appropriate it will be targeted or specialist services and placements. The 'right place' is where their need can best be met. This might be at a children's centre, school, youth centre, a local community hub, family hub, a clinic or hospital setting, a virtual platform or through a group that meets in the community. Wherever possible, the right place should be available locally in Enfield.

Principle 4: Work with all families in a fair and sensitive way

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The workforce across the SEND Partnership will treat everyone with dignity and respect, and we will make sure that all our families receive fair and sensitive access to services and support. Equality, diversity and inclusion is central to the decisions we make on how to deliver the best possible outcomes for our families, with the resources that we have available.

10 UN Convention on the Rights of the Child: Article 12: (respect for the views of the child)
11 Enfield Council (2021) Early Help for All Strategy 2021-25
12 Department of Health and Social Care (2019) Strength-based approach: Practice Framework and Practice Handbook, pp.24
13 Social Care Institute of Excellence (2018) Strength-based social care for children, young people, and their families

Priority 1

Know our local area and effectively plan for the needs of our children, young people and families

Across the SEND Partnership we collect and use data to better understand our SEND community, including who they are what they need from local services and support. This information is used to understand how well the local area is performing and to help us make decisions about our local offer.

Enfield Council works together with the NHS North Central London Integrated Care Board (ICB)[14] to make sure services supporting the health, education and care of our children and young people are providing the best possible outcomes.

Some of the services we commission are available to all our families and are not specific to a need – these are universal services. Other services are there for families that require more specialist support for an identified need – these are targeted services. We commission a range of services that support children and young people with SEND, such as educational psychology, speech and language therapy, health visiting, school nursing, hearing and visual impairment support, and short breaks for children and young people with disabilities and their families. Data also helps us to effectively make decisions about provision such as school places, and how to meet immediate needs and longer-term demand. For example, 17% of our children and young people with SEND attend a school or setting that is outside of Enfield.

We are using our data and knowledge to increase provision to meet the needs of more children and young people in-borough. To strengthen how we manage, share and analyse high quality data and insights from across our SEND Partnership, we need to explore opportunities to further build and utilise our joint data dashboard, and improve the way we track long-term outcomes such as the destinations of our young people as they transition to adulthood. This will help us plan and enhance the services and support that children, young people and their families need both now and in the future.

However, we know that data is one part of the picture, and alone cannot provide us with a full understanding of our community's needs and their experiences. Therefore, we will continue to strengthen our approach to working in partnership with children, young people and their families to make sure they have the power to influence and shape services and support in Enfield. This includes the introduction of a new Council-wide Youth Participation Policy to support our workforce to include children, young people and families in service design, commissioning, delivery, and evaluation, in a way that is meaningful to them. One of the important networks we will be doing this through is our new 'All About Us' SEND youth participation groups.

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14   ICB formerly called North Central London Clinical Commissioning Group

Looking ahead, we will:

- Develop our services based on high quality data and knowledge, that respond to the changing needs of our diverse community, their lived experiences, and the performance of our local area.

- Carry out ongoing analysis to identify local trends to help us to better plan and secure services and support for the future.

- Extend the range of opportunities to work in partnership with children, young people and their families to influence and shape services and support in Enfield. This includes consultation, engagement and co-production that is meaningful to our children, young people and families.

- Continually evaluate the impact and performance of our services, to make sure we effectively use our resources to have the greatest impact. This includes services we provide ourselves across the SEND Partnership, and services we commission other organisations to deliver.

- Develop and agree a shared SEND Partnership outcome framework. The outcome framework will link the work and the impact of services and support across education, health and social care with the everyday and life outcomes we want for our children and young people.

Priority 2

Identify needs early and provide the right support, in the right place, at the right time

The SEND Partnership are committed to making sure that our children, young people and their families get the right support at the right time, by identifying and assessing their needs early. For some of our children and young people, their needs may be identified before they are born or at birth, for others their needs may emerge or change as they grow up. Early identification is an important first step to making sure children and young people benefit from the right services and support that they need to help them thrive, throughout all stages of their childhood and as they transition into adulthood.

We know that the first 1,001 days of a child's life (from conception up until the age of 2), can have a significant impact on their development and their life chances; including how well they build relationships, achieve at school and their future job prospects, to their overall health and wellbeing.[15] However, a child's development and their life chances can also be impacted by lots of different factors, such as their early relationships and the care they receive, living in poverty or becoming looked after.[16]

Our children and young people with SEND, are more likely to experience poorer life outcomes and have less opportunities than their peers.[17] We are committed to tackling the inequalities experienced by our children and young people with SEND and over the next four years we are continuing to strengthen our early identification and early intervention services. This includes making sure we have high quality early years provision, which we know can reduce the likelihood of a child or young person being identified with SEN later on.[18] As a partnership, we are continuing to develop our services and workforce skills to identify, assess and meet needs, and we have invested in early intervention services to support our children and young people's Speech, Language and Communication Needs; Social, Emotional and Mental Health; and Autism and other neurodiverse needs.

We will also be working together to support the delivery of the early help services that wrap around our families to make sure they can access the right information, advice and support for their child's individual needs and their family circumstances, in a timely way. This includes supporting our families to give their child the best start in life, through services such as midwifery, health visiting and parenting support; and enabling families to access early help including housing, debt and income advice.

> We talked about the things that worry me and I now feel safe and supported by my teacher, which will help me in class

15 HM Government (2021) The Best Start for Life: The Early Years Healthy Development Review Report (A Vision for the 1,001 Critical Days)
16 ibid
17 SEND Review: Right Support, right place, right time pp.20
18 SEND Review: Right Support, right place, right time pp.39

Looking ahead, we will:

- Identify SEND early by effectively developing our services, to ensure robust processes and the right workforce skills and knowledge are in place across education, health and social care.

- Work together as a partnership to make sure families have access to appropriate information, advice and support for their child's individual needs and their family circumstances. This includes a well-publicised, up-to-date, easy to understand and navigate Local Offer for SEND, developed in partnership with our parents and carers.

- Make sure all our children and young people receive an excellent education, and their needs are effectively met in an education setting or environment that is right for them. Wherever possible, this should be in a local mainstream setting. To support this, we are using our data and knowledge to accurately plan the right number of places, this includes increasing the number of Special Resourced Provisions (SRPs), and designated units in mainstream schools.

- Continue to develop an effective and sustainable needs-based approach to reducing wait times for children and young people with neurodiverse differences, making sure they can access support whist awaiting a diagnosis, based upon their presenting needs.

- Work together with our schools and settings to introduce a Preparing for Adulthood (PfA) enriched curriculum from the earliest opportunity. This includes advice and support provided through the East London Careers Hub and network.

Priority 3

Make sure inclusion is at the heart of our services and communities

We all share a responsibility for working together to make Enfield an inclusive borough for our children and young people with SEND and their families – "SEND is everyone's business."

We asked children, young people and young adults[19] with SEND about their experience of inclusion in their school or educational setting and in their community, and these are some of the things they told us:

"I really like my teachers; they listen to what I say"

(Young person, member of VIPs)

"Sometimes people don't listen to what I have to say"

(Young person, member of VIPs)

"I sometimes sit there doing nothing and then they know something is up"

(Young person, member of VIPs)

"I'm treated like everyone else. But I don't feel I'm like everyone else – how I interact is different"

(Young person, member of VIPs)

"Social workers listen to me and write down what I say"

(Young adult, VIPs)

"I am very ambitious. I know what I want and need, but don't know how to achieve it…I want a well-paid job, a home of my own, my own family…A job is the first step in achieving my ideal future"

(Young adult, VIPs)

"I want to make money. I can work in a food shop and get married."

(Young adult, VIPs)

Our local "All About Us" SEND participation groups at Durants School and West Lea School also shared their experiences of inclusion with us. We heard that trips out, being at school and playing online with their friends make them feel included, as well as attending youth clubs near to home and extra-curricular activities. Importantly, we heard that many of our children and young people feel included at school and at college. However, this is not always the case for everyone and one of our children said that their opinions and ideas were not always heard.[20]

19 Young adults who took part were aged between 23 to 26 and were not in education.
20 Discussions were held with groups of children and young people including those in Key Stages 1 through to 4 (age 5-16) at West Lea School and Key Stages 3 through to 5 (ages 12-18) at Durants School.

We believe that an inclusive borough is one where Council services work together with our community, schools and educational settings, health partners, service providers and local employers to support children and young people to thrive in all areas of their lives. At the heart of this is developing a culture where we all embrace difference; minimise or remove barriers; and where we better understand and address the interests and needs of our SEND community in local decision-making.

There is lots of important work already underway across our partnership to improve equality, diversity and inclusion. However, we recognise that there is a great deal more to be done in the years ahead. This includes making sure our local schools and settings are inclusive from the early years through to further education.

The Government's recent SEND Review found that parents and carers aren't always confident that their child's needs can be met in a mainstream school.[21] Our new Enfield School Inclusion Charter is one of the important ways we are working together to deliver an inclusive Education, to help local mainstream schools to meet the needs of children and young people with SEND wherever possible. The Charter has eight principles that have been developed by young people, school staff, parents and carers, council officers, health partners and voluntary sector organisations. By signing up, our early years settings, schools and colleges are committing to delivering

an inclusive education, by embedding the principles in their every-day practices. Looking ahead Enfield's Youth Development Service are also planning to adopt the Inclusion Charter, making sure all our young people feel included across our wider community offer.

We want our young people to have a lifetime of opportunity as they grow up and this includes access to paid employment and living as independently as possible. In 2020/21, 16.8% of adults with a learning disability in Enfield who received long-term support during the year were in paid employment. Although this is the highest figure in London (London average of 6.1%) and the 4th highest nationally (the England average was 5.1%), the Council and partners are continuing to work hard to increase the number of local residents with SEND who are in paid employment. This is crucial to making sure that Enfield is a fairer and more inclusive place for everyone.[22]

The Council is also committed to delivering inclusive and accessible homes that meet the changing needs of children and young people with SEND and their families. This includes considering the proximity of the right schools or settings when housing a family. We are also working hard to better understand and map current and future housing needs, to make sure we develop the right variety of housing supply in Enfield. This includes housing for young people with SEND who are transitioning to adulthood, to enable them to live as independently as possible.[23]

Looking ahead, we will:

- Build our network of inclusive early year settings, schools and colleges that have signed up to and are living by the principles of the Inclusion Charter.

- Continue to further develop the range of play, leisure and social opportunities available in the community. This supports children and young people with SEND to maintain a healthy lifestyle and to make healthy and informed choices about their physical and mental health and emotional wellbeing, and provides parent/carers with a break from caring responsibilities.

- Support early years settings, schools, colleges and our partners to implement and embed trauma-informed practice in their day-to-day work. We are delivering this through our Enfield Trauma Informed Practice in Schools and Settings (E-TIPSS) initiative, which is helping our workforce to understand the importance of having the capacity to observe and make sense of the emotional needs underlying children's behaviours and to respond appropriately.

- Continue to support our early years settings, schools, colleges and our community to understand and

embed good communication and autism practices. This will be delivered through universal and targeted services, provided by health services, Enfield Council, and multi-agency teams such as the Enfield Communication and Support Service (ECASS) and the Enfield Advisory Service for Autism (EASA).

- Provide a range of fair and inclusive travel assistance options for children and young people getting to and from school or college, so that young people are as independent as they can be, as early as possible.

- Support young people with SEND to be ambitious; active and included members of their communities and to further their independence as they prepare for adulthood. This includes good quality work experience, apprenticeship opportunities and supported internships tailored to their personal interests and goals.

- Continue to deliver on our commitments as community leader and champion for children, employer, service provider and commissioner to create an inclusive Enfield as set out in our Fairer Enfield Policy.

21 SEND Review: Right Support, right place, right time pp.10
22 As set out in our Fairer Enfield Policy
23 This work forms part of the Council's ongoing delivery of the Housing and Good Growth Strategy

Priority 4

Deliver high quality, effective and timely Education, Health and Care Needs Assessments (EHCNA) and Plans (EHCPs)

An Education, Health and Care Plan (EHCP) is a legal document, which sets out how a child or young person's needs will be supported through education, health and social care services and support. Importantly, the EHCP also includes a dedicated focus on a child and young person's aspirations and the support they need to prepare for adulthood and their independence. An EHCP can remain in place up until the age of 25.

Not all children and young people with SEND will have or need an EHCP. This is determined by the Education, Health and Care Needs Assessment (also called a 'statutory assessment'). Enfield currently maintains EHCPs for 3.5% of 0–25-year-olds in Enfield. Although this is below the national average of 3.75%,[24] the local area has experienced a much higher growth in the number of EHCPs each year since 2018, when compared with the national average.

Children and young people who do not need an EHCP, but still require extra or different support, will receive this at school. This is called SEN Support and it is tailored to the individual needs of the child or young person and is met through the school's notional budget.[25] As of January 2022, 10.6% of pupils attending Enfield schools and settings receive SEN Support.

Each year an Annual Review will take place, where the Local Authority works together with the family to determine if the EHCP should continue to be maintained, amended or ceased. We start to think about their preparing for adulthood objectives from an early age, making sure the right care and support is in place by the time they reach the age of 18. We call this 'Moving On' and when a young person reaches 18, the responsibility for providing their health and social care support transfers from Children's Services to Adult Social Care, if they are eligible.

The SEND Partnership recognises and understands the frustrations felt, and the challenges experienced by our families, local practitioners, schools and educational settings around EHCPs. Notably, during our engagement there were concerns about the effectiveness of the Annual Review process. Looking ahead, we are committed to continuing to improve the time it takes us to complete EHC needs assessments and EHCPs. We are also working hard to make sure EHCPs are of a consistently high standard and that our workforce across the partnership have the skills they need to confidently develop plans, which include high quality professional advice. Crucially, work is already underway to strengthen the Annual Review process, and this is a key area of focus for us over the next four years.

24 Number of Enfield council Maintained EHCPs at 31 March 2022
25 An amount of money paid directly to the school to help make special educational provision meet the needs of children with SEND.

Looking ahead, we will:

- Complete 95% or more of statutory EHC needs assessments on time.

- Produce 95% or more of EHCPs within the statutory 20-week timeframe without exceptions.

- Make sure every EHCP is meaningfully co-produced with the family; and the plan is easy to understand with a clear account of the child or young person's needs and aspirations, linked to the right services and support.

- Make sure every child and young person's EHCP is of a high standard by continually reviewing and strengthening our quality assurance processes.

- Improve our Annual Review process in line with statutory timeframes and guidance.

- Make sure all outcomes in the Annual Review are actioned and decisions to maintain, amend or cease an EHCP are made in a timely way.

- Develop our workforce skills to make sure they are fully trained and confident in EHCP processes and procedures.

- Have mechanisms in place to make sure health practitioners and clinicians fully support the integrated EHC needs assessment process, providing information, advice, support and interventions to meet identified need within statutory/stated timescales

All about me and what I think is important

My aspirations

My education

My health

My care

My EHCP

My EHCP
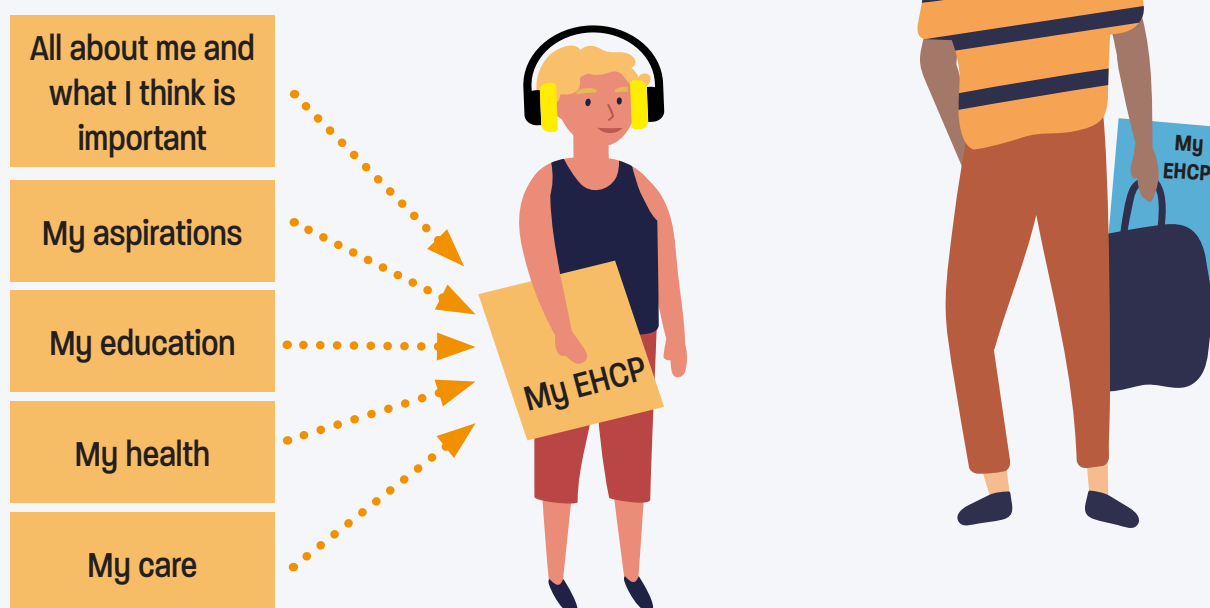
Priority 5

Develop opportunities for children and young people with complex needs to have high aspirations, participate and thrive

Children and young people with complex needs may require a lot of additional support in their day to day lives. This provision might be for complex SEND, medical and/or mental health needs. The nature of the support provided is shaped by the individual needs of the child or young person and their family and this will be provided as early as possible.

The SEND Partnership aims to provide the right support, at the right time and within Enfield, through an integrated offer that is responsive and personalised to their identified and changing needs. An integrated offer means the services and support available across education, health and social care are joined up and work well together.

Across our offer, it's vital that we involve children and young people with complex needs in the decision-making and planning of their care and education, and in shaping the services and support they need and use. Working together with our children and young people is an important part of our current work, but we are committed to continuing to strengthen our approach to meaningful participation with children and young people across the partnership.

As our young people with complex needs grow up, we recognise that each of them will have their own personal milestones as they work towards their independence. The table below sets out some of the key areas we think are important to supporting our young people after they leave school:

Young People with Profound and Multiple Learning Difficulties (PMLD)	Young People with Severe Learning Difficulties (SLD)
We want our young people with the most complex needs to be safe, to feel comfortable and to have a life that is meaningful. We want our young people to have their health and social care needs met and to live in the environment that best suits their needs. This environment will support our young people to live as independently as possible and be included in their local community. To achieve this, we need to make sure we have appropriate housing provisions that respond to their current and changing needs, and relevant day opportunities to support our young people to further the skills they have gained at school, including time to socialise and build relationships, learn and develop independent living skills.	We want our young people with Severe Learning Difficulties to be able to access specialist further education provisions and day opportunities, that include time to learn, build independent living skills and socialise. Where it's right for our young people, we want them to access a supported pathway into employment or meaningful volunteering tailored to their interests and aspirations. To achieve this, we need to make sure our young people have access to the right health (including physical, mental health and emotional wellbeing) and social care; discrete and specialist learning pathways, and relevant day opportunities. The opportunities available should support our young people to build on their educational passport and achieve their PfA aspirations, including employment. We also need to make sure we have the right variety of housing opportunities available to support young people to live as independently as possible in their local community. This might include through specialist housing or support while living at home with their family.

Looking ahead, we will:

- Work together to make sure that our children and young people with learning disabilities and/or autism can grow up and remain living in their local community and close to their families. This includes:

  – Effectively coordinating the Local Area Emergency Protocol, and Care and Education Treatment Reviews (CETRs). CETRs consider the child or young person's care, education or treatment and are focused on helping them get better, avoid hospital admission or supporting them be discharged from hospital. CETRs bring together the child/young person and their family, the commissioners and the professionals that provide the services, with an independent clinical advisor and an expert advisor who is someone with a lived experience. CETRs check that children and young people are safe, are getting the right care and they have a good plan for the future through ensuring any problems with their health, safety or care gets sorted out.

  – Maintaining a Dynamic Support Register (DSR) to make sure that as a multiagency team, children and young people are provided with the right early support so they can stay living at home with their families and in school, and that the right interventions are in place for those children at risk.

  – Making sure that our workforce across the SEND Partnership is equipped with the knowledge, skills and approaches they need to provide the right help for our children and young people with the most complex needs. This includes training and ongoing practice guidance in the areas of trauma informed practice, Positive Behaviour Support and effective responses to behaviours of concern that meet Restraint Reduction Network Standards.

  – Continuing our work to identify and develop local provision for our children and young people with complex needs who require placements with therapeutic intervention. This includes exploring opportunities to develop children's homes in Enfield to meet the needs of our children and young people with complex health needs and behaviours of concern.

- Support our young people to access the right discrete and specialist learning pathway that meets their medical, learning, and social needs.

- Further develop our approach to inclusively and meaningfully involving children and young people with complex needs in the decision-making and planning of their care, and in shaping the services and support they need and use.

Governance and tracking our progress

Enfield's SEND Partnership Board is responsible for overseeing the delivery, monitoring and review of this strategy. The progress of our strategy will be reviewed every two years, and where necessary updated to respond to local and national change; this includes because of the:

- The Independent Review of Children's Social Care
- SEND White Paper
- Updated Ofsted frameworks
- Refreshed NHS Long Term Plan
- Mental Health Act Review

Our Governance Framework sets out our relationships and importantly, how we will work together to deliver on our SEND Partnership Strategy. This is set out in the table below:

SEND Partnership Strategy Governance Framework	
Strategic Leadership:	The SEND Partnership Board are responsible for providing strategic direction and leadership to deliver our Vision, Principles and Priorities. The Board also agree and monitor our Action Plan. The associated joint Action Plan will be kept up to date and will be regularly reviewed throughout the lifecycle of the strategy. Individual actions are the responsibility of the named partner who are required to report on progress through their relevant internal governance structures as well as to the SEND Partnership Board.
Supported by:	The SEND Inclusion Group (formerly our Strategy Development Group), which is made up of Heads of Service from across the Partnership. This group meets monthly and helps drive forward the Action Plan.
Shaped by:	Our work is informed and shaped by the discussion and decisions made through our SEND Partnership workstreams, which include members of Our Voice Parent/Carer Forum and practitioners from different areas of the partnership. Our work is also informed by All About Us, our child and youth participation groups, the SENCo Inclusion Briefing and coffee mornings, Early Years Forum, Schools Forum, Headteachers Briefings; Our Voice Monthly Catch up; and wider boards and groups such as the Assurance Board and the Education Excellence Board.
Delivered by:	Our workforce across the Local Authority, early years settings, schools and colleges, Health and Social Care and partners including commissioned services and the Voluntary and Community Sector.
Accountable to:	The SEND Partnership are accountable to Enfield's Joint Health and Wellbeing Board; NHS North Central London Integrated Care Board; and Senior Leadership across the Partnership who are kept up to date and contribute to the SEND Agenda. This includes the Council's Executive Management Team.

