



Hillside Primary School & Nursery

Special Educational Needs and Disabilities (SEND) Policy Appendices

Email: office@hillsideprimary.co.uk

Website: www.hillsideprimary.co.uk

Approved by:	Governing Body	Date:
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Last reviewed on:	November 2023
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Next review due by:	Autumn Term 2025
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Appendix 1	SEND Referral Form
Appendix 2	Wellbeing Plan pro-forma
Appendix 3	Risk Assessment pro-forma
Appendix 4	Intimate Care plan pro-forma
Appendix 5	Assess, Plan, Do, Review Cycle
Appendix 6	Area of Need: Provision Maps

Hillside Primary School
SEND concerns referral form

Make a copy of this form then complete and return to NL – Mark EMAIL – SEND REF pupil name and class.

Pupil name:	Referrer Name:	Date discussed with parents:
Year:	Class:	Circle categories applicable.
DOB:	Date of Referral:	Early Help CP GIC EAL PP Forces
Attendance:	Area of <u>concern</u> :	C+I C+L SEMH Physical/Sensory

Early Years Attainment					
	Start of year	Current		Start of year	Current
List & Attn			Self conf		
Understanding			Man feelings		
Speaking			Make relationships		
Move & Handle			Reading		
Hth & self-care			Writing		
			Number		

Attainment and Progress Information KS1 & 2					
	Start of year	Current		Start of year	Current
Read			Maths		
Write			GPS		
RWI			PE		
Foundation sub			Science		

Phonics	Start of Year	Current
Phonics Screening result (KS1)		
Number of phonemes known		
Can child blend and segment?		
Digraphs known		
Reading Age		

**Hillside Primary School
SEND concerns referral form**

Indicate the difficulties the child has (please tick)						
Emotional		Phonics		Writing		Speaking
Social		Decoding		Maths		Fine motor
Behaviour		Comprehension		Memory		Gross motor
Confidence		Spelling		Processing		Aggression
Physical		Comprehension		Inference		Withdrawn

Wave 1 & 2 Support in Place (please tick) This is in addition to Quality first teaching				
Visual Prompts/ Dual coding / Now and Next		Phonics support		Gross Motor/Gym trail
Adapted tasks		Reading support		SALT/ WELLCOMM
Adapted input in lessons		Maths support		Individual Workstation
Brain breaks		Writing support		Precision teaching
Equipment including (adaptive/ technology)		Fine motor Intervention		Dyslexia strategies
Repetition/ Over-learning of new vocabulary		Zones of Regulation		Additional Processing time
Other (Please state)		Other (Please state)		Other (Please state)

**Details and Impact of Support in place so far. (please provide detailed examples of support and the impact that this has/not had.
Include standardised scores as relevant
e.g. If adapted input in lessons – explain what this looks like/ writing support – what does this look like?**

**Hillside Primary School
SEND concerns referral form**

Details of pupil strengths.

Discussion with SENDCO –
Date

Pastoral information

Support/Intervention	Historic/ Current	Who?	Interventions/ support in place.	Review - Impact of support/intervention
<u>Other</u> Agency Involvement				
Attendance concerns.				
Safeguarding concerns				
Other relevant information				

APDR Cycle 1 Start Date:

Finish Date:

Support/Intervention	Frequency	Who?	Expected Outcome	Review - Impact of support/intervention

Hillside Primary School
SEND concerns referral form

APDR Cycle 2		Start Date:	Finish Date:		
Support/Intervention	Frequency	Who?	Expected Outcome	Review - Impact of support/intervention	

ASSESSMENTS	Date	Pupil DOB/Age	Outcome/ Age	Intervention
Salford Reading Age				
Helen Arkell: Spelling age assessment				
BPVS				
Renfrew				
PHaR				
WELLCOMM				
Sandwell KS1 Maths				
Sandwell KS2 Maths				
GL Ready Dyslexia screening				
Boxall Profile				

Next Steps:

- ISMs
- Solution Circle
- Inclusion Referral
- ND Pathway
- ECHNA
- Specialist setting

Wellbeing Plan – Name/Yr.