How do we keep track of our progress?

To ensure that we are making a positive difference, we will keep track of our progress towards achieving our priorities through our SEND Partnership Action Plan. This important document helps us to recognise and understand the impact we are making on outcomes, and where necessary sets out any areas that might need to be improved.

The SEND Partnership Action Plan, includes:

- What we need to do to deliver on our priorities and what success looks like.

- The services and lead individuals responsible for overseeing and delivering the work.

- When the actions need to be completed (and any important milestones along the way).

- What progress we are making and any other considerations like funding or other potential risks that might impact when an action could be completed.

Other local strategies and policies that should be considered alongside this document:

- A lifetime of Opportunity – Enfield's Council Plan – 2020-2022

- Empowering Young Enfield (Enfield's Children and Young People's Plan) 2021-2025

- Fairer Enfield, (Equality, Diversity and Inclusion Policy) 2021-25

- The Enfield Poverty and Inequality Commission report

- Early Help for All Strategy 2021-2025

- Looked After Children Plan 2018-2021

- Tackling Child Neglect Strategy 2022-2025

- Autism Strategy (Expected 2023)

- Enfield School Inclusion Charter

- Safeguarding Adolescents from Exploitation and Abuse (SAFE) Strategy 2019-2022

- Joint Health and Wellbeing Strategy

- Enfield Housing Allocations Scheme

- Enfield Council Tenancy Strategy 2022-2025

- Housing and Growth Strategy 2020-2030

- Culture Strategy 2020-2025

- Sustainable and Ethical Procurement Policy 2022-2026

Acknowledgements

www.enfield.gov.uk

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Ordinarily Available Provision

Resources, approaches and reasonable adjustments that the Local Authority expects to be made available for children and young people with special educational needs and disabilities across mainstream schools in Enfield

Information for teachers and support staff working in schools

September 2022 to 2025
(to be reviewed in 2024)

www.enfield.gov.uk

ENFIELD
Council

Contents

Introduction to Ordinarily Available Provision 2022

This guidance has been co-produced with SENCO representatives from schools, parents/carers and a wide range of education, social care and health services. This document has also been written with reference to the work published on Ordinarily Available Provision by other authorities. Thank you to all who participated in this process and to Bristol, Cornwall, West Sussex and Portsmouth County Councils.

This document has been produced at a time when Enfield's SEND Partnership Strategy, Inclusion Charter and All Age Autism Strategy were all in development and therefore there is purposeful and natural alignment across these documents with this guidance.

> **Our vision is for all our children and young people with Special Educational Needs and Disabilities to have high aspirations and to achieve positive lifelong outcomes.**
>
> In practice, this means making sure all our children and young people with SEND are safe, healthy, happy and included in their educational setting and communities. We want our children and young people to discover and achieve their goals and we want to empower them to be at the heart of decision making, so that they can make positive choices about their lives and futures.
>
> As our children and young people grow up, we want them to feel confident and prepared for adulthood and their independence, with the skills and opportunities they need to thrive. Together, our collective ambition is to make Enfield an inclusive borough where "SEND is everyone's business". An inclusive Enfield is a place where diversity and difference are understood and celebrated, and where barriers are minimised or removed.
>
> Vision Statement: Enfield's SEND Partnership Strategy (2023 – 2027)

The SEN Code of Practice states that, where possible, children and young people (CYP) should attend mainstream schools[7] in their local area and should be encouraged to feel included and part of their local community.

All parents/carers of CYP with SEND have the right to choose a mainstream school place for their child. The culture and ethos of all mainstream schools has to be welcoming for all CYP, including those with SEND and their families. Therefore, it is the responsibility of every school to create an environment and community where all CYP feel safe, healthy, happy and included.

This guidance outlines the ordinarily available provision that the local area expects to be made available to support the inclusion of children and young people (CYP) with special educational needs and/or disabilities (SEND) in all mainstream schools[8]. This is commonly referred to as SEND support or the school/setting based stages of the graduated response, which schools should provide from their notional funding in meeting their obligations set out in the SEND Code of Practice (2015)[9].

Enfield is a needs-led borough, and any provision or support should be provided in line with the needs of the CYP and is not dependent on any formal diagnosis.

For further information about services and provision in Enfield please visit our Local Offer website.
https://www.enfield.gov.uk/services/children-and-education/local-offer

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7   This applies to local authority maintained, free schools, faith schools or academies.
8   Reception age to Year 11 (4-16 years).
9   SEND code of practice: 0 to 25 years - GOV.UK (www.gov.uk)

The Inclusion Charter[10]

Enfield has developed an Inclusion Charter in partnership with schools and partners across the local area. Education settings are invited to sign up to The Charter and demonstrate their commitment to promoting more inclusive Enfield for CYP with SEND across the following 8 principles:

Enfield Inclusion Charter

A charter for early years settings, schools and colleges committed to providing an inclusive education for children and young people in Enfield.

Signing the Inclusion Charter is a commitment to:

- ✔ Provide clear, visible and strong leadership for inclusion
- ✔ Ensure that everyone takes responsibility for including children and young people with special educational needs and disabilities
- ✔ Understand that all behaviour happens for a reason
- ✔ Listen and respond to children and young people's opinions and ideas when making any decision which impacts on their lives
- ✔ Celebrate difference and diversity
- ✔ Work with families, professionals and practitioners across our community to help all children and young people to thrive
- ✔ Ensure that everyone is comfortable to be open and honest about what support they need to help children and young people in their care
- ✔ Support children and young people to prepare for their adulthood from the early years and throughout their childhood and adolescence, so they can shape their future in the way they want.

The Charter has been developed by children and young people, headteachers, teachers, parents and carers, council officers, health partners and voluntary sector organisations.

www.enfield.gov.uk

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10 https://traded.enfield.gov.uk/thehub/information/enfield-inclusion-charter

Expectations for educational settings in Enfield

1. The Assess, Plan, Do, Review (APDR) Cycle and The Graduated Approach

The APDR cycle is used to regularly monitor and review the impact of interventions and strategies that have been implemented to meet a CYP's SEND. The regular review of support ensures that provision does not remain the same over time and that interventions that are not effective are discontinued or adapted to ensure impact. The cyclical process allows for an increasing understanding of the CYP's needs. It allows staff to evaluate what teaching approaches and support works best for the CYP, ensuring that they can be included and make progress across the curriculum.

Where expected progress is not seen at the review stage, increasing specialist expertise should be sought for the subsequent cycle. This is known as the Graduated Approach (SEN Code of Practice, 2015 p100).

In schools, the APDR cycle will be documented on school support plans e.g. Individual Education Plans, Learning Support Plans or equivalent documentation.

2. Partnership with children and young people and their parents/carers

We have introduced a new Council-wide Youth Participation Policy to support our workforce to include children, young people and families in service design, commissioning, delivery, and evaluation, in a way that is meaningful to them. One of the important networks we will be doing this through is our new 'All About Us' SEND youth participation groups.

The Graduated Approach (APDR)

ASSESS
Use of screening tools, observations and informal/formal assessments to identify strengths and needs which lay the foundation for forward planning. This may involve external agencies. These assessments may form the baseline for measuring progress and outcomes.

PLAN
With the child/young person, their parents/carers and key members of staff, plan interventions and/or strategies that can be used to address needs identified at the assessment stage. Identify expected outcomes.

REVIEW
With the child/young person, their parents/carers and key members of staff, celebrate any success(es) and plan next steps where outcomes have not been met. Refer to baseline assessments to highlight progress made.

DO
Implement interventions and/or strategies as agreed at the planning stage. Regular monitoring and record keeping should be in place.

Partnership with CYP

CYP's voices are at the centre of decision making with their views actively sought and valued.

This can be done in a variety of ways:

- CYP are involved in the graduated approach. They assess, plan, do and review their own learning.

- CYP are helped to value their progress and achievements and to recognise and understand their own barriers to learning.

- CYP understand, identify and contribute towards the targets they intend to achieve. The school's support plans should be used to document the assess, plan, do, review approach.

Partnership with parents and carers

Parents and carers and CYP have a participatory role in all decision making. This can be at different levels to fulfil a variety of purposes relating to the development of provision for CYP with SEND, which can include the following:

- Parents/carers and schools meet regularly to exchange information about the CYP.

- Home school diaries/planners/book bags/texts/emails are used to support communication between home and school.

- School support plans are used to record information relating to identified SEND interventions in place over time. Parents and carers are fully involved in setting and reviewing targets and outcomes.

- Schools discuss the SEND Code of Practice with families and fully explore what can be provided at SEND support in the local mainstream setting.

- Parents and carers are signposted to Enfield's local offer.

- Schools work closely with parents/carers and parent advocacy groups (SENDIASS) to create a shared understanding of needs and implement effective approaches to ensure outcomes are met.

- The school SEN Information Report is published on its website and the views of parents and carers are sought to inform this.

3. Staff skills and training

Schools have a planned programme of ongoing Continued Professional Development (CPD) in relation to SEND for the whole setting.

Teaching and non-teaching staff are supported by senior leaders to access appropriate continuing professional development opportunities for SEND, to develop their knowledge, skills and confidence. This enables them to use effective strategies in interventions so that CYP can make and sustain progress.

CPD may include face to face and online training, working with external specialists and the sharing of best practice within and between schools and settings through forums and networks, e.g. Enfield's SENCO Coffee Morning, Inclusion briefings, SEN Service briefings, Designated Safeguarding Lead Network and Senior Mental Health Leads Network etc.

Staff collaborate and have effective links with other relevant outside agencies school staff know when to refer to extra support. Advice received from other professionals is used to inform teaching and learning.

4. Transition and transfer

Change can be a difficult experience for many of our CYP with SEND especially if they have needs or past experiences that would affect their capability to understand and make sense of a new or unfamiliar routine, manage uncertainty or deal with loss or absence of something or someone.

Routine and life transitions can include:

- Moving around the setting.

- Preparing for weekends and the start of holidays and beginning of term.

- Moving from lesson to lesson.

- Changing from structured to unstructured times.

- Moving from break to lesson times.

- Moving from one activity to the next within a lesson.

- Changes of staff - permanent and temporary.

- Special events: visitors, visits, celebrations.

- Life events: birth of a sibling, loss and bereavement, puberty, change in parenting arrangements (e.g. change in parents' relationship status or contact visits).

Supportive strategies can include:

- A key person who has the capacity to notice changes in a CYP's emotional state and provide a supportive space to understand and value their concerns.

- Safe spaces are available within the classroom or an identified area of the setting when needed.

- Structured alternatives for unstructured times, e.g. games club, use of library for vulnerable CYP.

- Visual timetables.

- Signalling change in advance to prepare the CYP, use of countdown reminders and/or timers.

- Transition objects.

Transfer and Phase Transitions including change, entry and exit to educational settings. Parents and carers of children with SEND are often concerned about the move to secondary school and the increased demands that secondary schools will have on their child.

It is expected that primary and secondary schools work in partnership to plan the transition. Strategies can include:

- Sharing of information about the CYP strengths, needs and interests, strategies and approaches to support a successful transition. This information is available for the CYP's parents and carers, other colleagues within the setting and receiving or previous settings as required.

- Promote a sense of belonging to the new school by becoming familiar with the environment and encouraging attendance at social and extra-curricular activities.

- Standards and expectations of the new school are communicated to CYP at their level of understanding. Providing detail about the transition and what will happen afterwards

- Communication passports.

- Additional visits to the new school with familiar adults and/or peers who are also transitioning there. These should include opportunities to meet with key staff and navigating key places in the school

- Creating Social StoriesTM.

- Setting up buddy systems to support orientation in the first weeks of the new term.

- Home school partnership and communication.

Ordinarily Available Provision for Different Areas of Special Educational Need

The next section covers Ordinarily Available Provision under the main categories of SEND. There is an additional section that covers medical needs.

Fictious case studies are used to illustrate different needs and the support that could be put in place. However, presentations of CYP with SEND are unique and vary greatly. Often a CYP's needs are interrelated requiring a carefully considered and matched provision to the identified needs as part of the assess, plan, do, review process.

Cognition and Learning

Child or Young Person's Voice

'When teachers highlight the important words in the lesson.'

'Printed sheets help me so I do not have to rush copying off the board.'

A secret way I can ask for help – I don't like to put my hand up.'

'I find long instructions difficult to remember, when teacher's shorten them it really helps.'

Illustration by a pupil at Enfield Grammar School

'I like talking through my answers I find it better than writing it down.'

'Give us time to listen and time to answer questions.'

'Let us ask questions – check that we are doing it right.'

Cognition and Learning

Introduction

It is important that everyone in the school community has an understanding of how children learn and know how crucial effective adult support is for children to learn and develop. Children start to learn from the day they are born. As they grow they are subject to many experiences and with sensitive and intuitive support they develop the cognitive, social and emotional skills to make sense of the world around them. This in turn allows them to be able to acquire and develop increasing knowledge for everyday living as well as for academic life.

Every child's life experiences will be different and these will affect their future learning in different ways. For example, some children's learning can be influenced by biological or neurological factors which may mean that they learn at a different rate or need a different approach for them to acquire basic learning skills. Other children's learning will be Influenced by environmental factors perhaps when their opportunity to experience the wider world around them might be influenced by family finances or time, or if adults in the child's world are unable to provide consistent and sensitive support to allow them to develop, which can in turn impact on neurological development. Whatever the challenges might be, acknowledging and accepting the impact of different experiences that children may arrive at school with, and indeed continue to experience, is crucial to ensure inclusive practice in the classroom. With this understanding and the right support in school, all children can make progress with learning, even if it is only in small steps.

Children learn best through the provision of high quality and appropriate amount of adult support (mediation) so that they can access appropriate learning experiences (tasks) in order to help them develop 'tools of the mind' (learner skills). Therefore, when thinking about how to support learning it is it important to consider the interaction between these three aspects of the learning situation:
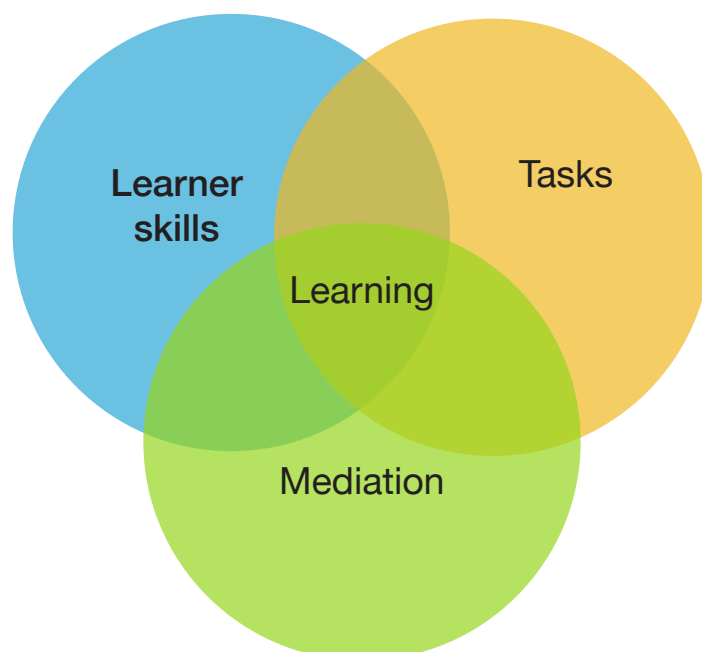
Learner Skills:

Cognitive skills are one aspect of the learning process, other key skills include: Physical skills, emotional skills and communication skills (see different sections). The cognitive aspects of learning can be broadly considered to fall into 3 groups of skills:

- **Perceptual Skills –**

    These are skills that we need to process sensory information in the world around us, including visual-spatial perception and auditory perception, but also perception of things that are more abstract such as quantity (magnitude) and time.

For example; being able to accurately perceive auditory information is crucial for phonological processing and reading development.

- **Conceptual Skills –**

These are skills that we need to help us process, understand and think about our experiences and develop academic knowledge, such as memory skills, language skills, comparison and grouping skills, the ability to make inferences and reasoning skills.

For example, being able to make connections between different bits of information are crucial to make inferences about a character's thoughts and actions in a story.

- **Regulation Skills (sometimes called 'Executive Functions') –**

These are skills we need to control our thinking processes and make learning efficient, such as controlling our attention and impulses, working memory, planning and organisation, regulating our emotions and thinking flexibly. For example, being able to 'hold in mind' and manipulate numbers (working memory), is crucial to be able to carry out mental calculations in maths.

Mediation Techniques:

In order to effectively support the development of cognitive and other learning skills, school staff need to assess which learning skills need to be supported to enable children to access classroom tasks. This support is sometimes called mediating learning and involves the adults acting as 'bridge' between the child and the task, aiming to equip the child with the 'tools of the mind' to work with increasing independence.

Appropriate Tasks:

The final piece of the 'jigsaw' is to make sure that children are provided with classroom learning tasks that differentiated so that they are within their 'zone of proximal development (ZPD)'. This means that in order to stretch and develop learning skills tasks need to present some aspect of challenge but be motivating and relevant and drawing on some existing skill and knowledge. Learners need to know what the relevance of the task is and how it fits with other learning they have done in school. By carefully presenting tasks by clearly explaining what the child has to do, why they need to do it and how it links to other lessons and learning staff are providing good mediation for learning in the classroom.

Overall, some challenges that children and young people face with learning can affect them in general ways (across all or many subjects) or specific ways (in specific subjects only such as literacy difficulties -specific learning difficulties -SpLD). General learning difficulties exist on a spectrum from moderate (MLD) to severe (SLD) and where significant physical disabilities and communication impairments are also present children are considered to have profound and multiple learning difficulties (PMLD) where the highest level of mediation and specialist provision mediation will be required. Some children will respond quickly and need support only for a short time, others will require more long term or intensive support to ensure progress over time.

Cognition and Learning

Whole School Approaches

Learner Skills

- Staff plan and deliver lessons with a knowledge and understanding of individual CYP's perceptual (e.g. visual-spatial, auditory etc), conceptual (e.g. ability to make connections) and regulation (e.g. impulse control, planning, emotion regulation etc) skills.

Mediation Techniques

- There are adaptations to the physical learning environment informed by awareness of CYP's perceptual, conceptual, and regulation needs, e.g. whole class visual schedules, tinted whiteboard, seating, visual and practical learning resources, visuals for key vocabulary etc.

- Teaching Assistants/Learning Support Assistants have access to planning in advance of lessons and are deployed effectively to support individual and groups of CYP with clear guidance of how to mediate learning.

- Staff plan for CYP to work in different groupings (independent, pairs, small group or whole class) to develop independent learning skills, interpersonal skills and opportunities for social learning and peers to act as mediators.

- All staff are trained and skilled in supporting CYP to develop general and specific learning needs across the cognitive aspects of learning (perceptual, conceptual and regulation skills). This will include how to effectively mediate learning with the aim of increasing independence. See examples below:

  - **Mediating perceptual skills**

    Staff will make sure that the CYP can accurately perceive information and help them to practice. For example; listening to and practising rhymes or songs or matching letters to sounds through fun and motivating games.

  - **Mediating Conceptual skills**

    Staff will make sure that the child has all the vocabulary and factual knowledge to be able to complete a task. For example; pre-teaching vocabulary, explaining new facts in a variety of ways, using real life experiences and visual materials. Making sure the child can see how different lessons or bits of learning link together. For example, helping them recall what they did in a previous lesson, or using a visual organiser to show how lessons link together in an overall topic

  - **Mediating regulation skills**

    Staff will make sure that there are not too many steps to a task to be done at once, or helping the child break down a more complex task into smaller 'chunks'. For example, using a writing frame to help structure and plan a piece of longer written work or helping a child to rehearse ideas verbal and dictate them to a scribe or using IT. Making sure that the learning environment helps the child to focus and maintain attention on the task. For example, minimising noise or movement or allowing for concentration breaks.

Appropriate Tasks

- Tasks are relevant, builds on previous learning and is differentiated so that CYP are challenged sufficiently but are working within their 'zone of proximal development' and can make expected progress.

- Self-esteem, resilience and ambition are promoted through opportunities to engage in learning tasks and activities that CYP can succeed in and their achievements are celebrated.

- Effective use of IT equipment and technology assigned the task as an alternative or augmentative communication approach.

What we see	What may help
(Some of these presentations may overlap within and across sections)	

General learning difficulty
 	
At school:
Farah is in year 4 and has general learning difficulties which mean that she encounters difficulties in understanding tasks and instructions, sequencing tasks, organising her work and with her long- and short-term memory. She enjoys practical tasks and prefers being shown what to do first. She is provided with differentiated work and support but is not making expected progress over time across the curriculum and is working below age related expectations.
 	
At home:
Farah's learning difficulties mean that she needs a lot of support in day-to-day life, such as sequencing her morning routine to get ready for school. Her play is developmentally similar to a 6 year old (year 2). She is reluctant to do her homework and is overly reliant on support and encouragement from adults to do all learning tasks.
	• Providing short instructions with a practical demonstration. Two- and three-part instructions are delivered in stages; provided one at a time with visual support (written or symbolic format).
	
	• Teaching new vocabulary and concepts through pre-teaching.
	
	• Setting class based and homework tasks at a level that aims to consolidate past learning or gradually build on past learning so success is routinely experienced.
	
	• Incorporating teaching and learning tasks into CYP's learning preference.
	
	• Deploying teaching assistants to encourage the development of skills for independent thinking and learning, e.g. ask questions:
	   o What equipment do you need?
	   o What do you need to ask your teacher?
	   o What do you need to do first?
	
	• Allowing the CYP thinking time before requiring a response.
	
	• Providing homework clubs and/or support/training for parents/carers so that they can support their child's learning at home.