<p>Pupil Photo</p> 	<p>What I want adults to know.....</p>	<p>My EAAs are.....</p>
<p>How you can help me.....</p>	<p>I like.....</p>	<p>What I find difficult.....</p>

PROTECT

What we might see...

Name typical behaviours/presentation of pupil

Strategies

List strategies and provision to support access to education



RFI ATF

What we might see...

Name typical behaviours/presentation of pupil

Strategies

Emotionally Available Adult to support social engagement system

Affect Attunement/ Loud Empathy – Meeting the child's emotional intensity (positive or negative) on an energetic level – fuels connection

Playfulness – adult-child interactions to promote connection

Acceptance – Adult acceptance of needs and emotions without judgement

Curiosity – Will you help me understand what they felt like for you?

Empathy – Adult naming and recognising the child's emotions.

LIST ALL STRATEGIES AND PROVISION. State the role of the adult.



REGULATE

What we might see...

Name typical behaviours/presentation that might be seen if pupil is becoming dysregulated

Strategies

Emotionally Available Adult to support moving from social defence system to social engagement system.

Adult to use voice, face and gesture to convey social engagement.

Affect Attunement/ Loud Empathy – Meeting the child's emotional intensity (positive or negative) on an energetic level – fuels connection

Minimal adult language.

Use regulation spaces – The Bubble/Outside/Tent. Ensure Pupil knows where he can go when feeling dysregulated.

Provide sensory equipment when in regulation space (see resource list).

Provide opportunities to run, use clay, use drums (see resource list). Playful distraction can support pupil-to regulate.

Provide reassurance by being present. Ensure safety by maintaining distance if appropriate.



REPAIR/REFLECT

What we might see...

Access to EAA.

Access to a space where pupil feels safe (inside or outside)

Be aware of and provide for pupil physiological needs – tiredness, hunger, thirst and the need for a physical comforter.

Adult: Will you help me understand what you were feeling then? How it felt when X happened?

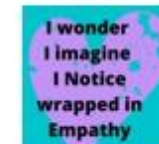
Adult: Use WINE – I wonder if..., I imagine..., I notice.....

Adult: Use a rich, evocative emotional language to label emotions to support connection.


When pupil is calm – 'Let's think together about what might be best to do now. Visual representations can support pupil to reflect.

TIS Practitioner: Big Empathy Drawing, Sand Tray or Clay – indirect expression/direct expression.

EAA: Provide time and the opportunity for an activity before moving on, e.g. mindfulness, yoga, deep breathing, listening to music or soundscape.



	Individual Pupil Risk Assessment	
Name:		

 **Summary of Need:**
 Profile of Child: ASD, ADHD, Child has experienced some adverse childhood experiences (ACES) which can affect his behaviour. Child is impulsive and operates on strong primitive instincts (fight, flight, freeze) when dysregulated.

This pupil has a positive behaviour support plan; this document should be read alongside this individual risk assessment.

This document relates to the Behaviour and Exclusion policies. A copy of these can be requested from the school office.

Risk Assessment

Prepared by: Miss Sendco	Assessment Date: 01/09/2022	Review Date: 31/10/20227 This plan will be reviewed after incidents
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Types of hazard(s) identified (assuming no controls)	Who is at risk and how?	Likelihood X (1-5)	Severity (1-5)	Risk Rating LMH	Risk Reduction Measures In Place	Do controls reduce the risk to an acceptable level?
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<p>Not following adult instructions in the learning environment <i>CHILD refuses to comply with adult instruction often shouting 'no' or moving to a different space. This behaviour can escalate to other behaviours listed in this plan.</i></p>					<ul style="list-style-type: none"> • 	
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<p>Self-exiting the classroom/learning space and running around the school building <i>CHILD regularly self-exits the classroom when distressed and will run around the school building. He will often look for an exit to the outside. He will also hide from adults, often in small gaps/spaces.</i></p>					<ul style="list-style-type: none"> • 	
<p>Verbal Aggression <i>CHILD regularly swears at adults and uses threatening and insulting language towards adults when distressed. This often results in refusal to comply with instructions.</i></p>					<ul style="list-style-type: none"> • 	
<p>Physical aggression towards staff – hitting/punching <i>This behaviour is directed at staff</i></p>					<ul style="list-style-type: none"> • 	