Specific learning difficulties with reading **At school:** Samir is in year 2 and dislikes reading and spelling. He can read and spell his own name, has learnt 10 key sight vocabulary words and can reliably decode CVC words. He is not yet confident in reading CCVC words. He struggles to access lessons which require reading a lot of text **At home:** Samir enjoys reading comics at home and listens to audiobooks and podcasts. He often asks a family member to read letters from school and his homework tasks.	**Strategies for generalised learning difficulties, plus:** • Requesting a vision and hearing test. • Carrying out a baseline reading assessment. • Providing a structured phonics, sight vocabulary and/or evidence-based reading programme which is carefully planned and monitored. This is delivered in a paired or small group with peers of a similar ability. • Suggesting reading materials linked to CYP's hobbies and interests in various mediums (books, e-books, magazines comics, audiobooks etc). • Breaking down long texts into shorter, more manageable sections or presented in an alternative way, e.g. visual map. • Trialling the benefit of coloured overlays and reading rulers. • Providing simple adaptations to the presentation of texts, e.g. font, coloured background, spacing, lighting.

Cognition and Learning

What we see (Some of these presentations may overlap within and across sections)	What may help
Specific learning difficulties with writing **See also poor fine and gross motor skills** **At school:** Sofia is in year 5 and struggles with processing language during whole class teaching. She has significant difficulties with spelling and cannot read back her own work. She is creative and has lots of ideas but this is not reflected in her written work which she finds frustrating. **At home:** Sofia is very tired after school day and avoids talking about school. She will do her homework with some support but is reluctant to hand it in as she worries about the feedback she will get.	**Strategies for generalised learning difficulties, plus:** • Providing a language-rich environment to develop spoken language (e.g. displaying new words and corresponding visuals on the wall, using new words across different contexts, creating lots of opportunities to use language to interact, share a focus, to talk and to take turns). • Encouraging use of writing frames and other alternative forms of recording, e.g. visual representations of ideas, speech to text software. • Providing a list of high frequency words and/or a word bank of topic words from the lesson that can be referred to when writing. • Providing a structured phonics, sight vocabulary and/or evidence-based reading programme which is carefully planned and monitored. This is delivered in a paired or small group with peers of a similar ability. • Providing coloured paper and/or darker lines on paper. • Opportunities for oral rehearsal before writing. • Minimising the expectation to copy from the board by providing a printed alternative. • Access arrangements, e.g. additional time, scribing, transcripts, rest breaks for lessons, tests and exams should be considered. • Ensuring homework tasks are recorded correctly and parents/carers can have access to these.

What we see	What may help
(Some of these presentations may overlap within and across sections)	
Specific learning difficulties with Maths **At school:** Jordan is in year 9 and is always late to lessons because he can't tell the time. He finds it difficult to retain basic Mathematical knowledge and concepts e.g. times tables and cannot work out the answers to sums in his head. **At home:** Jordan always leaves his Maths homework until last and then runs out of time and doesn't complete it. In all other subjects he hands his homework in on time.	**Strategies for generalised learning difficulties, plus:** • Teaching the concept of time through experiential and practical activities, e.g. understand the experience 5 minutes. • Establishing a preferred format for reading the time, e.g. analogue or digital. • Providing opportunities to consolidate a concrete understanding of addition, subtraction, multiplication and division before expecting abstract number tasks. • Giving the CYP manipulative resources, e.g. Numicon, counters, Dienes base ten to provide a concrete representation to work out number problems before he moves onto more abstract level of maths. • Evidence-informed maths programme. • Providing resources to refer to in lessons, e.g. hundred squares, number lines, times table charts. • Opportunities to apply Maths to real-life problems, e.g. cooking, directions, shopping. • Explicit teaching of how to use a calculator, ruler and other Maths equipment.

External Agency Support (See Appendix 1 for referral contact details)

Educational Psychology Service

Special School Outreach Services

Enfield Advisory Service for Autism

SEND/Inclusion Professional Learning Programme

Early Years Area SENCO Team

Child Development Team for under 6s (diagnosis of Global Developmental Delay)

Additional Resources

Bennett, J. (2014). Dyslexia Pocketbook Second Edition. Teachers' Pocketbooks

Bird, R. (2021). The Dyscalculia Toolkit: Supporting Learners Difficulties in Maths 4th Edition. Sage Publications Ltd

Hornigold, J. (2015). Dyscalculia Pocketbook. Teachers' Pocketbooks

www.bdadyslexia.org.uk

www.thedyslexia-spldtrust.org.uk

www.helenarkell.org.uk

www.interventionsforliteracy.org.uk Greg Brooks What Works 5th Edition

https://www.lexiauk.co.uk/

Speech, Language and Communication Needs

Child or Young Person's Voice

Good eye contact and good body language is good for listening and talking.

The teacher gets cross with me because he thinks I don't do what he tells me to - but I didn't understand him and I couldn't remember what he said.

Lego Group helps me to improve my vocabulary and take turns.

Colourful Semantics helps me with my talking and writing.

Illustration by a pupil at Prince of Wales Primary School

Introduction

See also Deafness and Hearing Loss, Autism and Social, Emotional and Mental Health

It is important that everyone in the school community has an understanding of how to support CYP develop speech, language and communication skills as they are so embedded in our learning and everyday life. Speech language and communication skills underpin the basic skills of life and are necessary for understanding and achieving in all areas of the curriculum. More than 10% of CYP have long term SLCN which create a barrier to communication and learning. Without support in the education setting CYP will struggle to understand instructions, access the curriculum, manage their behaviour and achieve in school to their full potential.

The consequences of not getting this support right are far reaching and can result in: lower academic achievement, risk of developing SEMH needs, social isolation, school exclusion and a higher risk of being involved in criminality.

Whole School Approaches

When planning to meet the needs of CYP who have speech, language and communication needs, consider the following:

- Providing resources to support with learning new vocabulary (word walls in classroom, word mats on tables, vocabulary sent home before the start of topic so family can talk about it at home) are used to enhance learning and enrich language development.

- Good language models are used by all staff, including using clear sentences

- Visually displaying listener expectations e.g. good sitting, good listening and good looking alongside a hierarchy of what to do if you are stuck (i.e. look at the display, check the materials available on the table, look in the text, ask your talk/work partner, ask the teacher).

- Actively encourage the asking of questions from all students after direct teaching input and positively support students to ask for help and clarification in order to normalise the asking of questions. Praise the use of questioning from students.

- Using visual aids to support understanding e.g. pictures/photos to reinforce understanding of rules around the school.

- Explicitly teaching children what learning strategies are and when to use them (a meta-cognitive approach).

- Preparing CYP for any planned changes in timetables, both verbally and visually.

- Teachers should be able to loan stationary or other equipment required to CYP for their lessons as CYP who are unprepared for lessons may have an underlying difficulty with organisation or lack of resources/support from home rather than just being forgetful.

- Explicitly teaching the language of exams and assessments as these may be worded in complex ways.

- Information on CYP's needs, what helps and relevant targets e.g. communication passports or pupil profiles is shared with all staff working with them.

- Using talking Mats to gain CYP's views and to help with achieving outcomes that are important to them.

Using talking Mats to gain CYP's views

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulty understanding what they are being asked to do **At school:** Jack is in year 3 and doesn't listen to the teacher and is very easily distracted. He is often fidgeting and can be quite clumsy. He sometimes spends lessons dropping things on the floor, picking them back up, standing up and sitting back down in his seat. **At home:** Jack seems to spend a lot of time alone in his bedroom. His parents report that he doesn't listen when he is asked to do something and this can cause tension in the home.	• Obtaining the student's attention before giving them an instruction. • Reducing distractions where possible • Ensuring they understand the words you are using. • Pre-teaching and over teach new vocabulary. • Breaking down instructions into key words/parts – deliver one step at a time. • Giving instructions in the order you want them carried out in. • Using concrete and literal language (avoid ambiguous and figurative speech e.g. sarcasm, idioms). • Visually supporting the language you are using – pictures, photos, gesture, written key words etc. • Practically demonstrating/modelling of what they have been asked to do. • Giving CYP extra time (at least 10 seconds) to process what has been said) • Checking hearing (and vision). • Reducing background noise in the classroom. • Encouraging consistency and a calm environment throughout the classroom • Considering seating with a CYP who has positive learning behaviours, i.e. doesn't encourage him to talk. • Providing a fidget toy. • Giving really clear simple instructions for any task. • Asking the student to repeat back what they have been asked to do.

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties with understanding and responding to questions **At school:** Despina is in year 8 and gazes out of the window in most lessons, except Art. She doesn't know basics like the difference between a play and a novel and finds it hard to make comparisons. She doesn't appear to be interested in teacher talk. **At home:** Despina finds it easier to answer questions at home as her parents adapt their language to her level of understanding.	• Using simpler questions to scaffold child's thinking (Blank's Question Levels 1 and 2), • Breaking down questions into parts. • Providing visual support materials. • Providing model answers. • Giving the child a choice of answers. • Pre teaching simply terminology of curriculum. • Using familiar vocabulary and explain in simple words. • Flagging up any new keywords and go over them several times. • Using visuals wherever possible. • Using peer partners / peer teaching / peer feedback rather than all teacher talk. • Providing lots of praise and encouragement.
Difficulties paying attention **At school:** Noah is in year 8 and can't settle once he is in class and moves about. He appears to distract other students and chats to people around him. **At home:** Noah can concentrate for long periods on computer coding, however he refuses to do his homework and rushes through his dinner without engaging in any conversation with his parents or siblings.	• Checking the CYP understands the language being used. • Reducing the amount of language used to key words. • Reducing distractions. • Using verbal and visual prompts to help CYP understand listening expectations (for example, have rules on the wall and reward students with ticks for demonstrating target behaviours) • Prompting CYP to listen out for particular information during explanations/teaching – this may encourage active listening. • Providing a seating plan in all classes, e.g. same seat across the school - near the front, near door and surrounded by positive role models. • Seating next to a peer who can provide help. • Seating with enough space for an additional adult to work with them when required. • Offering a designated workstation that the CYP can choose to use if they are becoming distracted. • Provide a print out that can be stuck their book instead of expect CYP to copy from the board – asking CYP to highlight important words. • Making the learning objective simple and providing the class with simple instructions for each task. • Repeating the main parts of the lessons • Providing regular opportunities for questions to assess the amount of learning. • Providing regular mini summaries / plenaries. • Offering lots of praise and encouragement.

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties following expectations and school rules **At school:** Tia is in year 7 and regularly arrives late to class and leaves the classroom without permission. She is often not wearing the approved school uniform. **At home:** Tia doesn't like to talk about school and she is unable to explain to her parents why she has been given detentions. She feels that everything is unfair.	• Checking CYP's understanding of the words used in the school rules/behaviour policy. • Checking CYP's understanding the words used when talking about their behaviour/consequences?' • Providing the rules and expectations in a visual format using pictures and reducing the language used to key words. • Helping CYP to understand and reflect on their behaviour using visual supports such decision trees as Comic Strip Conversations. • Being welcomed into the classroom • Giving CYP responsibilities e.g. giving out books. • Providing an incentive e.g. a positive message home for coming to all classes on time. • Checking CYP's timetable annually and the logistics.
Difficulty constructing sentences to express needs and ideas **At school:** Prince is in year 4 and has limited vocabulary and is very slow to start his work. He is often found sharpening pencils instead of doing his work. Once he gets started, he appears to daydream and rarely completes the task. **At home:** Prince often answers questions with an unrelated or vague response. His parents find this frustrating and are sometimes embarrassed in front of their friends and extended family.	• Teaching vocabulary – multisensory approaches, the class or subject teacher to select the words to be taught • Providing opportunities for pre-teaching and over-learning and send a short list of target vocabulary home before starting a new topic so that the CYP can practise in English and any home language. This should be provided for all CYP but will be particularly important for those with language difficulties. • Adult models language • Using key words and short phrases to comment on play • Introducing language through a variety of means – songs, stories, play. • Vocabulary walks around school • Personal dictionaries • Providing models - repeat back what has been said and add additional information or model the correct grammar. • Providing visual approaches to constructing sentences - Colourful Semantics • Differentiating the amount of written work expected, e.g. simpler questions requiring shorter answers (initially 'what, who where and when' and then moving onto 'why, how and what ifs'). • Scaffolding all pieces of extended writing and give realistic expectations.

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties sequencing and telling/retelling stories and events **At school:** Jayquan is in year 5 and regularly gets into trouble in the playground and can't coherently explain his involvement so he often gets the blame. In lessons, he is reluctant to complete longer pieces of writing. **At home:** Jayquan is often sad when he comes home from school but can't explain to his parents what is bothering him.	• Practicing at storytelling, making storytelling visual and more concrete (use puppets or act out the story). • Teaching story components (e.g. who, where, when, what happened). • Using visual supports such as story planners and narrative frames. • Adult supporting CYP to verbally rehearse what they want to say.
Organisational difficulties **At school:** Shelina is in year 9 and often doesn't have the right books and equipment for her lessons. She forgets where she has put rucksack and rarely has her PE kit. **At home:** Shelina's bedroom is messy and she can never find what she wants. Her mum has to help her get dressed and pack her bag for school each morning.	• Providing CYP with their own set of stationery in each class. • Ensuring that there is an alternative to PE planned for. • Developing task planners. • Providing colour coded timetables. • Developing a check list to use at home to ensure all the correct equipment is being brought to school (to be put on the bedroom door or near the front door). • Providing, a list or reminder on their mobile phone could be appropriate.
Difficulties playing and talking with other children **At school:** Tiffany is in year 3 and is often alone in the playground and seeks adults out. She appears to want to join in with games that her peers are playing but she doesn't know how to. **At home:** Tiffany has never been invited to a birthday party and she often cries about this. Her mother has invited children from her class for play dates but Tiffany doesn't engage with them.	• Directly teaching social skills and provide opportunities for children to practice these through role play or within supported real life interactions. • Using of Social Stories™ to teach social rules/skills. • Setting up buddy systems. • Using peer models.

What we see (Some of these presentations may overlap within and across sections)	What may help
Unclear speech due to speech sound difficulties **At school:** Rowan is in year 2 and finds it hard to get his message across because of his unclear speech. He is beginning to get frustrated especially when the teacher asks his friends to answer for him. **At home:** Rowan's close family understand everything that he says but his grandparents have stopped listening to him because they assume that they won't be able to understand.	• Using games to promote phonological awareness (e.g. syllable clapping) • Responding to what the child says not how they are saying it. • Praising attempts at communicating • Supporting child to use alternative ways to get their message across – showing you, drawing, writing. • Modelling correct pronunciation (do not ask them to correct their speech) • Have they had a recent hearing check?
Stammering **At school:** Patrick is in year 4 and stammers when speaking in class and because he is embarrassed about this he seems to avoid speaking. **At home:** Patrick speaks freely with his immediate family and does not seem to notice his stammer but seems unable or unwilling to speak in front of his extended family.	• Checking language question levels are appropriate. • Using suitably differentiate questions. • Giving pre-warning of questions. • Giving time to respond. • Not finishing words or sentences for the CYP. • Teacher to speaking to child individually to check the times when they find participation in speaking opportunities is harder and problem solve ways to help. Checklist: Register, Reading aloud, Drama activities, Class questions, class discussions.

What we see (Some of these presentations may overlap within and across sections)	What may help
Behavioural eating and drinking difficulties **At school:** Alex is in year 1 and does not have a school dinner. He eats a restricted diet of pureed food and is overwhelmed by the noise in the dining hall. **At home:** Alex will only eat cerelac pureed food. He has been eating this since he was a baby. He is reluctant to try any new foods and will hold it in his mouth or spit out. Alex's parents avoid going out for meals and mealtimes are stressful.	• Reducing distractions in the environment and offering a calm eating environment. • Offering CYP to have lunch 15mins before everyone else. • Following the school lunch routine, e.g. to fetch pack lunch from duty staff and use a school dinner tray. • Working with parents to identify a food with a similar consistency from the school menu that can be slowly introduced. • Providing opportunities for messy play. • To give time. • Encouraging choice making at mealtimes. • Introducing new foods slowly. • Having family mealtimes together. • Encouraging mealtime preparation. Activities, e.g. washing, cooking, shopping, online food shopping. • Keeping mealtime routines consistent. • Introducing one new food at a time and start introducing into their environment by following their lead and letting them initially smell and touch the food with no pressure to taste. • Encouraging passing food at the table. • Modelling good eating behaviours.
Selective mutism **At school:** Melissa is in year 3 and not able to speak to answer questions in class. She speaks quietly to one or two friends if she is in the playground and she is able to whisper to one class teacher. **At home:** Melissa's mum reports that Melissa is the "family chatterbox and talks from morning to night about all sorts of things".	• Avoiding putting pressure on CYP to speak. • Finding other ways of communicating such as gesture, having a written conversation and the use of symbol cards. • Agreeing with the CYP alternative ways of responding to the register. • Reassuring the CYP that you know they cannot rather than won't or don't want to speak.

External Agency Support (See Appendix 1 for referral contact details)

Enfield School-age Speech and Language Service (Reception to end of Secondary) – Complete Speech and Language Service referral form submitted with the application for a statutory needs assessment of special educational needs.

Speech and language clinical lead pathways e.g. developmental language disorder (Reception to end of Secondary) - Discussion with relevant Clinical Lead Speech and Language Therapist prior to submitting Speech and Language Service referral form.

Speech and language health pathways e.g. speech sound problems and stammering (Reception to 18 years) – Complete and submit the Speech and Language Service referral form.

Enfield Communication Advisory Support Service (ECASS) (Primary and Secondary Schools) - All schools can access the universal pathway within the 5 strands. Targeted schools can access universal and targeted offer from strands 1 - 4.

Whole school training "An Introduction to Developmental Language Disorder" is available to all schools without charge from the Clinical Lead Speech and Language Therapist for DLD.

Additional Resources

Primary

Parsons, S. & Branagan, A. (2016). Language for Thinking: A structured approach for young children Second Edition. Routledge

Parsons, S. & Branagan, A. (2021). Word Aware 1: Teaching Vocabulary Across the Day, Across the Curriculum Second Edition. Routledge

Secondary

Branagan, A., Cross, M. & Parsons, S. (2020). Language for Behaviour and Emotions: A Practical Guide to Working with Children and Young People. Routledge

Joffe, V. L., & Hudspith, P. (2011). Narrative Intervention Programme. Routledge

Joffe, V. L., & Hudspith, P. (2011). Vocabulary Enrichment Programme. Routledge

Primary and Secondary

Blank, M. Rose, S. A. & Berlin, L. J. (1978). The language of learning: The preschool years. New York: Grune and Stratton

Dunn Buron, K. & Curtis, M. (2021). The Incredible 5 Point Scale: Assisting Students in Understanding Social Interactions and Managing their Emotional Responses Second Edition – Revised. 5 Point Scale Publishing

Gray, C. (1994). Comic Strip Conversations: Illustrated Interactions that teach conversation skills to students with autism and related disorders. Future Horizons

Kuypers, L. (2011). The Zones of Regulation: A curriculum designed to foster self-regulation and emotional control

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www.blacksheeppress.co.uk
https://michaelpalincentreforstammering.org/
www.radld.org
www.ican.org.uk
https://dldandme.org
www.slcframework.org.uk
www.youtube.com/RADLD
https://www.beh-mht.nhs.uk/services/school-age-speech-and-language-service/537

Autism

Child or Young Person's Voice

Quotes inspired by the Autism Education Trust's 8 Promises, created by the AET's Young Experts Panel

"I know all about the planets as they are my passion but I need lots of help with other areas of learning and other subjects."

"Please be aware of my differences when you are helping me. I don't always like people too close."

"I might not be able to tell you about myself in words but you can ask my family and friends."

"My skills and interests might be very different to yours. Help me to do what I'm good at and tell me when I'm doing well."

"I need to know why I am learning something and how it will help me in my future."

I like simple drawings.

I like pressure from tight hugs.

I notice emergency vehicles and they all sound different.

I sometimes get angry and worry that people don't understand that.

Illustrations by a pupil at Bowes Primary School

"I wish everyone knew about autism and understood me better."

"I need people I can trust to help me feel safe, happy and ready to learn."

"Sometimes I want to work or play with my friends but I don't know how to join in."

Autism

Introduction

It is important that everyone in the school community understands autism through training and learning opportunities for staff and CYP. Autistic people have differences in the way they process information and things around them. The Autism Education Trust (AET) describes these processing differences as affecting three key areas of development:

Social understanding and communication.	Flexibility, information processing, and understanding.	Sensory processing and intergration
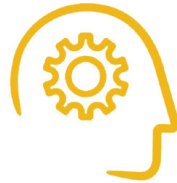
Differences in these areas give rise to strengths and challenges and they will affect each autistic CYP differently. There is no 'typical' autistic person. Schools can learn more about this on the AET's website (www.autismeducationtrust.org). Autism is not an illness, disease or mental health condition. Many autistic people have unique strengths and skills because they see things differently. Gradually, society's perception of autism is changing and we are moving away from terms such as 'disorder' and 'impairment' and to talk about autism more positively. Many autistic people are proud to be called autistic and wish for people to understand, accept and embrace their differences.

When planning to meet the needs of autistic CYP, consider four important themes:

1.   Understanding and listening to each unique CYP.

2.   Building relationships with and around each CYP.

3.   Making reasonable adjustments to the environment.

4.   Providing a curriculum that can be adapted for the learning and development needs of autistic CYP.

Schools can learn about these through the Autism Education Trust training modules which are freely available to all Enfield staff through the Enfield Advisory Service for Autism. It is highly recommended that all school staff access relevant training modules every 2 years as these are updated in line with current research.

Whole School Approaches

The Autism Education Trust Schools Competency Framework (2021) shows these themes and the eight principles of Good Autism Practice for schools to embed.

The AET Eight Gap Principles

This is how the Eight Principles of Good Autism Practice are embedded in the four themes.
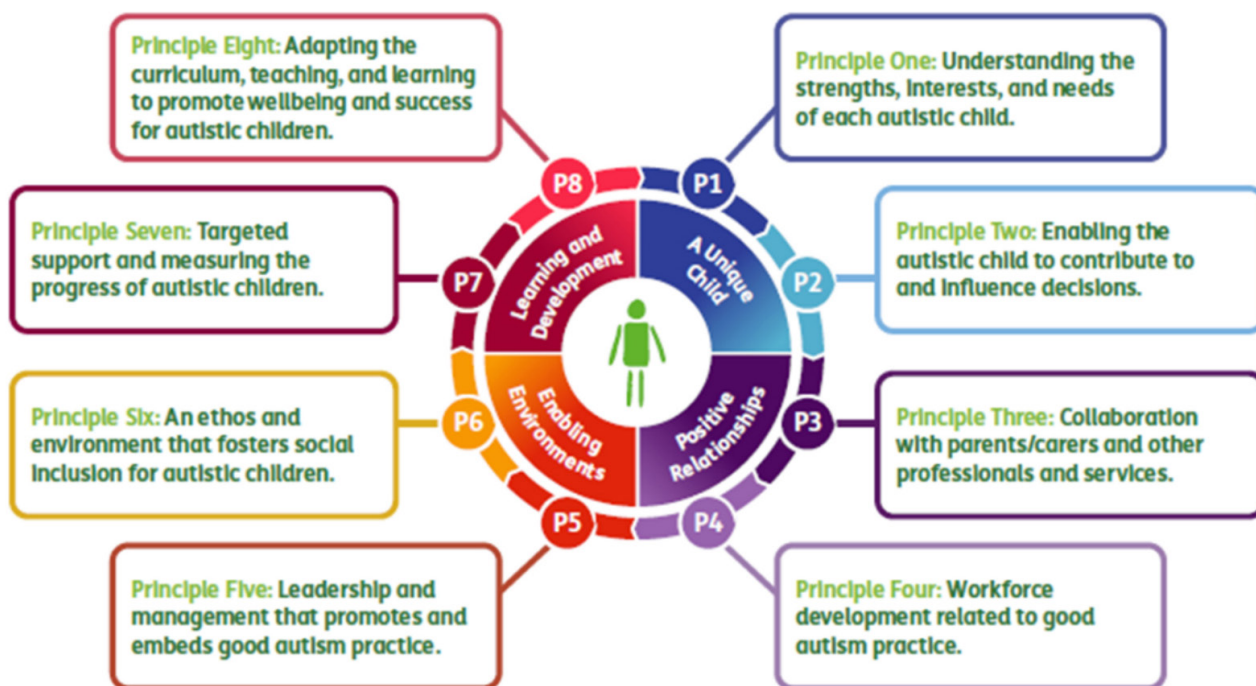
Schools Competency Framework

- Implement good autism practice and strategies so that learning and support needs are addressed as soon as possible to help each individual feel understood and well supported. Do not wait for a CYP to receive a formal diagnosis of autism.

- Listen to the views of the CYP themselves, and their families, about what is working for them and do not to make assumptions about how autism might affect them and their learning.

- Recognise that autistic CYP can be very talented but need the right support and environment to shine.

- Understand that autistic CYP can find school very overwhelming, confusing and stressful; they may find it difficult to understand social and behaviour expectations and feel they do not 'fit in'.

- Help autistic CYP understand what is expected of them and help them to feel included rather than punishing them for not conforming. Small adjustments to approaches and expectations can make a big difference to an autistic CYP's chances of fitting in and succeeding, e.g. allowing small variations to clothing, or letting a CYP eat lunch in a quieter place.

- Consider what can be done to alleviate stresses and challenges for autistic CYP who find school so challenging that they may refuse to attend. Seek advice on ways to re-integrate and include these CYP at the earliest opportunity.

What we see (Some of these presentations may overlap within and across sections)	What may help
Differences in emotional wellbeing needs **See also Social, Emotional and Mental Health** • Heightened levels of stress and anxiety which may be communicated through behaviours such as causing harm to self or others, damage to property, avoidance or withdrawal. • Difficulties understanding emotions of themselves and others and findings ways to express how they are feeling. • Needing time alone and/or to engage in repetitive movements or vocalisations (stimming) or perform rituals for self-regulation. • Masking autistic differences (pretending to be like peers to avoid looking different or standing out). Tends to be more common in girls. This can be very tiring and stressful. **At school and at home:** Charlotte is in Year 9. She finds it tiring to engage with her peers all day and likes to have time to herself in the library. Without this, she struggles to concentrate in lessons. At home she has a large light-up bubble tube which she puts on to feel relaxed. Her school is a busy environment which doesn't have any sensory equipment but she likes to keep a small light-up keyring in her pocket which reminds her of her bubble tube at home and she can focus on it when she feels overwhelmed.	• Understanding the individual triggers that lead to the CYP feeling heightened anxiety in different situations. • Reducing uncertainty by maintaining use of structure and predictable routines. • Monitoring energy levels and direct to calming activities when needed. • Supporting communication of feelings (e.g. using Zones of Regulation, using mentors). • Having quiet spaces at break and lunchtimes. • Allowing use of individual work spaces/ workstations. • Allowing time and space for self-regulation and accepting CYP's choices of ways that help them to calm. • Communicating with parents/carers regularly. Sharing information about things that might be bothering the CYP and things that might help calm him/her. • Teaching all CYP about autism and encouraging a supportive attitude and acceptance of differences.

What we see (Some of these presentations may overlap within and across sections)	What may help
Differences in physical wellbeing needs **See also Physical Disability and Medical Needs** • Increased incidences of fatigue, tiredness muscle aches, palpitations and other physical symptoms because of prolonged hyper-vigilance/sensitivity and anxiety. • Recurring digestive problems such as constipation, diarrhoea, tummy ache and regurgitation, sometimes as a result of dietary or behavioural differences. • Tightened Achilles tendons because of walking on tip-toes regularly. • Risk of serious injuries or illnesses going untreated because of limited awareness or understanding of pain, or not realising the need to tell someone what they are feeling • Callouses on hands or arms (or other body parts) caused by repeated injury from self-harm, sensory or other behaviours. **At school and at home** Robert is in year 3 and has limited spoken language and learning difficulties. He often presents with an upset stomach. Last year his teacher and learning support assistant were worried about other children and staff catching a tummy bug when he had diarrhoea and followed the school policy of sending him home for 48hrs each time, but this meant he began to miss lots of school. Mum said he didn't appear unwell and took him to the doctors for tests, which showed there were no infections. Mum and school staff are now monitoring when these symptoms occur to see if they can spot any patterns relating to foods, anxieties or other triggers.	• Being vigilant for any changes in behaviour or demeanour which may indicate illness or pain. Remembering that the CYP may not be experiencing pain in typical ways and may not know to tell you something feels different. • Talking with the CYP about what you have noticed. Helping them learn related vocabulary/signs and symbols as appropriate and teaching them to ask for help if they need to. • Keeping regular communication with parents/carers about signs and symptoms you see that may indicate something is wrong. It may be helpful to keep a shared diary which can be shown to medical professionals. • Seeking advice from other professionals such as the school nurse, the community OT team or asking parents/carers to consider a GP visit. • Seeking advice on therapies or equipment that might help improve symptoms or reduce injuries or medical conditions that are caused by sensory avoiding or sensory seeking behaviours. If you are not sure where to go for advice, contact the Enfield Advisory Service for Autism (EASA).

What we see	What may help
(Some of these presentations may overlap within and across sections)	

Differences in social understanding and interaction	• Reducing verbal language and stressing key words and being prepared to wait for a response.
• May use non-verbal behaviours such as eye gaze and body posture differently to other CYP and may not understand the body language of peers.	• Knowing what level of social interaction the CYP is comfortable with in different situations and giving them space when necessary.
• Difficulties developing and maintaining peer relationships.	• Providing a social skills programme (e.g. PEERS).
• Difficulties understanding how their actions and responses may impact on others.	• Modelling and practising language associated with games (e.g. using playscripts)
• Solitary or parallel play with their own toys or objects may be preferable (less stressful) to interactive play with shared resources.	• Teaching social 'rules' and behaviours that are appropriate to different social situations.
• May enjoy interacting with things such as electronic gadgets, machinery, toys or classroom resources more than with other people.	• Accepting that some CYP may never have innate understanding of social conventions and that they may need lots of opportunities to practise skills.
At school and at home:	• Explaining why social etiquette is important to other people e.g. using Social Stories™ or comic strip conversations.
Zola is in Year 4 at a mainstream primary school. Academically she is very able and articulate. At school she has 1 or 2 people she calls friends but gets on okay with most people in her class. She is consistently described as fine and doing well by school with perfect behaviour. At home she complains that school is boring and too easy. She becomes dysregulated very easily, will scream and be physical with her parents. She needs a lot of downtime to do what she wants; being creative, watching tv or spending time with her best friend. The demands of school are increasingly resulting in her not being able to get to school. Her brother is also autistic and often their needs are the opposite!	• Encouraging interaction through shared interests and accepting individual choice in terms of levels of interaction.
	• Not insisting on eye-contact as the CYP may need to focus on their listening and not be able to look at the same time.

What we see (Some of these presentations may overlap within and across sections)	What may help
Differences in social communication • Differences in the way they learn and use language (verbal and body language). • A mismatch between expressive and receptive language skills. • May be able to talk articulately and use a wide vocabulary but may lack understanding of the words or the consequences of what they are saying. • Difficulties in achieving two-way communication with others. • Problems starting/sustaining conversations • Repetitive and/or echolalic language. • It may be harder for them to communicate when they are stressed or anxious; they may not have the language to describe how they are feeling. **At school and at home:** Min is 4 years old and at nursery in a school with an additionally resourced provision. His expressive language is delayed but he is able to use echolalic phrases in context to make his needs and wants known to people who know him well. He shows affection to people he knows well and enjoys playing 'people games' which make him laugh. He has good problem solving skills and will use objects in different ways to create what he needs e.g. standing on different things to help him reach something.	• Valuing and responding to a range of communication attempts by the CYP. • Being a responsive partner and learning to interpret their body language – looking for signs of how they are feeling and helping them to communicate their feelings and/or ask for help if needed. • Teaching the CYP to use a range of effective methods appropriate to different social situations (though they may have one preferred communication system). • Experimenting with different ways of communicating, e.g. the CYP may prefer typing to handwriting or speaking; it may help to use technology more often. • Encouraging the use of a range of communication tools such as objects of reference (physical objects), symbols, signs, words. • Reducing expectations of communication when the CYP is stressed or anxious.

What we see (Some of these presentations may overlap within and across sections)	What may help
Differences in interests, engagement with activities and processing information • Intense focus on particular topics. • Challenges in shifting attention. • Reliance on familiar routines and rituals • Preoccupation with specific parts of an object or picture rather than the whole. • Difficulties with executive functioning and problem solving (thinking flexibly, choosing appropriate solutions and organising what to do in different circumstances). • Taking longer to process information and respond to questions and instructions. **At school and at home:** Tahir is in Year 9 in a mainstream secondary and is very interested in Sonic the Hedgehog. When there was a problem with him destroying a chair by picking off the foam filling, the teacher put Sonic's picture on a notice asking Tahir to leave the chair's filling in place. Tahir commented that he knew it wasn't really Sonic giving him the advice but he said that it made him want to comply when he saw his favourite character.	• Using special interests to motivate and engage in school activities. • Respecting and celebrating special interests in the class and at whole school level e.g. through assemblies and corridor displays. • Planning time when the CYP can access their special interest throughout the day/week (not just as a reward). • Teaching the CYP to use schedules/lists or other visual aids to help structure their day and know what to expect. • Teaching connections between things to help the CYP understand context and other relevant information. • Providing opportunities to practise problem solving in a range of scenarios. • Allowing 10 seconds for CYP to process what has been asked of them.

What we see (Some of these presentations may overlap within and across sections)	What may help
 Differences in sensory processing and integration: • May be overly sensitive to particular environmental stimuli (e.g., lights, colours, sounds, patterns, smells, textures, temperatures). This may be very distracting or may cause distress. • May be under-sensitive to certain sensations and not notice things other CYP might find uncomfortable or painful. • May seek certain sensations, such as spinning around, licking or mouthing non-food items, experimenting with lights and reflective surfaces. **At school and at home:** Benji is a 3 year old boy who likes strong smells. When he started to take his own poo and wipe it around the walls his parents realised that the strong smell was making him feel better when he was anxious in the toilet. Mum came up with the brilliant solution of giving him some cumin powder on the back of his hand each time he went to the toilet. Benji enjoyed the smell of the cumin and stopped smearing his poo.	• Conducting sensory audits of the environment for each CYP and identifying things you may be able to modify or support with. • Teaching ways to use and request supportive sensory equipment (e.g. ear defenders, chewy tube). • Increasing tolerance gradually (e.g. though backward chaining, where a child does the last step in a process, then the last two steps and so on as they become more familiar with the task; or planned exposure). • Making alternative arrangements for situations which might lead to sensory overload, e.g. eating lunch in a separate, quite space; listening to assembly from a distance or with a fidget toy. • Making reasonable adjustments to the uniform policy such as allowing different shoes or materials that the CYP is able to wear comfortably. • Supporting the child to replace harmful sensory behaviours with safer alternatives that meet the sensory need (see case study).

External Agency Support (See Appendix 1 for referral contact details)

Diagnosis

For children under 6 years old, neurodevelopmental assessments for autism are carried out by the Child Development Team. As part of this process your child will be assessed by a paediatrician, and may be seen either virtually or in person by other professionals such as speech and language therapists and clinical psychologists.

Referrals must be sent to the General Development Service, St Michael's Site, Gater Drive, Enfield, EN2 0JB.

The most common referrers are:

- The child's GP

- The child's health visitor

- The child's speech and language therapist

- The Special Educational Needs Coordinator (SENCo) at the child's school or nursery

For CYP over 6 years old, an autism diagnosis referral should be made to CAMHS via their referral form. The CYP will be assessed by a professional who is qualified in diagnosing autism, and usually includes a psychiatrist and a clinical psychologist or educational psychologist. They will use information about the CYP, gathered from a range of sources including the CYP themselves, parents/carers, school staff and others who know the CYP well.
See Making a referral to CAMHS (www.behcamhs.nhs.uk).

Pre-diagnosis and CYP without a diagnosis

The strategies listed above can be implemented at any time and can be useful for all CYP. Do not wait for a formal diagnosis before seeking advice and/or providing appropriate support. For helpful advice before referring or while waiting for a diagnosis, you can contact EASA (admin@enfieldasa.org.uk) , or visit the National Autistic Society website: Diagnosis (autism.org.uk)

Advice and Support

The Enfield Advisory Service for Autism (EASA) www.enfieldasa.org.uk comprises a multidisciplinary team which provides training, advice and support to Enfield educational settings and families. They work in close partnership with other Enfield services such as Enfield SEN, Educational Psychology Service (EPS), the Speech and Language Service, the Occupational Therapy Service, and the Early Intervention Support Service (EISS). They also work with the Enfield branch of the National Autistic Society, other voluntary sector organisations, and are a strategic partner of the Autism Education Trust.

Additional Resources

The Autism Education Trust has a website with a wealth of supportive documents and advice on Good Autism Practice www.autismeducationtrust.org.uk. Their work is informed by international research and a panel of young autistic experts.

The National Autistic Society website is also very useful, with resources, case studies and explanations of different types of support: https://www.autism.org.uk

Social, Emotional and Mental Health

Child or Young Person's voice

"When you did not a have a 'good day' what helped you to feel better?"

'Speaking to a teacher.'

'Call my friend as he calms me down.'

'…that I get to spend time with one of my 5 trusted adults.'

'Go to the adults who will listen to me and sometimes I will have a fidget toy to help me - a squishy toy is best.'

'My teachers and friends remind me not to give up, so I keep trying.'

'Go to my corner, colour or read or sometimes do my work there.'

'Going for a walk or finishing somewhere to sit – sometimes outside.'
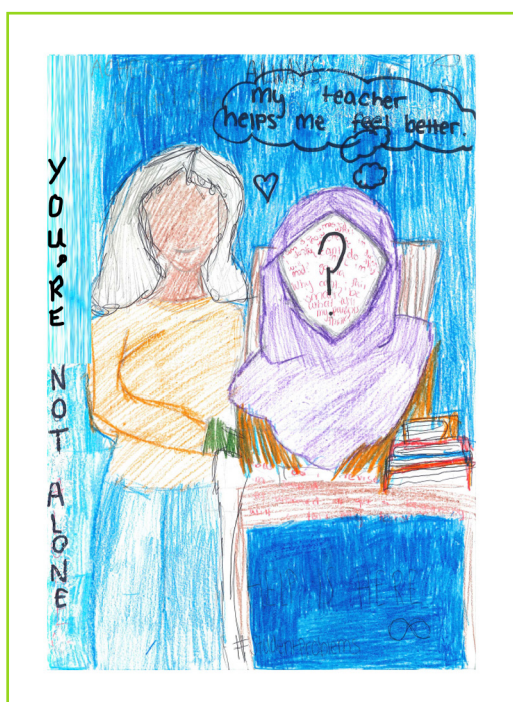
Illustration by a pupil at Enfield County School

Introduction

It is important that everyone in the school community has a trauma informed understanding and approach to supporting CYP's social emotional and mental health (SEMH) development and behaviours of concern. Schools will recognise, and respond to, the need for pastoral support for pupils with SEND, taking into consideration individual needs and other relevant contextual circumstances.

Whole School Approaches

When planning to meet the needs of social, emotional or mental health needs of CYP, schools are invited to consider the following:

- Assigning a **Senior Mental Health Lead** who can work with the school community to develop and implement a whole school approach to mental health and wellbeing with support from the Senior Leadership Team. This is aligned with Promoting Children and Young People's Mental Health and Wellbeing (Public Health): A Whole School and College Approach and integrates a trauma informed and relationship-based approaches[7].

- A trauma responsive mental health lead supports schools to be curious and make meaning of children's presenting behaviour or distress. A trauma responsive approach avoids pathologizing and labelling children and young people's behaviour and asking instead what has happened to you rather than what is wrong with you.

- Strengthening a **trauma informed response** to emotional, mental health and behaviour by accessing Enfield's Trauma Informed Practice in Schools and Settings (E-TIPSS) programme. E-TIPSS embraces the Attachment Regulation Competency (ARC) framework (Blaustein & Kinniburgh, 2019). This approach is grounded in the understanding that challenging behaviour, emotional distress and impairment are responses to early trauma[8]. The CYP's brain is wired to be in survival mode with behavioural responses of 'Flight, Flight, Freeze or Fawn' when they experience fear or perceive threat or danger.

- ARC provides a staged and clear model for schools to intervene and address CYP's need for; a sense of relational and physical safety, skills to regulate their emotional/physical experience and then to address gaps in competencies needed for healthy development.

- ARC is organised around three primary domains of intervention and identifies 8 key intervention areas (illustrated below).

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5   Senior Mental Health Leads can access DfE training and local support from the Enfield Senior Mental Health Lead Network
6   Short Film on impact of childhood trauma (UK Trauma Council)

ARC Framework
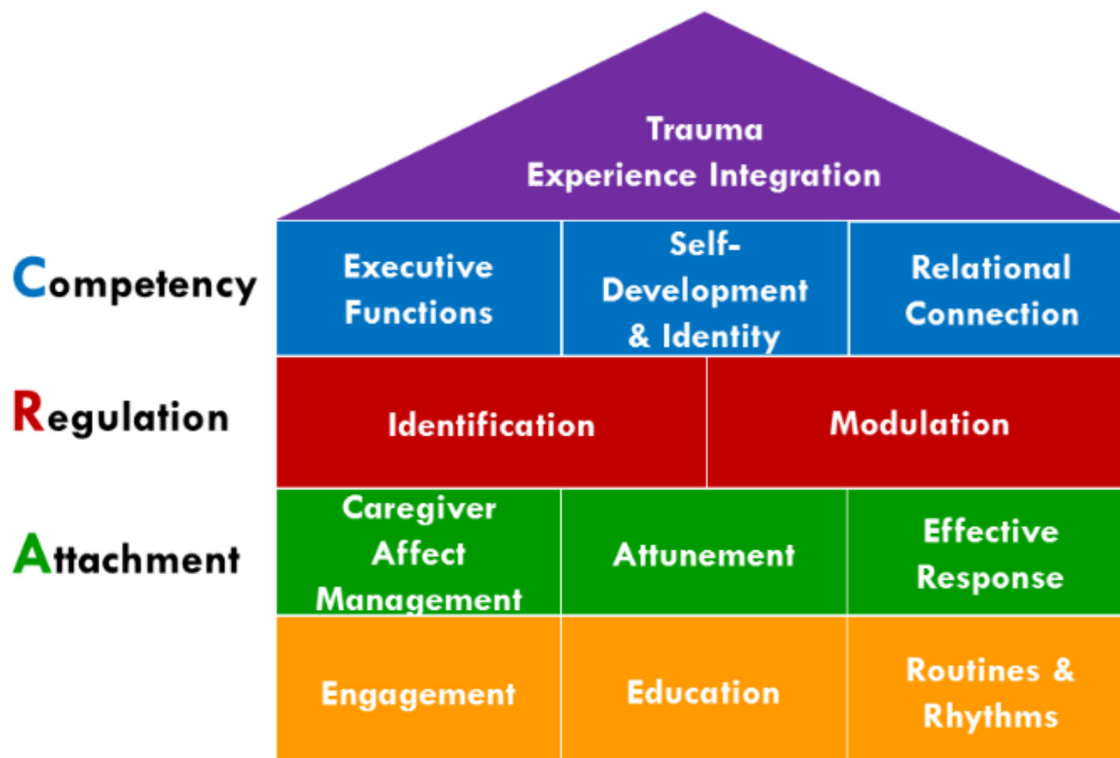
Graphic by Jeremy Karpen, 2017; Adapted from: **ARC**, Blaustein & Kinniburgh, 2010; Kinniburgh & Blaustein, 2005

- In a whole school setting, this integrative framework would encourage ordinarily available provision that incorporates the following:

  - **Structures, routines and rhythms as children** do better when they have a clear understanding of rules and when there is a degree of predictability in adults and environmental responses.

  - Identified staff (caregivers) in the school who can provide **safe relationship-based care for CYP**.

- This would require staff with a capacity to observe and make sense of the emotional messages or needs underlying CYP's behaviours and respond appropriately and in doing so provide **'attuned' support** ensuring CYP also regularly experience fun interactions.

  For adults to provide this role, they will need to:

  - Be aware of their own cultural and racial lens.

  - Be aware of their own push buttons or triggers.

  - Consider their own resources to manage their own distress or stress.