<p>Physical aggression – kicking <i>This behaviour is directed at staff</i></p>					<ul style="list-style-type: none"> • 	
<p>Physical aggression – throwing objects <i>CHILD will throw items across the room if his emotions are heightened. This has included equipment such as mini whiteboards and chairs. This is usually during a work task situation.</i></p>					<ul style="list-style-type: none"> • 	
<p>Physical aggression – spitting <i>When dysregulated, CHILD can spit at others</i></p>					<ul style="list-style-type: none"> • 	
<p>Leaving the school site <i>CHILD often refers to wanting to leave the school site and will try to climb the boundary wall/fences. He has on one occasion left the school site.</i></p>					<ul style="list-style-type: none"> • 	
<p>Property destruction or damage <i>CHILD will rip up work, rip displays, swipe objects off tables/storage areas, kick or hit furniture, tip over chairs</i></p>					<ul style="list-style-type: none"> • 	
<p>Climbing trees on the school site <i>When distressed, CHILD will often climb and sit in a tree within the school grounds</i></p>					<ul style="list-style-type: none"> • 	

Inappropriate behaviour on school trips						
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Signatures

Parent:	Class Teacher:	SLT:
Date:	Date:	Date:

Descriptor Matrix												
Severity	1 = Trivial injury - Minor bumps and bruises	2 = Minor Injury – cuts, first aid required	3 = Moderate injury - sprains, strains, hospital referral	4 = Major injury – broken bone, loss of a digit, unconsciousness	5 = Death, debilitating injury (incl. psychological)	Overall Risk Rating = Severity x Likelihood						
Likelihood	1 = May only occur in exceptional circumstances	2 = It is unlikely to, but could, occur at some time	3 = Fairly likely to occur at some time, or in some circumstances	4 = Will probably occur at some time, or in most circumstances	5 = It is expected to happen in most circumstances							
Risk Rating	Unacceptable = Stop activity and take immediate action	High = Take immediate action, stop activity if necessary, maintain existing controls	Medium = Improve within a specific timescale	Low = Seek to improve at the next review or if there is a significant change	Trivial – No further action but ensure controls are maintained and reviewed							
						Likelihood	5	5	10	15	20	25
							4	4	8	12	16	20
							3	3	6	9	12	15
							2	2	4	6	8	10
							1	1	2	3	4	5
						Severity						
						1	2	3	4	5		

Process				
Review Date	By Whom	Changes Made to Risk Assessment	Shared with:	Signature

Risk Assessment Action Plan

Hazard	Do you need to do anything else to control this risk?	Who will action	Date to be actioned by	Checked by
				Name: Signature: Date:
				Name: Signature: Date:
				Name: Signature: Date:
				Name: Signature: Date:
				Name: Signature: Date:
				Name: Signature: Date:

Appendix 5: Assess, Plan, Do Review Cycles

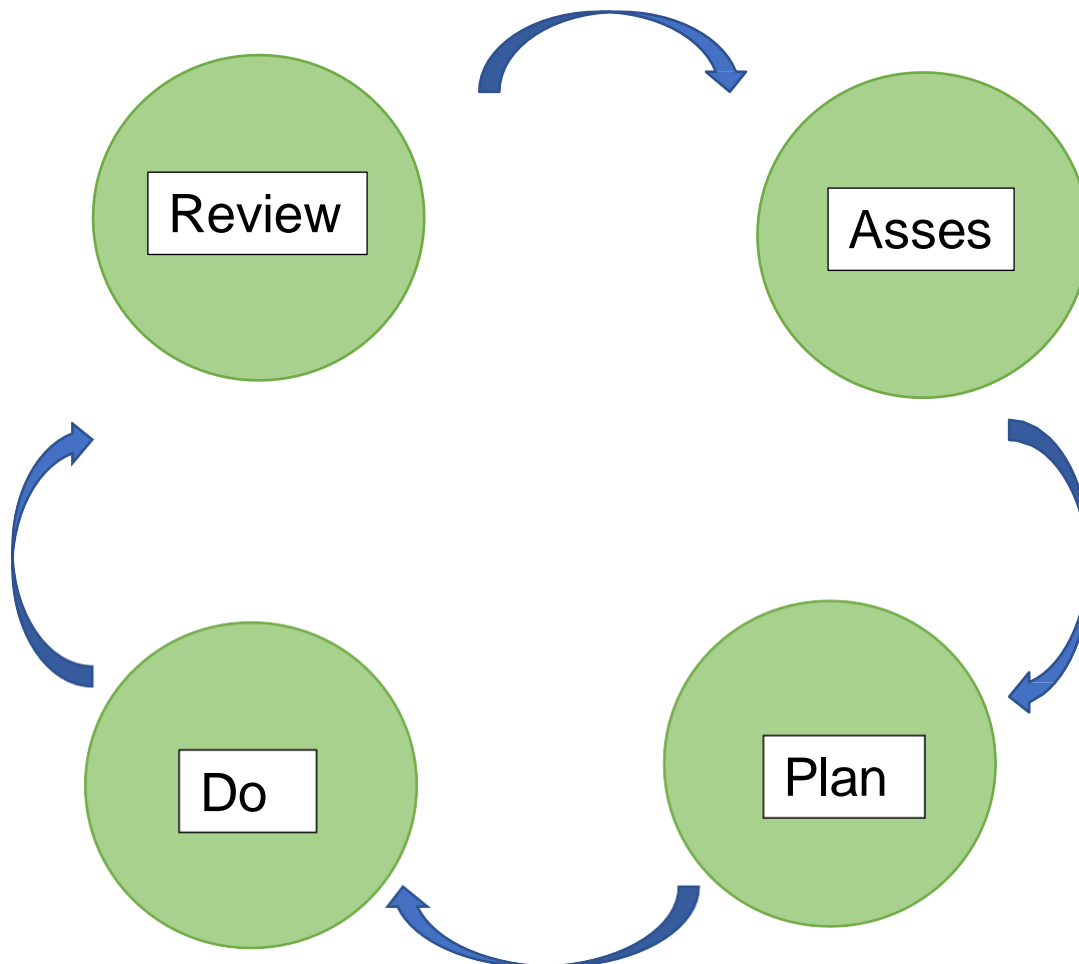
SEND – Assess, Plan, Do Review Cycle – Autumn Term

Week 14:
 Review the implemented the individual support plan or provision map. What progress has been made? Use the live record, books, observations, behaviour logs, summative assessments to complete the review.
 Meet with parents and pupil to discuss the review and next steps.
 Share paperwork with SENDCO and Pupil Needs Mentor and raise any concerns with them.
 The review of the outcomes and the provision should inform the next steps for the individual support plan or provision map.

Week 4 - 13:
 Implement the individual support plan or provision map.
 Keep a live record (at least monthly) on the individual support plan. Use observations, books, questioning and summative assessments to monitor progress over the term.
 Discuss any concerns with the SENDCO/Pupil Needs Mentor.
 Regularly liaise with the parents to inform them of progress.
 If provision includes any intervention, liaise directly with intervention lead for progress information.

Week 1-3: Collect information, formative assessment (observation, books, questioning, parent voice, pupil voice, transfer information), summative assessment (over time)
 Week 2 and 3: Attend SEND Drop-in
 Consider provision needs

Week 3:
 Draft an individual support plan or provision map for identified pupils.
 Show SMART outcomes, which can be achieved over a term.
 State all provision required to support the pupil to meet this outcome (class based and school based).
 Share documentation with parents and pupil.
 Share with SENDCO and Pupil Needs Mentor.