  - Be able to make meaning of CYP's emotional states and behaviours.

  - Understand the physiological difficulties of CYP and that they may not be able to modulate their behaviour when in a dysregulated state.

  Staff often will **need reflective supervision and/or support** so that they can develop self-monitoring skills and resources, which is especially needed with working with CYP who are presenting with emotional distress and challenging behaviour.

Recognition of the traumatic experience that many parents/carers have had as a consequence of previous school placement that may be inappropriate or has difficulties in meeting their child's needs (this can include being bullied, socially isolated and in some circumstances physically restrained). This may impact on how they may relate to staff in new schools.

○ Education and support for CYP to identify and manage their **emotional regulation (or modulation),** e.g. developing a vocabulary of emotions and physical states, education about the human alarm response and trauma triggers, learning to **maintain manageable levels of arousal** and to expand their comfort zone, normalising the experience of mixed emotions.

A system of **whole school supportive interventions for frequently dysregulate**d CYP, e.g. a hall pass, a safe place for regulation and restoration, developing a Positive Behaviour Support Plan (PBS), a trauma informed approach to positive handling, e.g. Creating Optimally Safe and Inclusive Environments (COSIE) – delivered by SWERRL.

○ Education and support for CYP to develop the **skills to build, maintain and repair connections with others** as part of conflict resolution process, e.g. circle of friends, restorative practice.

CYP supported to **develop executive functioning skills**, including the ability to evaluate situations, inhibit responses and make thoughtful decisions/choices.

CYP to **develop a positive sense of self** through exploration and celebration of positive attributes, likes, values, opinions, family norms and culture. Language and communication used across the school to be consistently delivered in **positive, kind and curious way** towards all CYP to supports engagement and self-worth.

These components would be integrated into a **trauma responsive behaviour policy** that seeks to understand and make sense of behaviours of concern, ensure there is an **effective response** approach and ensure that exclusions of CYP with SEND is avoided for any reason related to their disability.

Enfield promotes the THRIVE Framework (Wolpert et al, 2019) so that children with SEMH needs and their families receive the right support in the right place at the right time. The local offer is organised to the Thrive needs based categories: Getting Advice, Getting Help, Getting More Help and Risk Support. This includes promoting accessible digital advice and support.

In addition to the SEND Code of Practice, SEMH needs are also considered through Keeping Children Safe in Education: Statutory Guidance for Schools and colleges (2022) and Mental Health and Behaviour in Schools Guidance.

What we see

(Some of these presentations may overlap within and across sections)

Withdrawn symptoms
- Taken into care at the age of 4 years old due to neglect (basic needs not being met, often not provided with breakfast and other mealtimes).

- May have unidentified learning difficulties.

- Tires easily.

- May find it difficult to form connections with adults as they have not been reliable source of support in the past.

- May have changed schools and finding it difficult to settle and is not motivated to make friends.

At school:
Lara is in year 1 and has difficulties in participating in most school activities and presents as withdrawn. She stays away from her peers and appears unhappy.

At home:
Lara is having difficulties in seeking comfort or support from her foster carer and is engaged in isolated play. Her eating habits have changed recently.

What may help

(Organised under ARC categories)

Attunement - Making sense
- Observing and assessing interactions with peers in class and in the playground.

- Carrying out an initial learning assessment providing a profile of strengths and needs.

- Using assessment tools (e.g. Boxall Profile) or other frameworks for thinking

- to make sense of the CYP presentation and plan next steps[7]

- Checking whether there are any factors from CYP's early experiences or current care arrangements?

Routines & Rhythms
- Providing a regular morning routine so CYP know what to expect on arrival, e.g. include a repetitive simple task.

- Offering a regular safe space for breaktimes and lunchtimes with activities such as craft, Lego® or play dough.

Attachment - Addressing the need for relational safety:
- Identifying a key person in school who can provide regular check-in and become a safe point of contact and provide reassurance.

- Adults to join CYP with tasks.

- If touch is tolerated, provide hand massages or make physical contact on passing, e.g. butterfly shoulder tap.

- Adults communicating using a calm and kind approach, avoiding frustration.

Regulation
- Providing up-regulation activities that get CYP moving, e.g. playing heads shoulders, knees and toes, dancing to music that gets gradually faster, jumping, drumming etc.

- Providing grounding techniques, e.g. deep breathing, providing something to tangible to carry or manipulate, different scents to smell, notice what they see, hear or feel.

Thrive Framework
- Getting Help: Virtual School for LAC/ School Nurse

- Getting More Help: EP

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7   5 Ps Approach & Solution Circles & Interactive Factors Framework

Social, Emotional and Mental Health

What we see	What may help
(Some of these presentations may overlap within and across sections)	(Organised under ARC categories)

Distress and anxiety
See also Autism

- Heightened levels of stress and anxiety which is causing avoidance and withdrawal.

- Difficulties in developing and maintaining peer relationships due to differences in social understanding and interaction.

- Finds the playground noisy and busy and is overly sensitive to environment and causes distress due to differences in sensory processing.

- Learning appears in line with peer group.

At school:
Mohammad is in Year 4 and often looks sad and unhappy and worried, refusing to go out at breaktimes and there are patterns of nonattendance. He struggles to be with peers all day and when it gets too much he will run out of class to find somewhere quieter.

At home:
Mohammad is often crying, displaying periods of sadness and it is difficult for his parents to comfort him. He struggles to say what is wrong.

Attunement - Making sense
- Conducting sensory audits of the environment for CYP and identify modifications or support.

- Observing and assessing interactions with peers in class and in the playground.

- Communicating with parents/carers regularly. Sharing information about things that might be bothering the CYP and things that might help calm him/her.

Routines & Rhythms
- Providing a visual timetable for the day to provide predictability.

- Developing fun class rituals throughout the day, e.g. morning routine or celebrations.

- Considering arrangements for breaktime and lunchtime periods.

Attachment - Addressing the need for relational safety
- Identifying a key adult who is attuned to CYP's needs and prompt to a quiet and calm space when needed.

- Accompanying CYP when they are dysregulated, e.g. a key adult being present, attuning to the CYP and modelling coping/calming strategies.

Regulation
- Agreeing a symbol or a code word so CYP can leave the class to an agreed quite space.

- Teaching ways to request supportive sensory equipment, e.g. ear defenders.

- Developing quieter spaces (inside and outside) where CYP can go during breaks and lunchtimes and during lessons.

- Supporting communication of feelings (e.g. Zone of Regulation).

- Teaching practical ways to practice coping and calming skills, e.g. deep breathing, muscle relaxation (squeezing and releasing a ball), distraction (drawing, listening to music, puzzles).

- Developing a risk assessment where appropriate.

Competency:
- Using visual ways to help CYP to identify and evaluate times, places or situations that can worry them.

Thrive Framework:
- Getting Help: EASA

What we see

(Some of these presentations may overlap within and across sections)

Physical symptoms

- Heightened levels of stress and anxiety, which manifests as stomach aches and disturbed sleep.

- Finds it difficult to manage change, new environments and meeting new people.

- Anxiety is experienced by one parent who finds it difficult to contain the anxiety of others.

- There are questions about learning and difficulties with organisation and planning work. Homework is often late or not handed in. School work is generally completed in lesson.

- Gravitates towards peers with anxious presentation.

At school:

Thea is in year 9 displaying physical symptoms that are medically unexplained e.g. soiling, stomach pains. She last experienced these in year 6.

At home:

Thea is often complaining of aches and pains which her parents cannot understand or find an explanation despite seeking medical advice. She is struggling to sleep at night.

What may help

(Organised under ARC categories)

Attunement - Making sense

- Arranging an assessment of learning

- Consultation with CYP and parents/carers to share experiences and plan and consider CYP experience across the home and setting and plan together how to help

Routines & Rhythms

- Involving the CYP in planning for future changes, transitions and phase transfers so that CYP is informed of any new routines or expectations.

- Providing opportunities to visit new classes or schools and ask questions.

Attachment - Addressing the need for relational safety

- Allocating a key person/mentor to provide 'attuned' support. Being mindful of the shame and vulnerability associated with the presenting symptoms/behaviour.

Regulation

- Teaching CYP about the body's alarm system and survival responses.

- Helping CYP to identify triggers at school/home how this influences symptoms.

- Teaching CYP how to read other body clues, e.g. rate of breathing, heart rate, muscle tone, body temperature etc.

- Teaching regulation techniques that are external to the body, e.g. writing or drawing, noticing what they see, hear and feel.

Competency

- Provide CYP with choices, even if they are small, so they start to gain agency over their lives.

- Involving CYP in evaluating situations and setting goals (e.g. 'What's the problem? And what do we want to happen?)

- Teaching executive functioning skills, e.g. self-monitoring, self-control, organisation etc.

What we see	What may help
(Some of these presentations may overlap within and across sections)	**(Organised under ARC categories)**

Attention and engagement
Also see Speech, Language and Communication Needs & Cognition and Learning

- Possible family or housing issues.

- Frequently externalizes emotions and they are connected to outside events.

- Uncertainty about how adults and children view them.

- Finds it difficult to self-manage and self-sooth.

- May have language processing difficulties.

At school:
Brandon is in year 9 displaying low level disruptive behaviours and frequently seeking attention. He has difficulties in maintaining attention. He is frequently calling out and fidgeting with objects which is interrupting his learning. He struggles to follow and accept adult support and direction.

At home:
Brandon has difficulties in maintaining focus and attention in home activities such as eating at the table, joining in with family activities. He struggles to interact with family members and follow daily instructions from his parents.

Attunement - Making sense:
- Using frameworks for thinking to support discussions, make sense of the CYP presentation. The outcome will inform the next steps and identify additional advice or help required.
- Checking learning Routines & Rhythms:
- Providing clear structures and routines.
- Carefully setting classroom rules with agreed adaptations for CYP who may have difficulties with executive functioning.
- Considering the CYP's seating positioning in class.

Attachment - Addressing the need for relational safety
- Teachers to reassure CYP that they are held in mind without singling CYP out in the class. Provide regular check in subtly during the lesson.
- Building relationship with the CYP gradually and over time so trust can develop and demonstrates genuine care and interest. Create enjoyable and fun interactions.
- All adults to ensure they regulate and manage their own emotional triggers and responses when teaching.

Regulation
- Providing fiddle objects to support downward regulation and calming.
- Providing Brain Gym activities during whole class lessons to expend energy in an inclusive way.
- Allowing movement breaks or frequent small concentration periods.
- Being aware of times of the day that may be more difficult to focus or engage and regulate behaviour.

Competency
- Providing a small group intervention programme that focuses on the development of executive functioning skills, e.g. attention, self-monitoring and organisation etc. Planning together the use of helpful strategies that can be used in lessons.
- Supporting CYP to develop a positive sense of self, e.g. exploration of what their unique selves (likes, hobbies, opinions and positive attributes), positive attributes (strengths and skills), view of themselves across contexts and time (self past present and future).
- skills & speech and language skills

Thrive Framework:
- Getting Help: Early Help Youth Enfield Positive Activities Portal
- Getting Risk Support: MASH

What we see

(Some of these presentations may overlap within and across sections)

What may help

(Organised under ARC categories)

Physical and verbal conflict

May have an unsettled home life, e.g.

- a parent with mental health needs who has themselves experienced early childhood trauma,

- parents in the process of separating,

- older sibling in prison,

- witnessing frequent occurrence of shouting and verbal abuse.

At school:

Sade is in year 3 and often hits out at her peers and/or adults. She uses inappropriate verbal language towards others. Parents of other children are raising concerns. At risk of exclusion.

At home:

Sade hurts her siblings and is involved in physical conflicts. She uses language which is inappropriate

Attunement – making sense

- Communicating with home/family, e.g. what is going on at home, other agencies involvement? Feedback is used to collaborate and plan with parent /carer, to ensure consistency between the home and setting.

- Using frameworks for thinking to support discussions, make sense of the CYP presentation. The outcome will inform the next steps.

- Draft a risk assessment to keep CYP and everyone safe.

Routines & Rhythms

- Provide clear morning routine with an adult greeting to support transition between home and school. If needed have a short

- Having clear plans in place when CYP are dysregulated in school and how support is provided.

- Providing an agreed safe space in school.

Attachment - Addressing the need for relational safety:

- Allocating a key person/mentor to provide 'attuned' support.

- Engaging with the CYP that demonstrates genuine and consistent care in their interests, wishes, worries or needs.

Regulation

- Adult(s) accompanying CYP when they are dysregulated, making sense of the situation for them and supporting return to calm. Using reduced language to describe possible situation with matched the energy level.

- Using healthy regulation skills when with CYP, e.g. use a calm even tone, (supportive validating language), deep breaths etc.

- Accept that the CYP may not understand or recall what happened during any incident.

- Model own use of healthy regulation skills, e.g. use a calm even tone, (supportive validating language), deep breaths.

- Teaching CYP about the body's alarm system and survival strategies. Teach CYP how to recognise body clues, e.g. rate of breathing, heart rate, muscle tone, body temperature etc.

- Helping CYP to identify times or situations that causes them worry, stress or upset using visual methods if needed.

- Providing communication system for describing emotions e.g. emojis, scaling, faces, cards, colours etc

What we see	What may help
(Some of these presentations may overlap within and across sections)	**(Organised under ARC categories)**
	• Teaching practical ways to practice coping and calming skills, e.g. deep breathing, muscle relaxation (squeezing and releasing a ball), distraction activities such as drawing, listening to music, doing puzzles.
	[timing of Getting Help interventions to be considered in context of Risk Support].
	Competency • Supporting the CYP to repair connections with others and problem solve as part of conflict resolution process, e.g. Restorative Practice. • Provide limited choices so CYP start to develop a sense of agency within a specified scope of options. • Having conversations about CYP hobbies, interest and views to support development positive sense of self.
	Thrive Framework • Getting Advice: COSIE training • Getting Help: Early Help • Getting Risk Support: MASH / SWERRL

What we see	What may help
(Some of these presentations may overlap within and across sections)	**(Organised under ARC categories)**

What we see	What may help
(Some of these presentations may overlap within and across sections)	**(Organised under ARC categories)**

Attachment relationships

- Parents not available.

- May have aversion to being touched and accepting physical affection.

- Tends to want to control situations.

- Can be clingy to some adults but rejects others.

At school:
Jacob is in year 1 struggling to form attachments with adults in school and becomes upset when separating from those he is familiar with. He has difficulties in making friends in school.

At home:
Jacob struggles to approach and respond to interactions and initiations from his grandparents who care for him. He avoids interaction, becomes ambivalent or confused and it is difficult to comfort him when he is distressed.

Attunement - Making sense
- Liaising with carers to develop a shared understanding of CYP's experiences and difficulties with trusting those in caregiving roles.

Routines & Rhythms
- Supportive, structured school curriculum

- Planning transitions when the child/young person starts school or during changes. This includes changes of teacher, key adults, year groups.

Attachment - Addressing the need for relational safety:
- Allocating a key person who engages with the CYP that demonstrates genuine care in their interests, wishes, worries or needs.

- Doing tasks with CYP / Providing regular times to have joint engagement in activities.

- Providing reassurance to CYP that they are safe.

Regulation
- Providing up-regulation activities that get CYP moving, e.g. jumping, drumming etc.

- Teach breathing skills to support downward regulation. For younger children this can be through blow real and imaginary bubbles, blowing candles out, smelling scents.

Competency
- Provide limited choices so CYP develop sense of agency.

- Small group/nurture group activities to support Personal Social and Emotional development.

- A range of differentiated opportunities for social and emotional development e.g. buddy systems, friendship strategies, circle time.

Thrive Framework
- Getting Help: Virtual School for LAC/Previously LAC, Early Help

- Getting More Help: EPS

Social, Emotional and Mental Health

What we see	What may help
(Some of these presentations may overlap within and across sections)	(Organised under ARC categories)

Quiet, overlooked presentations
- May be experiencing friendship issues or bullying in school or wider community.
- There may be strained or difficult experiences with family members at home.
- May have anxiety/depression.
- May have an eating disorder or be self harming.

At school:
Ava is in year 8. She is quiet in her classes and does not volunteer responses but will answer if pressed. She does not bring lunch or eat in the lunch hall. The office staff have noticed that she is often walking past their office to go to the toilet during the day, breaktimes and lunchtimes. One of her friends has told a member of staff that they are worried about her.

At home:
Ava is spending long periods of time alone in her bedroom. There is limited engagement and communication with family members/wider community/ network.

Attunement – making sense
- Decide who will initially meet with the CYP will be important. Ideally a member of staff who already has a relationship/connection.

- Being mindful of the shame and vulnerability associated with the presenting symptoms/behaviour.

- Using frameworks for thinking to support discussions, make sense of the CYP presentation. The outcome will inform the next steps.

- Close liaison between home/school. Inform the CYP that you will need to contact their parents/carers or another service if you are concerned about their safety.

- Contact specialist service for advice and guidance if there are concerns about any risk to the CYP's safety. See below.

Thrive Framework:
- Getting Advice & Getting Help: Digital information & support– see below

- Getting More Help:

  o HLP CYP with Eating Disorders: Guidelines for Education professionals

- Getting risk support:

  o 24-hour Crisis Telephone Service: 0800 151 0023
  o If you are worried a CYP's immediate safety Call 999 for emergency services
  o Enfield Multi-Agency Safeguarding Hub

External Agency Support (See Appendix 1 for referral contact details)

- Enfield Educational Psychology Service

- SWERRL (Strengthening Wellbeing, Emotional health, Relationships and Readiness for Learning)

- Secondary Behaviour Support Service

- EYSI

- Early Help

- Local Offer – SEMH section

- My Young Mind Enfield (Enfield Mental Health Support Team in schools) – offer available for specific schools.

- Enfield CAMHS

Additional Resources

Anna Freud National Centre for Children and Families

https://www.annafreud.org/

Beat – National Information and Helpline encourages and empowers young people presenting with eating disorders to get help quickly

https://www.beateatingdisorders.org.uk/

Childline is the UK's free, confidential helpline for children and young people

https://www.childline.org.uk/get-support/1-2-1-counsellor-chat/

5 Ways for Wellbeing Film Developed by Enfield Children and Young People

5 Ways for Wellbeing film

Good Thinking – London's digital wellbeing service and provides a range of resources for young people to help improve mental wellbeing including NHS approved apps.

https://www.good-thinking.uk/

Healthy London Partnership Eating Disorder Guidelines for Education Professionals

https://www.healthylondon.org/wp-content/uploads/2021/10/Eating-Disorder-Guidelines-for-Education-Professionals-2021.pdf

Kooth – Free safe and anonymous online mental health wellbeing community app

https://www.kooth.com/

MindEd – Free educational resource on CYP mental health

https://www.minded.org.uk/

Papyrus – UK charity for the prevention of young suicide

https://www.papyrus-uk.org/

The Mix – UK support service for young people

https://www.themix.org.uk/

Young Minds – UK Mental health charity for children, young people and their parent

https://www.youngminds.org.uk/

Physical Disability and Medical Needs

Child or Young Person's Voice

'My friends help me to play and my teachers help me in class.'

'I am diabetic. I have an alarm which beeps to remind me to go to welfare to check my levels. The welfare staff help me check my levels and take my insulin.'

'It makes me feel good and safe that people at school care about me.'

'I like my teachers reading books to me.'

'The teaching assistant walks me to the toilet and waits outside in case I hurt myself. The welfare staff take me and collect me from my class, we go in the lift.'
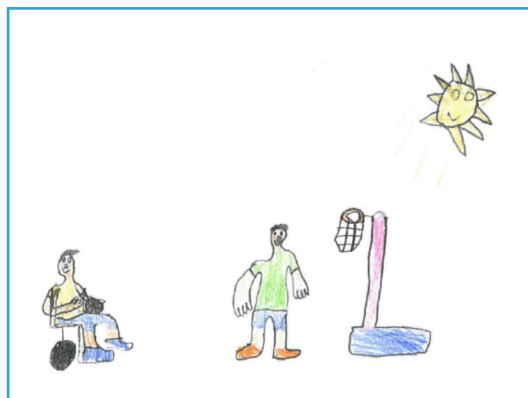
'I have a spinal injury. Sitting with a pillow on my chair and walking around for a few minutes relieves the pressure in my back; I don't feel so achy.'

Illustration by a pupil at Carterhatch Infant School

Introduction

It is important that everyone in the school community has an understanding about some of the physical and medical conditions of the CYP in the school so that reasonable adjustments can be made to the physical environment and to teaching and learning. Some CYP with physical disabilities will require additional support and equipment to enable them to access the same opportunities as their peers. Others will need access to staff who have been trained to manage medical conditions; these pupils will have medical health care plans.

- A CYP has a physical disability if they have an impairment that has a substantial and long-term negative effect on their ability to do normal daily activities. This can be a result of a congenital or progressive medical condition, injury or disease. Some CYP with physical disabilities may be very cognitively able so the level and type of support must be tailored to a person-centred needs analysis.

- All schools have an accessibility plan which outlines how CYP can access the curriculum and access the school building. In addition, schools have Equality Objectives that aim to eliminate discrimination, harassment and victimisation; advance equality of opportunity between different groups and foster good relations between different groups.

Whole School Approaches

When planning to meet the needs of CYP who have a physical disability or medical needs, consider the following:

- Adjustable height work surfaces especially in specialist areas e.g. science labs, food tech, music suites.

- Allow flexibility around uniform requirements.

- Where specialist equipment has been provided e.g. hoists it should be stored safely, maintained and be easily accessible for when students require it.

- Ask the child/young person how they would like to be supported and within the guidelines try to accommodate this whilst also striving for independence e.g. a buddy to support them.

- Plan to manage evacuation procedures.

- Plan how to access school trips.

- Special access arrangements onto the school site for parents at drop off and pick up times.

- Help parent/carer with applying to the LA for transport if required.

- Peer awareness of inclusivity and diversity.