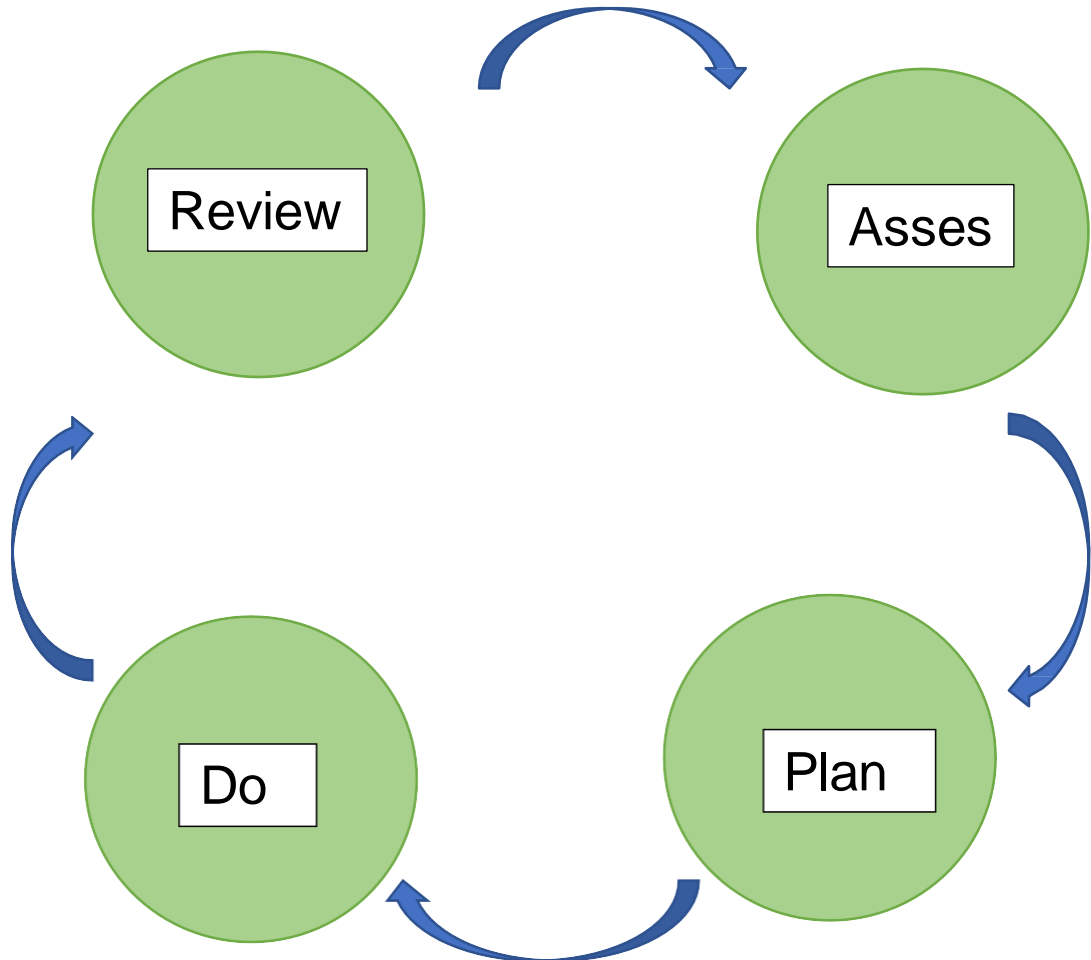
SEND – Assess, Plan, Do Review Cycle – Spring Term

Week 12:
Review the implemented the individual support plan or provision map. What progress has been made? Use the live record, books, observations, behaviour logs, summative assessments to complete the review.
Meet with parents and pupil to discuss the review and next steps.
Share paperwork with SENDCO and Pupil Needs Mentor and raise any concerns with them.
The review of the outcomes and the provision should inform the next steps for the individual support plan or provision map.

Week 3 - 11:
Implement the individual support plan or provision map.
Keep a live record (at least monthly) on the individual support plan. Use observations, books, questioning and summative assessments to monitor progress over the term.
Discuss any concerns with the SENDCO/Pupil Needs Mentor.
Regularly liaise with the parents to inform them of progress.
If provision includes any intervention, liaise directly with intervention lead for progress information.

Week 1: Use the review and all assessment data (formative and summative) gathered over the previous term to inform the assessment stage.
Week 1 and 2: Attend SEND Drop-in
Consider provision needs

Week 2:
Draft an individual support plan or provision map, based on the review, for identified pupils.
Show SMART outcomes, which can be achieved over a term. Consider whether these outcomes can be broken down or can be extended.
State all provision required to support the pupil to meet this outcome (class based and school based).
Share documentation with parents and pupil.
Share with SENDCO and Pupil Needs Mentor.



Week 11-13:

Review the implemented the individual support plan or provision map. What progress has been made? Use the live record, books, observations, behaviour logs, summative assessments to complete the review.

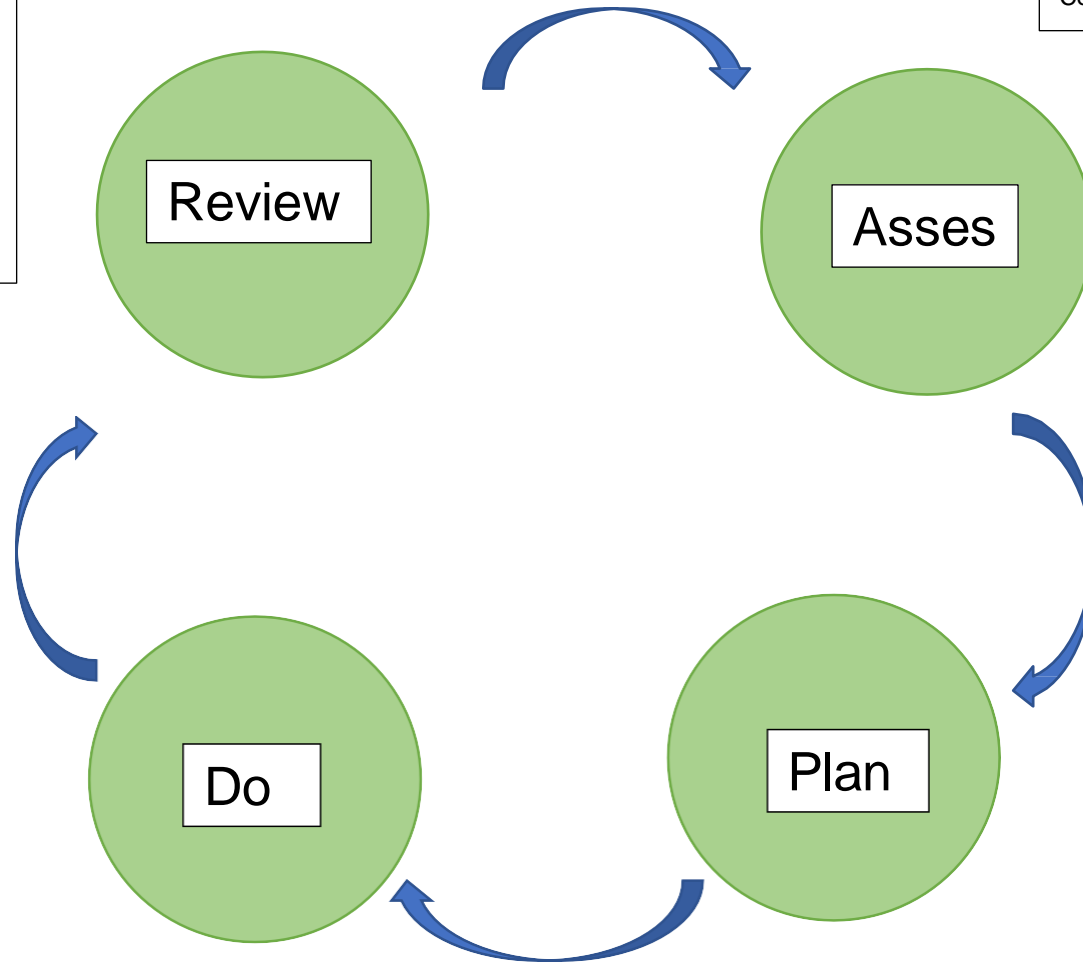
Hold a transfer meeting with the pupil's next teacher. Discuss needs and provision.

Meet with parents, pupil and new class teacher to discuss the review and next steps.

Share paperwork with SENDCO and Pupil Needs Mentor and raise any concerns with them.

The review of the outcomes and the provision should inform the next steps for the individual support plan or provision map.