Physical Disability and Medical Needs

What we see (Some of these presentations may overlap within and across sections)	What may help
Wheelchair user **At school:** Tammy is in year 5 and can't walk or stand by herself, she uses a wheelchair and needs others to help her to change position. She is left out in PE and goes to the library or has to sit out. **At home:** Tammy uses different types of equipment and help her change her clothes, bathe, use the toilet and help her with her meals.	• Manual Handling training for key staff and updated as per legislation purchase of recommended equipment to assist with this. • Respecting privacy and dignity when assisting with personal care making use of any necessary specialist equipment and ensuring private accessible spaces across the school site. • Seeking advice from Specialist resources such as Waverley School Outreach team. • Ensuring classroom layouts are uncluttered and wheelchair friendly. • Considering sight lines for wheelchair users. • Adjusting door handles to allow young person to open independently. • Installing wheeled mobility access; ramps, lift access. • Seeking advice about inclusive PE to support Public Health England recommendations of 60 minutes of moderate to vigorous physical activity per day (5-18 year olds).
Limited mobility (temporary or permanent) **At school:** Harvey is in year 7 and uses a walker and this means that he is unable to access all parts of the school and playground. He doesn't like having to use equipment as it makes me different from everyone else. **At home:** Harvey's parents have struggled to get him into school on time as he is unable to walk long distances and parking outside the school is problematic at the start and end of the school day.	• Installing wheeled mobility access; ramps, lift access. • Planning simple clear accessible circulation routes big enough for wheelchairs and walking frames or crutches. • Redesigning outdoor areas to allow ground access to activities, use of ramps, specialist equipment. • Discussing support at mealtimes and breaktimes with child/young person. • Supporting the use of walker at child's discretion but mindful of health and safety requirements. • Adapting the curriculum e.g. PE lessons – where everyone has to move on the floor.

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties with balance **At school:** Samira is in year 8 and is unstable on her feet and worries that she will fall on stairs or in crowded corridors. She feels embarrassed that her friend has to help her when she leaves class early to avoid busy corridors. **At home:** Samira avoids playing in the park with the other children because she use the playground equipment as well as others her own age.	• Installing banisters on both sides of the stairs. • Ensuring that there is a two-way protocol for busy stairways and corridors is enforced. • Planning flexible timing for CYP when changing lessons. • Provision of a lift pass (if a lift is available).
Difficulties with continence **At school:** Romeo is in year 4 and sometimes needs to go to the toilet urgently and doesn't always get there in time. He avoids drinking fluids at school because he is embarrassed about this. This has caused urinary tract infections. **At home:** Romeo wets the bed at night but is always dry during the day if he is at home all day.	• Making sure staff are aware and sensitive to the need for privacy about this and flexibility re toileting in a way that is non-discriminatory. • Considering discrete ways of communication between CYP and adult.

What we see (Some of these presentations may overlap within and across sections)	What may help
Poor fine and gross motor skills **At school:** Rosie is in year 5 and her hands are weak and she can't hold a pen or pencil to write neatly. She can be slow at writing. Rosie can't sit crossed legged for very long it can hurt, she starts to fidget and lose concentration as she is stiff and uncomfortable. She takes a long time to change for PE and miss some of the lesson. She doesn't perform as well as others in PE and is always last to be picked for teams/games. **At home:** Rosie's muscles are weak and she gets tired quickly, sometimes she experiences pain that makes it hard to concentrate on anything that she is doing.	• Considering a different sitting position or chair. • Providing alternative pens, pencils grips, writing slopes. • Factoring in regular movement breaks. • Pacing activities using rest periods, adult support and additional time for changing. • Planning for all CYP to come to school in their PE kit on PE days. • Staff picking teams rather than allowing CYP to choose.
Difficulties swallowing **At school:** Mary is year 3 and has difficulty swallowing and is on a prescribed modified diet. She is often slow with eating her meals and does not finish her meal in the time allocated. **At home:** Mary gets fatigued when eating and drinking and can lose weight easily. She does not like eating because she feels pressure to eat all her food which can often make mealtimes stressful.	• Reducing distractions, offering a calm environment. • Ensuring good upright comfortable positioning. • Giving adequate time for meals, keep mealtimes to a maximum of 30 mins • Going out to lunch 15 mins before everyone else for more time to eat. • Encouraging participation in the mealtime dining routine at school. • Working with parents to identify appropriate/ safe foods from school dinner menu. • Creating positive mealtime experiences and to model good eating behaviours. • Encouraging involvement in mealtime preparation, e.g. shopping, cooking, looking at recipes together. • Supporting with a referral to Dietician. • Offering appropriate meal choices.

External Agency Support (See Appendix 1 for referral contact details)

Enfield PE Team paula.felgate@enfield.gov.uk

Occupational Therapy Service

Physiotherapy Service

Waverley Outreach

Educational Psychology Service

Dietician

Additional Resources

Supporting pupils with medical conditions at school

https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

Advice around Specific Physical Conditions

Hypermobility advice:

Joint Hypermobility Strategies & Advice | NHS GGC

Coping at school | Hypermobility Syndromes Association (HMSA)

Additional support around cerebral palsy and hemiplegia (affecting one side of the body)

Support services | Disability charity Scope UK (Cerebral Palsy)

https://contact.org.uk/help-for-families/information-advice-services/health-medical-information/hemiplegia-support/
Education | Contact

Education | Muscular Dystrophy UK

FAQ's about physical disability and educational settings - Shine (shinecharity.org.uk)

Advice for inclusive PE and physical activity

Inclusion - Association for Physical Education - Association For Physical Education | P.E. (afpe.org.uk)

Sainsbury's Active Kids for All Inclusive Training | Programmes (activityalliance.org.uk)

Inclusive PE Training Portal: About the Programme

Designing wheelchair accessible playgrounds

Inclusive & Wheelchair Accessible Playground Equipment for Schools (actionplayandleisure.co.uk) Accessible
Playground Equipment | Flights of Fantasy

Deafness and Hearing Loss

Child or Young Person's Voice

"It's fun and joyful going to a school with other deaf children. I like how they teach you how to sign, good eye contact, good listening and respect. I'm very proud because I can sign and talk…I can do both."

"All deaf people and types of deafness are different. Also, that how they became deaf will be different."

I explain how best they can communicate with me by getting my attention, speaking clearly, facing me so I can lip read, then I explain that I use British Sign Language."

"Sometimes when the teacher turns away or I need to watch videos and told to take notes I can't because I need to watch the Communication Support Worker. Sometimes it's too loud in the canteen or class and I miss information. Some teachers go too fast. I can't have time to think so I need more time."

"I miss important information. At times I do not understand my subject teacher. Sometimes my teachers carry on talking with their backs turned to me. Some teachers do not use the radio aid correctly. Some teachers use subtitles when they show video clips. I always sit near the front in a good position to see the teacher. I sometimes miss what my friends are saying. I value sitting at the front. I like it when the Teacher of the Deaf or the Communication Support Worker repeats what the teacher says because this helps me with my work. The Teacher of the Deaf helps me when I don't understand – this makes learning easier for me."
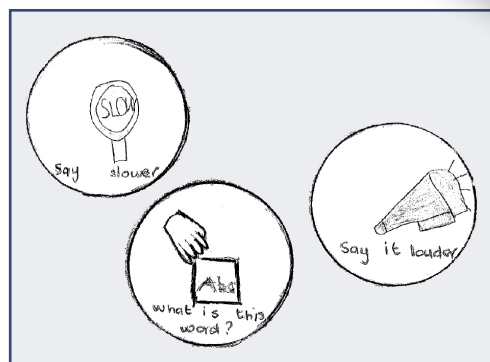
Illustration by a pupil in Brimsdown Primary School's Hearing Impairment Resource Base

Introduction

See also Speech, Language and Communication Needs

It is important that everyone in the school community understands deafness/hearing loss so that staff can ensure that these CYP are maximising their learning opportunities within the learning environment. The term deafness is used to describe sensori-neural, conductive or a mixed hearing loss. This can be a mild, moderate, severe, or profound level of deafness in one or both ears.

Deafness is not a learning disability and deaf pupils have the potential to attain and achieve the same as any other pupils, given the right support and access to the curriculum. Deafness may impact on a CYP attention & listening, language development, self-esteem and social & emotional wellbeing.

Whole School Approaches

When planning to meet the needs of CYP who are deaf or hearing impaired, consider the following:

Supporting communication in the classroom:

- Facing the student when speaking to them.

- Speaking clearly and at a steady pace.

- Locating the speaker during class discussion (point to whoever is talking).

- Repeating back comments made by students in the class.

- Encouraging children to ask for repetition or clarification as necessary.

- Using visual supports (e.g. objects, symbols, pictures, photos, diagrams, natural gesture, signing, written words).

- Having a balance between listening periods and individual or small group activities.

- Outlining the main topic at the beginning of a lesson and summarising the main points at the end.

- Ensuring that video clips are subtitled.

- Providing vocabulary support (pre-teaching topic words, providing definitions for complex words during the class).

- Speaking directly to the student even if an interpreter, Communication Support Worker or Teacher of the Deaf is present.

Creating an acoustically friendly environment:

- Ensuring hearing aids are worn consistently.

- Ensuring that the classroom is adapted to maximise listening access (e.g. consistent use of hearing equipment and radio aids if issued, background noise is reduced, the child is seated close to the main speaker).

- Keeping background noise to a minimum (turning off electrical equipment that is not being used, putting rubber stoppers on the bottom of chairs/table legs, closing doors).

- Reducing reverberation by using materials which absorb sound waves (e.g. using fabric in classroom wall and table displays, having as many carpeted areas as possible).

- Ensuring the child is seated closest to the main sound source.

Creating a visually friendly environment:

- Using visual supports (as mentioned above).

- Having good lighting to make it easier to pick up on visual cues.

- Avoiding standing in front of a window or light source as this will cast shadow on your face and make it more difficult to pick up on visual cues.

- Being mindful that it can be more difficult to lip read someone if their mouth is covered or if they have a beard/ moustache.

Promoting emotional wellbeing and identity:

- Encouraging open conversations about deafness.

- Reading books about children who are deaf.

- Ensuring language used is always positive (i.e. deafness as opposed to hearing impairment).

- Raising deaf awareness (through assemblies and class discussions).

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties with attention and listening **At school:** Aleyna is in year 5 and struggles to maintain attention in class as she is easily distracted and cannot attend to what the teacher is saying. As a result, she is often unsure of what to do and relies on copying work or visual cues from her peers. **At home:** Aleyna often looks as if she is daydreaming and this frustrates family members who feel she is not paying attention to them.	• Using a multi-sensory approach (e.g. visual, tactile, kinaesthetic, auditory). • Maintaining a steady pace when delivering lessons. • Repeating key information. • Checking whether the child has understood and encouraging the child to let you know if they have understood. • Giving the child opportunities to explain the task again to facilitate their understanding. • Making sure that the child has a good balance between being an independent listener and receiving additional support from a member of staff. • Using the CYP's names within examples when teaching in order to captivate their attention. • Pausing and using particular words and/or actions to get the whole class to look at the teacher and re-focus. • Using a visual timetable to show the structure of the day. • Incorporate movement breaks during the day.
Difficulties with following instructions **At school:** Mason is in year 8 and has difficulty following instructions and lesson content. He often seems unsure of what to do and may carry out an instruction/task incorrectly or may not be able to attempt it. He regularly asks for information to be repeated and/or relies on copying visual cues from his peers. **At home:** Mason is unable to do to things asked of him at home as he doesn't understand what is being asked of him. Sometimes he will only carry out the first part of the instruction.	• Maintaining a steady pace when delivering lessons. • Presenting information at a slower pace with pausing if necessary. • Repeating key information. • Re-phrasing information if necessary. • Breaking instructions down into smaller steps. • Checking whether the CYP has understood and encouraging the CYP to let you know if they have understood. • Giving the CYP opportunities to repeat instructions back or explain the task they have been set. • Ensuring the CYP can see your face when presenting information and giving instructions. • Checking you have the CYP's attention before presenting information and giving instructions.

Deafness and Hearing Loss

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties with expressive language **At school:** Kayleigh is in year 3 and struggles to express her ideas using spoken language. Her sentences are unclear because of her limited vocabulary and she makes grammatical mistakes that confuse the meaning of her sentences. **At home:** Kayleigh is unable to tell her parents about her day at school. When asked what she has done at school, she says "nothing".	• Promoting a language rich environment (e.g. displaying new words and corresponding visuals on the wall, using new words across different contexts, creating lots of opportunities to use language to interact, share a focus, to talk and to take turns). • Positively modelling language back to the CYP so they are exposed to the correct adult model. • Expanding on language used by the CYP to help them to combine words/make longer sentences themselves. • Allowing extra time for the child to express themselves. • Offering choices to support the CYP's thinking and expression. • Using visual supports, e.g. Colourful Semantics, photos, diagrams, symbols, gestures, Makaton, British Sign Language. • Pre-teaching vocabulary daily as deaf children often miss out on incidental language opportunities (i.e. learning by overhearing).
Difficulties with speech sounds **At school:** Troy is in year 4 and his speech is unclear to listeners due to speech sound production difficulties. Some of his consonants and vowel sounds are omitted and he substitutes other sounds in place of correct ones. Sometimes his friends don't understand what he is saying to them. **At home:** Troy's speech is unclear at home, but his parents and siblings are able to understand him because they are 'tuned in' to his speech.	• Ensuring consistent use of hearing equipment. • Modelling clear speech for the CYP, placing gentle emphasis on target sounds or prolonging target sounds. • Gently marking out syllables in words (ensure that any clapping/tapping is quiet so that the child can hear each syllable clearly). • Making sure that the CYP can identify a specific sound clearly when said by an adult if the CYP is not lip reading (e.g. can they point to the sound card representing the sound said by the adult or can they repeat the sound they heard), N.B. CYP will be unable to reproduce a sound clearly if they cannot hear it clearly. • Supporting the CYP to listen out for the first and last sounds in words, as well as identifying/generating rhyming words.

What we see (Some of these presentations may overlap within and across sections)	What may help
  Difficulties with memory and organisation **At school:** Leian is in year 8 and struggles to remember and recall information. She appears forgetful and disorganised and struggles to keep up with the pace of the class. Leian often arrives to lessons late and without the books and equipment for the lesson. **At home:** Leian often loses her belongings and can't recall where she has left them. Her mum is frustrated as she is frequently replacing lost uniform.	• Encouraging the CYP to write information down or draw pictures. • Providing a visual timetable to show the structure of the day. • Repeating information. • Breaking information down into smaller parts. • Using games to encourage working memory development, e.g. pairs, 'Which item is missing?'. • Providing extra time for the CYP. • Adopting the correct pace and including pauses. • Repeating key information. • Simplifying tasks to ensure understanding. • Allowing the CYP more time to process information. • Checking in with the CYP throughout the lesson.

Deafness and Hearing Loss

What we see	What may help
(Some of these presentations may overlap within and across sections)	
Difficulties with social interaction **At school:** Samara is in year 4 and is withdrawn and socially isolated; she is observed on the periphery of group conversations and she displays limited interaction in social games. In class she does not volunteer information or contribute to whole class discussions and sometimes another child may speak for her. She will engage in paired discussions but still finds this difficult. **At home:** Samara only mixes with other deaf children outside of school, which means she only has a small number of friends. She appears unhappy and in low mood most of the time and displays poor self-esteem.	• Ensuring that the classroom is adapted to maximise listening access. • Checking that noise levels within the classroom are appropriate. • Checking understanding of the topic being covered and that key vocabulary has been pre-taught. • Using prompt phrases or sentences to encourage contributions. • Supporting spoken explanations with visual materials. • Avoiding overloading the lesson content with too much spoken information. • Being inclusive. • Taking on board a variety of ideas and spreading questions between different children in the class. • Asking the child how they are feeling and encouraging them to express themselves. Identifying a key adult who the child knows they can go and talk to about any difficulties. • Providing access to a school counsellor if appropriate. • Setting up a peer buddy system. • Ensuring hearing peers are deaf aware. • Encouraging the child to share/discuss challenges in wider social settings. • Creating opportunities for group work requiring turn-taking. • Ensuring after school activities are accessible for deaf children and that club leaders are deaf aware. • Providing deaf children with specific teaching to see situations from other's perspective. • Creating opportunities to discuss deafness in assembly and lessons. • Providing opportunities to share personal experiences. • Ensuring hearing peers are deaf aware. • Creating the opportunity to sit away from the main group - discussing in a quieter corner of the classroom, sitting on chairs to discuss while others are seated on the carpet.

What we see (Some of these presentations may overlap within and across sections)	What may help
  Cognition and learning difficulties related to hearing loss **See also Cognition and Learning** **At school:** Patrick is in year 7 and has poor general knowledge of the world and finds it hard to answer comprehension questions in lessons and explain his ideas as a result of his poor inferencing skills **At home:** Patrick has in-depth knowledge of games and technology and can name many characters and objects from games and tell you about the latest variations of mobile phones	• Using a multi-sensory approach (e.g. visual, tactile, kinaesthetic, auditory). • Organising class visits to places of interest. • Reviewing and reinforcing new and key vocabulary. • Pre/post-teaching to consolidate new concepts/ topics. • Use of age-appropriate picture dictionary/handouts to support understanding. • Encouraging older students to use and create their own glossary. • Promoting a language rich environment. • Using classroom displays to reinforce understanding. • Using Blank Levels/Language for Thinking programme to develop inferencing skills.

What we see	What may help
(Some of these presentations may overlap within and across sections)	

ENVIRONMENT

Difficulties related to the listening environment

At school:
Denzel is in year 5 and, during whole class teaching, he sometimes mishears questions and responds in a way that was not linked to the question; his peers laugh at him when this happens. He finds these communication breakdowns embarrassing. He has difficulty filtering out background noise when the classroom is noisy. Denzel is unable to locate different sounds in the room e.g. he does not turn to the person speaking. He frequently asks for information to be repeated.

At home:
Denzel often mishears when his parents ask him to do things and carries out tasks incorrectly. He cannot follow a video and is often confused about the content. He is unable to talk about what he has watched.

What may help

- Ensuring that the classroom is adapted to maximise listening access and that hearing equipment is working and being worn consistently.
- Repeating, rephrasing, simplifying and clarifying information.
- Repeating other CYP's contributions/responses to questions.
- Checking understanding before breaking off into pairs/groups.
- Using open-ended questions to check understanding.
- Encouraging all CYP to ask for repetition or clarification if they are unsure of what was said.
- Using subtitles.
- Ensuring effective use of listening equipment.
- Discussing content of the video clip and highlighting new vocabulary before showing it.
- Providing a transcript of the clip for older children if possible.
- Using Bluetooth function on the listening device.
- Using an iPad connected to the whiteboard.
- Being aware that deaf children will be unable to make notes and listen/watch the video simultaneously.
- Helping the child feel confident letting the teacher know if they are unable to hear or see them.
- Ensuring the child is sat away from background noise.
- Making sure the child is sat close to the main sound source.
- Pointing to the speaker so that the child can see who is talking.
- Repeating back comments made by peers so the child has another opportunity to hear them.
- Ensuring the child is sat away from background noise.
- Discussing preferential seating during assembly times (e.g. not necessarily with their class at the back).

What we see	What may help
(Some of these presentations may overlap within and across sections)	

Physical impact of hearing loss

At school:
Amelie is in year 3 and is often heard talking too loudly in 'quiet' discussion time in class and other times she speaks too softly to be heard, for example, in the playground. She seems to struggle to tolerate loud noisy environments like the dinner hall and tries to avoid them.

At home:
Amelie comes home from school extremely tired every day because she is fatigued from listening. She sometimes suffers from headaches. In the past she complained of ear pain.

What may help

- Ensuring that the classroom is adapted to maximise listening access; keeping background noise to a minimum and reducing reverberation.

- Ensuring that hearing equipment is working and being worn consistently.

- Having quiet times in the day when the CYP can rest.

- Creating opportunities to learn in a quiet environment (quiet corner, quiet area).

- Becoming familiar with the signs of listening fatigue so teaching staff can intervene before the child becomes frustrated.

- Using a visual number/colour scale so that the child can indicate when they are struggling to tolerate the noise.

- Ensuring that the child has access to breaks in the day.

- Alerting parents/carers as the child may have an infection which requires medical attention.

- Letting the child know in a positive manner.

- Using a visual number/colour scale to show the child how loud/quiet they are talking.

- Ensuring consistent use of hearing equipment.

External Agency Support (See Appendix 1 for referral contact details)

Advisory Teachers of the Deaf (0 – 19 years) - Referrals can be made by a range of professionals, including school SENCos, Audiologists, GPs, Speech and Language Therapists, Health Visitors (with parental consent). Parents can also access advice or support from the service directly.

Speech and Language Therapy – Deafness/Hearing Loss (0 – 19 years)

Referrals can be made by a range of professionals, including school SENCos, Teachers of the Deaf, Audiologists and other medical professionals. It is asked that the referrer makes contact with the service to discuss a potential referral in the first instance. Once discussed, a referral form is completed. Children with moderate-profound hearing loss are seen by the deafness service. Children with mild hearing loss are usually supported by the **School-age Speech and Language Service**.

Deaf Child and Adolescent Mental Health Service (Deaf CAMHS) (0 – 18 years)

Referrals can be made by a range of professionals, including CAMHS, Paediatricians, Audiologists, Social Services, GPs. Self-referrals are accepted but families are encouraged to discuss their concerns with local professionals prior to completing a referral form if possible.

National Deaf Children's Society Helpline (NDCS) (0 – 25 years)

Helpline provides free independent information, advice and guidance on a range of topics relating to childhood deafness.

Website: https://www.ndcs.org.uk/our-services/services-for-families/helpline/
Tel: 0808 800 8880
SMS: 0786 00 22 888
Sign Video with BSL interpreter (via website)
Live chat function

Paediatric Audiology Services (0 – 18 years)

If you are concerned about a child's hearing, speak to the school SENCo. The SENCo can advise parents/carers. A referral to audiology can be made by the child's GP.

Additional Resources

Websites:

https://www.ndcs.org.uk/information-and-support/being-deaf-friendly/information-for-professionals/here-to-learn/watch-our-here-to-learn-videos/

- Videos about how to support children with deafness/hearing loss, including communication approaches, managing the environment, adapting resources, working with others and social and emotional development.

https://www.ndcs.org.uk/documents-and-resources

-Resources for children of all ages, deaf-friendly teaching advice, lesson plans for teachers, factsheets about different types of deafness, books/comics for children who will be getting hearing aids/cochlear implants/grommets, supporting communication, information about hearing technology, applying for additional support etc.

https://www.childline.org.uk/info-advice/bullying-abuse-safety/deaf-zone/bsl-videos/

- British Sign Language advice videos covering a range of important topics, such as bullying, family relationships, staying safe and contacting Childline.

https://thelisteningroom.com/

- Activities and resources to support speech, language and listening development.

https://www.cochlear.com/uk/en/home/ongoing-care-and-support/rehabilitation-resources

- Activities to support speech, language and listening development post cochlear implantation.

https://www.twinkl.co.uk

- Deaf education resources

https://www.british-sign.co.uk/

- Online introductory British Sign Language course.

https://letssign.co.uk/product-category/free-resources/

- Free British Sign Language resources.

https://www.bslzone.co.uk

- Programmes in British Sign Language (which can be viewed with subtitles).

https://www.efolio.soton.ac.uk/blog/usaistrainingportal/

- Free e-learning about cochlear implants.

Visual Impairment

Child or Young Person's Voice

'An embosser is very useful for lessons since the lesson or a particular part of it is brailled for me and I can get involved with everything everyone else is.'

'The laptop is also very useful in lessons since it has a screen reader installed on it so it allows me to access it very well.'

'I have a lot of adapted resources to help me out in lessons which helps since it they are very useful and allows me to access lessons easier.'

'The braille note is very useful in lessons and it helps me very much.'

"I like playing on the monkey bars with my friends."

"It is fun."

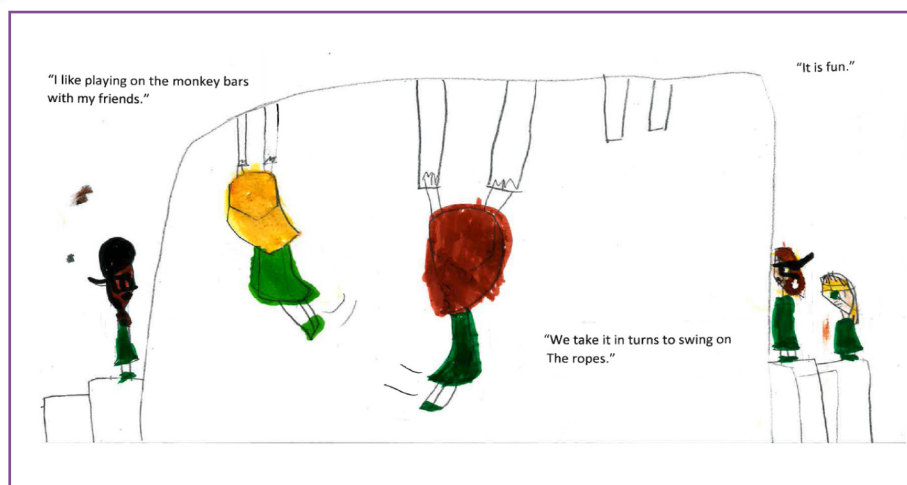"We take it in turns to swing on The ropes."

Illustration by a pupil at St Monica's RC Primary School

Introduction

It is important that everyone in the school community understands vision impairments and the impact that these have on learning so that staff can ensure that CYP with vision impairments are maximising their learning opportunities within the learning environment. Young children with early onset severe vision impairment can experience delayed motor, language, emotional, social and cognitive development, with lifelong consequences. School-age CYP with vision impairment may also experience lower levels of educational achievement.

Vision impairment is the term used to describe a loss of sight that cannot be corrected using glasses or contact lenses. There are two main categories of vision impairment for which a CYP may be registered with a Certificate of Vision Impairment (CVI):

- Registered sight impaired (SI), which means the level of sight impairment is moderate

- Registered severely sight impaired (SSI), which means a severe sight impairment where activities that rely on eyesight become impossible

CYP with visual impairments will experience varying degrees of sight loss; the majority will have some sight. These impairments may be caused by conditions, such as amblyopia (also known as 'lazy eye'), strabismus (crossed eyes), brain or eye injuries, or a birth defect.

Whole School Approaches

When planning to meet the needs of CYP who have a visual impairment, consider the following:

- When developing colour schemes for walls and furniture, good contrast and clear edges will help people who are partially sighted.

- Signage and notices around the school should be sufficiently in sufficiently sized print and in bold colours.

- Keeping corridors and passageways clear of obstructions.

- Lighting should be consistent throughout school buildings.

- Steps in stairways should be highlighted in some way (consider an environmental audit from a Habilitation Specialist).

- Vision impairment awareness sessions should be part of schools' overall equality and diversity programmes.

- Students must be able to sit in the position that best suits their vision, usually at the front.

- All school staff, including teachers, teaching support staff and non-teaching staff must have an appropriate level of training (either in teaching students with visual impairment or in visual impairment awareness).

What we see (Some of these presentations may overlap within and across sections)	What may help

Difficulties with reading and writing
See also Cognition and Learning

At school:
Tommy is in year 5 and seems to have little interest in reading books and when he does read he holds books close to him and he looks away often, seeming to be distracted. He takes a long time to finish reading and can't keep up with other students. When he is writing he bends close over his work and as a consequence he suffers from neck ache. Tommy's handwriting is not very good with inconsistent spacing and poor letter formation. His spelling is poor. He finds it difficult to read back his own work.

At home:
Tommy rarely completes his homework. He is reluctant to read or write for pleasure. He used to enjoy having stories read to him but he now feels this is something only for younger children.

- Providing a wide range of specifically modified teaching resources (such as tactile pictures and Braille materials). These are available from a few specialist educational suppliers e.g. Custom Eyes (https://www.guidedogs.org.uk/getting-support/help-for-children-and-families/living-independently/customeyes-books/). Normal teaching materials can also be modified, for example, by printing resources in larger fonts and in bold.

- Ensuring equipment is charged sufficiently during the day if CYP are using assistive technology such as a laptop.

- Using a screen or text reader such as Immersive Reader in Word.

- Providing alternative methods for recording information in the classroom and for homework should be offered, for example audio recording.

- Providing information in advance of lesson so that the student has an opportunity to become familiar with the content.

- Providing additional time for completion of all written/reading activities and 'down time' offered to reduce the effects of visual fatigue.

- Providing only the relevant section of maps/diagrams to reduce unnecessary visual clutter.

- Using modified exercise books with bolder lines for writing and bolder boxes for maths.

- Using darker pencils for written work.

- Using a writing slope to raise work up.

Difficulties participating in PE and games

In school:
Andrew is in year 9 and finds it hard to participate in sports and games requiring good vision, especially ball sports.

At home:
Andrew is reluctant to participate in out-of-school sports clubs.

- Providing modified/adapted equipment – larger tennis rackets, foam balls instead of tennis balls, high contrast pitch. markers and playing bibs, goalball (large foam ball with bell in).

- Positioning CYP close to practical demonstrations.

- Use the CYP's name when speaking to them, especially in larger spaces like halls and the playground.

- Reduce the size of playing areas.

What we see (Some of these presentations may overlap within and across sections)	What may help
Difficulties participating in social groups **At school:** Faith is in year 8 and finds it difficult to read social cues from body language and facial expressions and can appear to others to be rude, for example if he seems to be ignoring them. She has difficulty locating her friends in the playground and has a small social circle. **At home:** Faith is reluctant to meet other children and prefers to stay at home when the family go out for social events. She finds it hard to navigate in unfamiliar places and this causes her anxiety. She has low self-esteem and poor self-confidence.	• Setting up a buddy/befriender system for play and lunch times, including a designated meeting place. • Providing lunchtime social clubs.
Difficulties accessing the curriculum **At school:** Parmjit is in year 5 and is not engaged with learning. She has made little or no academic progress in the last two years. Her behaviour is seen as disruptive. She finds it hard to concentrate in lessons. **At home:** Parmjit's parents feel she is "over-dependent" on adults. They are frustrated that she does not complete her homework and often does not want to go to school.	• Providing magnifying technology where needed. • Using screen sharing technologies to enable access to content on separate devices. • Adjusting expectations of the volume of work to be produced whilst still fulfilling the objectives of lessons. • Considering seating, e.g. CYP should be positioned close to any practical demonstrations. • Verbalising what is happening using rich descriptive language when the CYP cannot see. • Providing the student with their own copy of any texts that are shared on the teaching board.

External Agency Support

Joseph Clarke Outreach Service
(Whitefield Academy Trust, Macdonald Road, Walthamstow, London E17 4AZ,
email: jcservice@whitefield.waltham.sch.uk, Phone: 020 8531 8361)

Additional Resources

RNIB - https://www.rnib.org.uk/

Funding and the use of funding

Each school receives funding for SEND according to proxy indicators of need in the school's population as a whole, e.g. social deprivation and prior attainment. Some CYP with a higher level of need receive additional funding that is linked to the needs and provision outlined on their Education, Health and Care Plan.

SEN funding is received by mainstream schools and academies is divided into three sections:

Element 1	The Age Weighted Pupil Unit (AWPU) pays for the basic costs for every child in the school regardless of any SEND. It usually covers staffing and premises costs.
Element 2	Additional funding (up to £6000 per CYP) for CYP with SEND (both EHCP and SEN Support) to make provision to meet their needs. This money is known as the Notional SEN budget. For each child in the school with an EHCP this notional budget is used to fund the first £6000 of the cost of the EHCP.
Element 3	The High Needs Block (sometimes referred to as "top up funding"). This is the money paid by the Local Authority (maintained)/Education and Skills Funding Agency (academies), in addition to the element 1 and element 2 funding to top up the support within the school to meet the funding needed for individual CYP with an EHCP.

Schools will need to carefully consider how the funding should be best used to meet the CYP's outcomes instead of routinely allocating a 1:1 TA/LSA to them. This may include training for staff working with the CYP, educational resources that will enhance the accessibility of the curriculum and/or more specialised teaching support for group interventions.

In most instances it is unlikely that a 1:1 TA/LSA will be necessary to meet a CYP's special educational needs. However, there may be some cases where there is a high level of physical need, attachment and/or safeguarding need which will require higher levels of staffing. CYP who have experienced developmental trauma, had disrupted attachments and/ or have severe communication needs may need the opportunity to develop attuned relationships within the classroom setting. For these CYP, it is recommended that a close relationship with one or two consistent TAs/LSAs is encouraged. It is important that these staff understand that the children or young people may need to go back to a dependent relationship before they are able to develop the independence that we are working towards.

In making these decisions, schools should remember that it is essential that they promote Preparation for Adulthood outcomes (i.e. Employment, Independent Living, Community Inclusion and Health) in their provision for CYP with SEND so that we all work together in encouraging and supporting them to become increasingly independent as they enter adulthood. This begins from the Early Years with promoting independence with dressing and toileting as well as developing language to express their needs and develop friendships. If we perpetuate dependence on a continued TA/ LSA presence, we are not preparing CYP with SEND to become independent adults. For further information on best practice for using school funding for SEND refer to 'Good Practice Guide for Schools for using EHCP funding.'

Glossary

Academy	An academy is a mainstream school which receives funding directly from the Government and is independent of the Local Authority.
Access Arrangements	Access arrangements are special arrangements that some students with SEND are entitled to in their public exams so that they can demonstrate their ability without their disability being a barrier. Schools are required to undertake assessments to establish eligibility for access arrangements and to show evidence that any adjustments are part of usual classroom practice.
Additionally Resourced Provision (ARP)	The DfE refers to these provisions as Specially Resourced Provision (SRP). Resourced provision within mainstream schools where CYP are either withdrawn to a resource for specialist input, or teachers from the resource deliver specialist help to the CYP within the classroom. A resource provision usually has a specialist focus such as hearing impairment or autism.
Age Weighted Pupil Unit (AWPU)	The AWPU is the amount of money that every maintained school receives for each CYP that is on the school roll, whether or not they have SEND. The value of the AWPU varies from one Local Authority to another and according to the age of the CYP.
Area SENCOs	Area SENCOs are commissioned to work in Private, Voluntary and Independent Nurseries as well as School Nurseries and Reception classes in mainstream schools.
Child and Adolescent Mental Health Service (CAMHS)	CAMHS assess and treat CYP with emotional, behavioural or mental health difficulties.
Designated Clinical Officer (DCO)	A key role in implementing and embedding the SEND reforms and in supporting joined up work between health services, Local Authorities and other SEND partners.
Designated Social Care Officer (DSCO)	A key role in implementing and embedding the SEND reforms and in supporting joined up work between social care services, Local Authorities and other SEND partners.
Designated Unit	These are sometimes referred to as Units. CYP accessing Units should have access to mainstream provision, such as assembly, lunchtime, PE, Music, Art or other mainstream curriculum classes where appropriate. The amount of integration in mainstream will be significantly less than that of CYP in ARPs.
Differentiation	Differentiation is the first step in meeting the needs of every CYP. It is any way in which the content, presentation, environment or expectations of teaching and learning is modified. It may be something which has been planned in advance (such as a specific activity) or adapted in the moment (based on a CYP's needs or their response to teaching). Differentiation may be 'big' (e.g. using a Teaching Assistant (TA) to support a particular CYP) or 'small' (e.g. rephrasing a question to make it simpler).
Early Help	Early Help is an assessment and offer of support to a family to help identify needs and offer intervention at an early stage. It can involve multiple agencies.
Educational Psychologist (EP)	Educational Psychologists have a qualification to masters or doctorate level and are trained to apply psychology to the educational context. All EPs are registered with the Health and Care Professions Council (HCPC). They are experienced in working with CYP in schools, colleges and early years settings and work in partnership with parents, carers, schools, nurseries, health services and children's social care.

Education, Health and Care Plan (EHCP)	An EHCP is a legal document describing a young person's needs, their expected outcomes, the provision required to achieve those outcomes and the most suitable educational placement. A CYP's EHCP must be person centred taking into account their views, wishes and feelings and that of their family.
Education Funding Agency (EFA)	The EFA is the government agency that funds education for CYP between the ages of 3 and 19, and those with learning difficulties and disabilities between the ages of 3 and 25. The EFA allocates funds to local authorities, which then provide the funding for maintained schools. The EFA directly academies and free schools directly.
Emotional Literacy Support Assistants (ELSAs)	The Emotional Literacy Support Assistants (ELSA) programme is an initiative that was designed by Educational Psychologists to build the capacity of schools to support the social emotional and mental health needs of their pupils from within their own resources. Enfield EPS provides training and co-ordinates the local ELSA network.
Enfield Trauma Information Practice in Schools & Settings (E-TIPSS)	Enfield Trauma Informed Practice in Schools and Settings (E-TIPSS) is an implementation programme that aims to support schools and partners in Enfield to work together to support children to make sense of their experience(s) find ways to manage their emotions and feelings. create an environment of safety, connection and compassion at all times. Our aim is to build a local area network of strong, positive, supportive relationships through training and follow up support. E-TIPSS uses the Attachment Regulation and Competency (ARC) Framework as an implementation model (Blaustein & Kinniburgh (2019)
Free School	Free schools are no-for-profit schools that are funded by the government directly and are independent of the Local Authority. They can be set up by charities, universities, independent schools, community and faith groups, teacher, parents and businesses.
Graduated Approach	The graduated approach is the cycle of Assess, Plan, Do and Review that is used to understand and meet a CYP's SEND. Where expected progress is not seen at the review stage, increasing specialist expertise should be sought for the subsequent cycle.
High Needs Block	The High Needs Block is used to fund special school places and is the top-up funding paid to mainstream schools for some CYP with EHCPs.
Higher Level Teaching Assistants (HLTAs)	Higher level **teaching assistants** (HLTAs) do all the things that regular teaching assistants do but they have an increased level of responsibility e.g. teaching classes on their own to cover planned absences and allow teachers time to plan and mark.
Individual Education Plan (IEP)	This is used by schools to document the Graduated Approach (Assess, Plan, Do, Review). It is a non-statutory document meaning that schools can choose how and when they use it. They can also have different names in different schools such as: SEND Support Plans or Pupil Passports.
Key Stage	A key stage is a stage of education. They are separated in age as follows: Key Stage 1 is years 1 and 2 (5 – 7 years old) Key Stage 2 is years 3 – 6 (7-11 years old) Key Stage 3 years 7 - 9 (11 – 14 years old) Key Stage 4 years 10 - 11 (14 – 16 years old) Key Stage 5 years 12 – 13 (16 – 18 years old)
Looked After Children (LAC)	The term 'looked after' refers to children, under 18, who have been provided with care and accommodation by children's social services.

Local Offer	The Local Offer, published by every local authority, tells you what support is available for CYP with SEND and their families. It includes information about education, health and care provision. It also gives information about training, employment and independent living for young people with SEND.
Maintained School	Schools in England that are funded by the Local Authority including any community, foundation or voluntary school, community special or foundation special school.
Mainstream School	This is a school that provides education for all children, whether or not they have special educational needs or disabilities.
Makaton	Makaton a unique language programme that uses symbols, signs and speech to enable people to communicate. It supports the development of essential communication skills such as attention and listening, comprehension, memory, recall and organisation of language and expression.
Modified Curriculum	A modified curriculum is version of the National Curriculum or the school's curriculum that is adapted in some way to meet a CYP's individual needs. Examples include increasing/decreasing the difficulty level, length, or pace, alternating easy and difficult tasks, alternating preferred and less preferred tasks, teaching a new skill within daily routines, using materials that are interesting and motivating to the CYP.
Multi-Agency Safeguarding Hub (MASH)	This is the first point of entry for referrals about CYP made by professionals, families and the public where there are concerns about the safety of a CYP.
Outcome	Outcomes describe the difference that will be made to a CYP as a result of special educational and other provision. These must be specific, measurable, achievable, realistic and time-bound (SMART).
Reasonable Adjustments	Reasonable adjustments are changes schools and other settings are required to make in order to make the physical or learning environment more accessible. Examples include changes to physical features such as creating a ramp so that students can enter a classroom or providing extra support and aids (such as specialist teachers or equipment).
Scaffolding	Scaffolding describes a process that supports a CYP with what they can't yet do independently, until their understanding, skills (and often confidence) grow to a point where they can. The goal is to provide help a small stage beyond what the CYP is currently capable of on their own without support. With support, or scaffolding, the CYP can access the concept or skill and gain experience until they are able to become more or fully independent. This scaffolding process needs to change in line with the confidence and competence of each CYP. This is sometimes from the point of requiring direct adult for the whole task, to initial help or intermittent help, often with the use of learning materials or aids.
Special Educational Needs and Disabilities (SEND)	Special educational needs often referred to as 'SEN' or 'SEND' (Special educational needs and disabilities), is a term used to describe learning difficulties or disabilities that make it harder for a child to learn compared to children of the same age.
Special Educational Needs Coordinator (SENCo)	A SENCo is a qualified teacher in a school or maintained nursery school who has responsibility for co-ordinating SEND provision.
SEN Code of Practice	This is the statutory guidance that supports Part 3 of the Children and Families Act 2014. It tells local authorities, early years settings, schools, colleges, health and social care providers and others what they must and should do to identify, assess and provide for CYP with SEND.
SEN Information Report	All schools must publish on their websites information about their policy and arrangements for supporting children with SEN. This should be updated annually.

SEN Support	When a CYP has been identified as having SEND, schools should take action to remove barriers to learning and put 'additional to and different from' special educational provision in place. This is known as SEN Support.
Special School	A school which is resourced and organised to provide for the education of CYP with an Education, Health & Care Plan who need a high degree of support in the learning situation and in some cases specialist facilities, equipment and teaching.
Speech and Language Therapist (SaLT)	Speech and language therapists are the lead professionals for children who have speech language and communication needs and or difficulties with eating and drinking. They are registered with and regulated by the HCPC.
Teaching Assistant/ Learning Support Assistant (TA/LSA)	Non-teaching support staff who work with children with special educational needs in the classroom under the direction of a teacher.

Appendix 1 – Services, contact details and referral pathways

With thanks to Michelle Williams, St James' CE Primary School who collated this information.

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Children and Adolescent Mental Health Services (CAMHS) **CAMHS teams & remits** 	Accept referrals from health, education, children's services colleagues, parents and carers. Young people can also self-refer if they are over 16. Address: Enfield CAMHS Baytree House Church Tree Close Enfield EN2 6NZ Tel: 020 8379 1520 Website: https://www.behcamhs.nhs.uk/about-us/enfield-camhs.htm Email: beh-tr.enfieldcamhs@nhs.net
Child Development Team & Community Paediatrician Provides medical advice, assessments, diagnosis and treatment for children and young age 18 (or 19, if still in full time education). Community clinics help to manage a range of childhood disabilities and disorders.	The service accepts referrals from Health, Social Care or Education professionals. Tel: 020 8702 3457 or 020 8702 3458 Community Health Children & Young People (CYP) Single Point Referral Form (SPOR) https://www.beh-mht.nhs.uk/downloads/Services/Community%20Health%20Children%20Young%20People%20Single%20Point%20Referral%20Form.docx

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Deaf CAMHS Deaf Child and Adolescent Mental Health Service (Deaf CAMHS) (0 – 18 years) Referrals can be made by a range of professionals, including CAMHS, Paediatricians, Audiologists, Social Services, GPs. Self-referrals are accepted but families are encouraged to discuss their concerns with local professionals prior to completing a referral form if possible.	Tel: 020 3513 5000 Website: https://www.swlstg.nhs.uk/professionals/auto-generate-from-title Email (for London service): ndcamhs@swlstg.nhs.uk
Russet House Outreach Positive Behaviour Support for mainstream schools for individual children and young people so that they can put a PBS plan in place	Tel: 020 8350 0650
Early Help Early Help work with the whole family to improve wellbeing, relationships, behaviour and communication by offering advice, support and direct interventions at any point in a CYP's life, from pre-birth to adulthood, and the type of support available will depend on their needs.	Referral can be made by professional or parent/carer/ relative or friend https://eh.childrensportal.enfield.gov.uk/web/portal/pages/ehmref#h1
Early Years Area SEN Team Area SENCOs are commissioned to work in Private, Voluntary and Independent Nurseries as well as School Nurseries and Reception classes in mainstream schools. An Early Years SENCO forum is held termly for Private, Voluntary and Independent Nurseries.	Email: Julia.Hide@enfield.gov.uk
Early Years Social Inclusion (EYSI) EYSI is a multi-disciplinary team that supports schools in meeting the developmental needs of children facing difficulties in a range of areas. The team oversee and monitor Nurture Groups, Language and Social Skills (LASS) and Tiger Team interventions.	Email: EYSI@enfield.gov.uk

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Educational Psychology Service (EPS) Enfield Educational Psychology Service is the main provider of psychological services to Enfield schools with direct links to services in education, health and social care, enabling a coordinated approach. The EP Service works at different levels with schools to support children and young people's learning and wellbeing. This includes applying psychology with: • Whole-school work to support organisational approaches such as a whole-school framework for emotional wellbeing, or trauma-informed practice. • Individual children and young people and their families, where there are concerns about their learning, development, emotional wellbeing or behaviour. • Groups of children and young people, facilitating workshops or delivering interventions e.g. for managing anxiety. • Groups of parents and carers, for example to facilitate workshops or deliver parenting programmes. The Educational Psychology Service offers a traded service to schools for work at SEN Support or to provide further advice to help children with an EHCP	All EP work is planned with schools that purchase the service. For individual work, a Request for EP Involvement is submitted with consent from parents/cares and young people aged over the age of 16 years. The SEN Service requests EP involvement for EHC Needs Assessments and Statutory Reassessments. EP involvement through other teams, (e.g. EASA, My Young Mind Enfield, the Virtual School, Youth Offending Service, Admissions and Behaviour Support Service etc) is arranged by through the relevant service to meet the specific outcomes of the team. Tel: 020 8379 2000 Email: EPS@enfield.gov.uk
Enfield Advisory Service for Autism (EASA) This is a Local Authority service supporting autistic CYP from 0 - 25 years by working with educational settings and parents to increase understanding of autism and develop provision and practice. EASA provide evidence-based Autism Education Trust training, workshops and surgeries for educational settings and parents. Consultation and advice to schools and settings for CYP diagnosed with autism and those with social communication needs	SENCO and parents/carers can contact the service directly for involvement, advice and training. Tel: 020 8353 4186 Email: admin@enfieldasa.org.uk Website: www.enfieldasa.org.uk

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
ECASS – Enfield Communication Advisory Support Service ECASS is a multi-disciplinary team that aspires to adopt an Enfield wide early intervention approach to speech, language and communication needs (SLCN) across its schools to improve outcomes for children, young people and their families. Every child and young person with SLCN in an Enfield school has access to specialist services through their school setting. Evidence-based approaches and support is provided for schools to further develop enabling environments where communication becomes everybody's business. Strand 1 -Training in Identification Strand 2- Targeted Interventions Strand 3 - Parent/Carer Focused Training Strand 4 - Support, Practitioner and School Based Training Programme Strand 5 - Pupil Referral and Triage	All schools have access to the Universal Offer within each of the 5 strands. Target Schools will also have access to the targeted offer within each of the 5 strands. Email: ecass@enfield.gov.uk
Enfield Children and Young Persons Service (ECYPS) Voluntary sector organisation that provides, holiday, young inclusive practice and training for professionals.	www.ecyps.org.uk
Fern House Outreach Service Support for CYP with SEMH who are at risk of permanent exclusion using a trauma-informed approach to understanding children and young people's behaviours. Support to set up and support with multi-disciplinary pastoral support plans that align with SWERRL and Secondary BSS. Support to devise risk assessment and management plans that align with SWERRL and Secondary BSS.	Tel: 01992 760 860

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
HEART Team **(Health, Education, Access and Resource Team)** for Looked After Children and Post Adopted CYP The HEART Service is led by Enfield Council in partnership with Barnet, Enfield & Haringey Mental Health Trust. It was established to meet the needs of Looked After Children and those adopted from care and to provide support in the areas of education, emotional/mental health and physical health. The service is multi-disciplinary including CAMHS, Education, Speech and Language and Nursing.	Email contacts: Suzanne.Rowson@enfield.gov.uk Azra.Klempic@enfield.gov.uk Malaika.Williams@enfield.gov.uk
Joint Service for Disabled Children (JSDC) The JSDC includes: • The Early Intervention Support Service • Cheviots children's disability service. • Short breaks support for children with significant levels of need.	31 Cheviot Close, Enfield EN1 3UZ Tel: 020 8363 4047 Email: Cheviots@enfield.gov.uk
Joseph Clarke Service for the Vision Impaired Access to specialist teachers to advise on adaptions to the environment (for example, yellow tape to mark hazards like steps or changes in levels, changes to the lighting) to make it more accessible. Recommendations for special equipment (for example, talking keyboards or big keys keyboards) and/or specialist software packages. Training course for school staff offered within the SEND/ Inclusion Professional Learning programme.	Health professionals refer CYP directly to the service and the service make contact with the school to offer regular advisory teacher support visits. SENCOs can also refer to the service with appropriate health professional reports. Tel: 020 8531 8361 Email: jcservice@josephclarke.waltham.sch.uk

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
My Young Mind Enfield MYME (Mental Health Support Teams in schools) My Young Mind Enfield is the local name for Mental Health Support Teams (MHST). MHSTs are funded by NHS England and Health Education England. Schools and colleges in participating MHST areas receive additional mental health and wellbeing support and extra capacity for early intervention and help for mild to moderate mental health issues. MHST are part of the broader offer of support in schools and work in partnership to complement the team around the school/family or child/young person. They are currently linked to approximately 50 educational settings in Enfield and are commissioned to deliver three core functions: 1. Evidence-based interventions for mild to moderate mental health and emotional wellbeing concerns. 2. Support to senior mental health leads in schools to develop a whole-school approach to mental health and wellbeing. 3. Timely advice and signposting to schools.	https://www.beh-mht.nhs.uk/news/new-wellbeing-videos-for-school-children/1649
Nutrition and Dietetics Community Paediatric Dietetics Team Provides nutrition and dietetic assessment and advice, for CYP aged 0-18 (19 if still in full time special education).	Community Health Children & Young People (CYP) Single Point Referral Form (SPOR): https://www.beh-mht.nhs.uk/downloads/Services/Community%20Health%20Children%20Young%20People%20Single%20Point%20Referral%20Form.docx Email: h-tr.enfieldcdcreferrals@nhs.net

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Oaktree School Outreach Practice Support and modelling of inclusive classrooms and curriculum approaches e.g. shadowing opportunities in special schools and consultation at whole class/group level (not individuals) Parent workshops PRICE training /physical intervention for secondary schools Specific Learning Difficulties: • Assessment, screening and intervention (not diagnosis) • Curriculum adaptations • Advice around working memory difficulties, word finding difficulties and phonological awareness • Half termly training and consultation for staff	Tel: 020 8440 3100 Email: outreach@oaktree.enfield.sch.uk
Our Voice Our Voice is a parent–led organisation supporting parents/carers of CYP with SEND. Our Voice works closely with the statutory and voluntary sectors, to improve services for CYP with SEND in the borough of Enfield.	Tel: 07516 662315 Email: info @ ourvoiceenfield.org.uk Website: https://www.ourvoiceenfield.org.uk/
Paediatric Occupational Therapy (OT) OT helps children who have difficulties doing everyday activities, such as dressing, feeding, writing, socialising and play, due to a problem with their fine motor skills, coordination and/or ability to make sense of the world around them. The team also provides advice and guidance on sensory strategies, and specialist equipment such as adapted cutlery, writing aids and specialist seating.	Referrals can be made by registered health professionals (for example, paediatricians, GPs, health visitors, school nurses, physiotherapists, speech and language therapists) and school SENCOs. Community Health Children & Young People (CYP) Single Point Referral Form (SPOR): https://www.beh-mht.nhs.uk/downloads/Services/Community%20Health%20Children%20Young%20People%20Single%20Point%20Referral%20Form.docx Cedar House St Michaels Site Gater Drive Enfield EN2 0JB Tel: 020 8702 5630 Email: beh-tr.cssadminhub@nhs.net

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Paediatric Physiotherapy The service work with children, young people and their families to promote their physical independence, mobility and function, to help achieve their maximum potential. What we offer: • The physiotherapy service works with children, young people with a wide range of physical or mobility difficulties, resulting from neurological impairment, developmental delay, genetic disorders and musculoskeletal issues. • Paediatric physiotherapists use a variety of different approaches to work alongside children and their families, to help promote their overall development and physical wellbeing and participation in life. • The service aim is to help children, young people and their families develop the skills and knowledge to enable them to become as independent as possible with their mobility and in managing their difficulties throughout childhood and onwards into adulthood. • Key services include Assessment, advice and planning for children with musculoskeletal concerns • Assessment, care planning and equipment advice for children with a physical impairment, including working jointly with the wider multi-disciplinary team. • Training for parents, guardians, carers and other professionals to help them support their children with physical management plans and exercise programmes at home, school or other settings • Referrals into the orthotics service when appropriate • Referrals to other community and hospital-based services when appropriate Intervention can be offered individually or in groups. Children and young people may be seen via video consultation, in clinic and community settings, including children's homes. Covid -19 service compliance: During the Covid-19 pandemic outbreak the service introduced remote working around ensuring the service provided was a safe service in line with the government guidance around reducing the risk of Covid-19 transmission. For this reason, video consultations, where introduced as "Virtual First Approach", as recommended by the Charted Society of Physiotherapy. Following your video or telephone call, a joint decision between the family/ young person and their physiotherapist can be made as to whether any further input needed can be delivered remotely, or whether a face-to-face consultation is most appropriate.	Address: Cedar House St Michael's Primary Care Centre Gater Drive Enfield EN2 0JB Tel: 020 8702 5640 Email: beh-tr.physiotherapycommunitychild@nhs.net Core hours: Monday to Friday, 9am – 5pm How you can access our service: Referrals for children who live in Enfield or have a GP in Enfield are accepted. Referrals can be made by any relevant healthcare professional including school nurses, health visitors, hospital consultants and GPs. Please send all referrals to beh-tr.childrenstherapies@nhs.net

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Who the service is for: • Neurodevelopmental service: Children and young people aged 0-19 years old, with ongoing functional or mobility needs related to long term conditions. • Musculoskeletal Service: Children and young people aged 0-17 years old with musculoskeletal concerns. For some 16- and 17-year-olds, it may be more appropriate for them to be seen by the adult physiotherapy service and their referral may be forwarded to this team.	
Russet House Outreach Positive Behaviour Support for mainstream schools for individual children and young people so that they can put a PBS plan in place	Tel: 020 8350 0650
School Nursing Service Provides health advice on asthma, epilepsy, acute allergies, bed wetting, toilet training, behavioural or emotional difficulties, weight management and healthy lifestyles. As well as national vaccination programme and oral health programme (Flouride varnish twice yearly Nursery-Year1)	School nurses accept self-referrals from children or their families as well as referrals from school staff, social services, looked after children nurse specialists, child protection nurses, medical colleagues, and health visitors. Tel: 020 3988 7300 Email northmid.cedarsn@nhs.net. Community Health Children & Young People (CYP) Single Point Referral Form (SPOR) https://www.beh-mht.nhs.uk/downloads/Services/Community%20Health%20Children%20Young%20People%20Single%20Point%20Referral%20Form.docx

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Secondary Behaviour Support Service The Secondary Behaviour Support Service (SBSS) works in partnership with secondary schools in Enfield to prevent permanent exclusions, by supporting learners through an outreach and alternative provision service. Behaviour Support Service offer interventions in the form of groupwork. The groups are identified and chosen by schools and usually consist of up to 10 students and normally run for a duration of 6 weeks unless discussed previously with the school. The Outreach Service consists of learning mentors who work closely with children and young people, through one-to-one mentoring and group interventions. The Outreach Service also offers extra mentoring support to students who have been placed on managed moves. The service aims to support the transition to their new school and increase the chances of the managed move being successful. REACH is a programme designed for 8-10 Year 9 Learners that aims to change and modify behaviours and attitudes towards school, develop the learners' social, emotional and behavioural skills. It is a full-time 8 week long intervention followed by a 3-4-week transition back into school depending on the term length. The Alternative Provision Service offers advice and support to find alternative provision for students who are at serious risk of permanent exclusion, those who have already been permanently excluded, and students who are without a school place. This service works closely with Enfield secondary schools, the Pupil Referral Unit and the School Admissions Service. The Alternative Provision Service consists of two learning mentors. These mentors work closely with schools and provide one-to-one mentoring to students.	https://traded.enfield.gov.uk/thehub/information/secoondary-bss
Sensory Support Service for Hearing Impairment Access to Teachers of the Deaf. The service uses the National Sensory Impairment Partnership (NatSIP) framework to decide on the initial amount of support that each CYP will get. The level of support is reviewed and adjusted regularly, with input from the advisory teacher, families, carers and other professionals. Training course for school staff offered within the SEND/Inclusion Professional Learning programme.	All primary, special and secondary schools in Enfield have an allocated advisory teacher who will meet regularly with the special educational needs coordinator (SENCo), teaching staff and CYP. Tel: 020 8489 8338 Email: sensorysupport@haringey.gov.uk Information on the Enfield Local Offer: https://www.enfield.gov.uk/services/children-and-education/local-offer/education-5-to-18/sensory-impairment-support-at-school-and-college

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Simply Connect Enfield Simply Connect Enfield is a Social Prescribing service for the borough of Enfield, managed and delivered by Enfield Voluntary Action (EVA).	[Simply Connect Enfield - connecting you to your local community](#)
Special Educational Needs and Disability Information, Advice and Support (SENDIASS) **SENDIASS** **Centre 404** SENDIASS services provide information, advice and support to CYP with SEN and their parents. They provide impartial advice on the special educational needs system to help the children, their parents and young people to play an active and informed role in their education and care. Although funded by Local Authorities, SENDIASS Services are run either at arm's length from the local authority or by a voluntary organisation to ensure children, their parents and young people have confidence in them.	Self-referral for parents for independent support and advice Email: SENDIASSenfield@centre404.org.uk Tel: 07494 280063 Website: https://centre404.org.uk/
Special Educational Needs Service (statutory) The SEN service works in partnership with parents/carers, schools and professionals across education, health and social care. An Advisory Officer is allocated to each school to: be the main contact within the SEN service process a request for an Education, Health and Care Plan (EHCP) needs assessment co-ordinate and draft EHCPs, if an assessment is agreed manage and process Annual Reviews	Tel: 020 3821 1919 Email: sen@enfield.gov.uk
Special Educational Needs Service (non-statutory) **SEND/Inclusion Professional Learning** Schools can access all published courses. There are opportunities for SENCOs to network with other local SENCOs at SENCO conferences and termly Inclusion Briefings are also held. Schools subscribing to the programme have access to support from the Early Years Social Inclusion Team for one LASS (Language and Social Skills) group for Early Years and Primary.	Professional Learning Portal, The Hub, Enfield Council Website: https://traded.enfield.gov.uk/thehub/professional-learning-portal/send-inclusion Email: Smeeta.Modasia@enfield.gov.uk

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Specialist Nursing, Bereavement and Play Service We are a specialist service providing palliative care and Specialist assessment of children and young people's continuing care needs. We work closely with NCL CCG and make recommendations and facilitate commissioned packages of care or support the Personal Health Budget process. • Specialist Nursing assessment of Continuing Care needs with recommendations for commissioned support. • Case management of CYP with continuing care needs and palliative needs. • Specialist short breaks in the home • Bereavement support • End of life care • Play therapy • Provision of specialist equipment and supplies *Specialist Nursing* We provide specialist assessment and make recommendations for Children and Young People who have Continuing Care Needs and may need additional support at home, at school or in the Community. This support usually takes the form of commissioned Packages of Care but can also be delivered via a Personal Health Budget. As Specialist Nurses we also case manage health needs within the Community by working as the Child or Young Persona's Lead Professional, working closely with other Professionals supporting the Child in and outside of Enfield. We also receive referrals for Children who are palliative and take the Nursing lead on end of Life care in the Community. *Play and Bereavement* We provide and lead a quality play and bereavement service for children and young people age 0-19 and their families who are diagnosed with a life limiting or life threatening condition We assess the child/young people's play, development and emotional needs. We also support parents/carers to implement appropriate strategies for play as part of the child's overall care. We also offer pre and post bereavement support for their families. Working with any child/young person who have lost a parent/Sibling or has had a traumatic bereavement. I have developed and am the Chair Person for Little Sparks Enfield which runs alongside BEH-MHT providing the funding for all the sibling groups, families parties and outings, our one to one bereavement work and bereavement groups and our yearly family memory day.	Website: https://www.beh-mht.nhs.uk/services/specialist-nursing-bereavement-and-play-team/247

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
Speech and Language Service (School-age) Enfield School-age Speech and Language Service (Reception to end of Secondary) – Complete Speech and Language Service referral form submitted with the application for a statutory needs assessment of special educational needs. Speech and language clinical lead pathways e.g. developmental language disorder (Reception to end of Secondary) - Discussion with relevant Clinical Lead Speech and Language Therapist prior to submitting Speech and Language Service referral form. Speech and language health pathways e.g. speech sound problems and stammering (Reception to 18 years) – Complete and submit the Speech and Language Service referral form. Enfield Communication Advisory Support Service (ECASS) (Primary and Secondary Schools) - All schools can access the universal pathway within the 5 strands. Targeted schools can access universal and targeted offer from strands 1 - 4. Whole school training "An Introduction to Developmental Language Disorder" is available to all schools without charge from the Clinical Lead Speech and Language Therapist for DLD.	Referral from SENCO for specific pathways: https://www.beh-mht.nhs.uk/downloads/Services/School%20age%20speech%20and%20language/referral%20pathway%20dec%2019.docx For Clinical Lead/Health Pathways: https://www.beh-mht.nhs.uk/downloads/Services/School%20age%20speech%20and%20language/clinical%20lead%20flow%20chart%20dec%2019.docx Cedar House St Michaels Site Gater Drive Enfield EN2 0JB Admin Hub: 020 8702 6930 Email: beh-tr.cssadminhub@nhs.net

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
SWERRL Team **(Strengthening Wellbeing, Emotional Health, Relationships and Readiness for Learning** - formerly known as Primary Behaviour Support Service) Formerly known as the Primary Behaviour Support Service. This is a multi-disciplinary team working in partnership with schools and other services in Enfield. They support the improved inclusion of primary school children who are experiencing social, emotional and mental health (SEMH) difficulties using trauma-informed perspectives to understanding children's challenging behaviour and their troubled life experiences. SWERRL provides consultative and strategic input to develop SEMH sensitive practices in school with access to specialist support for parents and families alongside school-based interventions. This service is primarily commissioned to work at SEN Support and provides assistance with school-based assessment of SEMH needs, advice on school-based responses and planning for school-based management of needs, support for school-based interventions, which may include direct work with CYP, staff consultations and liaison with parents and training.	Parents/carers must have signed consent for involvement. Tel: 020 3855 5879 Email: Office.BSS@enfield.gov.uk
Youth Development Service The Youth Development Unit (YDU) is an educational service offering young people out of school educational activities, accredited learning opportunities and mentoring support via our five open access Youth Centres.	Website: Welcome to Youth Bubble and Inspiring Young Enfield (taptub.co.uk)
Waverley School Outreach Service Practice Support and modelling of inclusive classrooms and curriculum approaches e.g. shadowing opportunities in special schools and consultation at whole class/ group level (not individuals). Parent workshops. Training in Manual Handling, Self-care, Safeguarding for children and young people with physical and continence needs. Support for schools with managing complex needs accompanied by behaviours of concern which result in part-time timetables – particularly in the Early Years and Primary	Tel. 020 8805 4397 Email: l.bennett@waverley-sch.co.uk

Service, Service Lead and Summary of Service	Referral process / Website / Contact details
West Lea School Emotionally Based School Non-Attendance Provision, Home-Hospital Tuition and Attendance Support Unit ASU provision for approximately 30 students per annum from Year 7 to Year 11 (15 students at any one time). Outreach Support for pupils in Years 5 and 6 with EBSNA. Home-Hospital Tuition co-ordinated and delivered by a qualified teacher and tuition delivery by tutors.	Tel: 020 8807 2656 Email: Tuition-ASUreferrals@westleaschool.co.uk

Children, Young People and Education Scrutiny Work Programme

Date of meeting	Topic	Lead Officer	Lead Members	Director	Reason for proposal	Other committee/ Cabinet/Council approvals?
29 June 2022	Work Programme					
27 September 2022	Annual Safeguarding report	Bharat Ayer/ Sharon Burgess	Cllr Abdullahi	Tony Theodoulou	The Annual report is brought to this Panel for discussion.	
	Quality & consistency of school meals across the borough	Cheryl Headon	Cllr Abdullahi	Sue Nelson	This item was proposed by Councillor Thorp during the meeting	
	Self-Evaluation Framework (SEF)	Angela Bent	Cllr Abdullahi	Tony Theodoulou	Suggested item from Executive Director	
2 November 2022	School Attendance including the upcoming white paper, patterns, post-Covid and holidays to home countries	Jo Fear	Cllr Abdullahi	Peter Nathan	This was highlighted as priority for the Cabinet Member and was also proposed by Councillor Thorp	
	SEND places update on the creation of 100s more SEN places	Neil Best Barbara Thurogood	Cllr Abdullahi	Peter Nathan	This was highlighted as priority for the Cabinet Member	

	and build a new SEN school					
10 January 2023	Updates to be provided on the level of care places in the borough	Ramasasi Ramasubramanian	Cllr Abdullahi	Anne Stoker	This will be follow up following a national shortage of care places within the borough	
	Recruitment & retention of Social Workers, including the social work apprenticeships	Angela Bent	Cllr Abdullahi	Anne Stoker	This was highlighted as priority for the Cabinet Member	
	Recruitment & retention of Foster Carers	Debbie Michael	Cllr Abdullahi	Anne Stoker	This was highlighted as priority for the Cabinet Member	
23 March 2023	Information to be provided on the development of Family Hubs & Children's Centres	Ivana Price	Cllr Abdullahi	Anne Stoker	This was highlighted as priority for the Cabinet Member	
	Violence towards teachers the Panel wish to see data, patterns, intervention, safeguarding for staff	Sarah Fryer Paul Bishop	Cllr Abdullahi	Peter Nathan	This item was proposed by Cllr Thorp during the meeting	
	Youth Offenders	Ivana Price	Cllr	Anne Stoker	This item was	

	– activities to help stop reoffending, youth centres, cadets		Abdullahi		proposed by Cllr Islam during the meeting
	Safeguarding Enfield strategy consultation	Bharat Ayer	Cllr Abdullahi	Tony Theodoulou	The Safeguarding Adults Board currently has a strategy which the SAB will be reviewing and updating in 2023. As with the annual reports, we will be developing a joint strategy that covers Page 39 adults and children's safeguarding.

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