SEND – Assess, Plan, Do Review Cycle – Summer Term



Week 1: Use the review and all assessment data (formative and summative) gathered over the previous term to inform the assessment stage.

Week 1 and 2: Attend SEND Drop-in
Consider provision needs

Week 3 - 10:

Implement the individual support plan or provision map.

Keep a live record (at least monthly) on the individual support plan. Use observations, books, questioning and summative assessments to monitor progress over the term.

Discuss any concerns with the SENDCO/Pupil Needs Mentor.

Regularly liaise with the parents to inform them of progress.

If provision includes any intervention, liaise directly with intervention lead for progress information.

Week 2:

Draft an individual support plan or provision map, based on the review, for identified pupils.

Show SMART outcomes, which can be achieved over a term. Consider whether these outcomes can be broken down or can be extended.

State all provision required to support the pupil to meet this outcome (class based and school based).

Share documentation with parents and pupil.

Share with SENDCO and Pupil Needs Mentor.

Communication and Interaction Provision Map			
Universal - ALL	Targeted - SOME	Bespoke - FEW	Specialist - FEW
<p>Quality First Teaching</p> <ul style="list-style-type: none"> • Promoting a language rich environment • I do, we do, you do approach • Clear learning intention shared • Clear steps to success to meet the learning outcome • Break-down learning into manageable steps. • Provide worked examples and models of the learning to aid the pupil's understanding <ul style="list-style-type: none"> • Communication Friendly Environment • Visual Timetable • Use of Symwriter visuals <p>Repetition and opportunities for over-learning new vocabulary</p> <p>Clear and consistent feedback</p> <p>WELLCOMM language assessment and groups in EYFS</p> <p>CUSP/CLUSP curriculum: development of oracy skills, vocabulary and general language development</p> <p>Visual timetable</p>	<ul style="list-style-type: none"> • WELLCOMM language assessment and groups in targeted year groups. • Individual referral to Communicate Speech and Language Therapy. Advice and guidance provided. • Use of Now/Next chart • Cue the pupil into receiving instructions and key information by using their name. • Provide targeted worked examples and models of the learning to aid the pupil's understanding • Ensure processing time is provided. • Individual Zones of Regulation charts • SEND Team: targeted assessment of communication needs • Use of a recording device • Provide visual means to request help. Additional scaffolding based on language development, e.g., word banks • Use of Blank Level Questions, as advised by SENDCO/Communicate • Deployment of Learning Support Assistant to support access to the curriculum. • Implementation of a wellbeing plan to document key approaches to communication, e.g. I wonder, I notice, I imagine • Time-limited communication groups, based on advice from Communicate. • Implementation of social stories for key events/situations • Movement breaks 	<ul style="list-style-type: none"> • WELLCOMM language assessment and groups – specific to individual needs • Individual referral to Communicate Speech and Language Therapy. Pupil added to caseload. • Referral to Specialist Education Services (SES) Communication and Interaction Team and Speech, Language and Communication Need Team. • Implementation of SES Communication and Interaction Inclusion Plan • Use of bespoke visual aids, e.g. This is the deal, visual work schedules, 5 point scale • Provide appropriate worked examples as a model. • Use of Picture Exchange Communication System (PECS)/ Makaton • Use of TEACHH approach – red/green baskets/ workstation etc. 	<ul style="list-style-type: none"> • Request submitted for an Education, Health and Care Plan (EHCP) and Educational Psychology Advice • Referral to NHS Speech and Language Services • Referral to Neuro Developmental Pathway • Referral to Occupational Therapy • Referral to Community Paediatrician/Audiology via the GP • Referral to external specialist advisor • Ensure all planning and pupil documentation is shared with relevant staff, pupil and parents/carers.

<p>Use of concrete resources and visual aids</p> <p>Dual coding of key teaching concepts/knowledge</p> <p>Modelling language</p> <p>Increase non-verbal gestures to support communication and language skills</p> <p>Opportunities for collaborative working and peer interaction planned into lessons, with teacher modelling and explicit instruction of social skills</p>		<p>Implementation and review of a wellbeing plan to document key approaches to communication and co-regulation, e.g. I wonder, I notice, I imagine, PACE</p> <p>Targeted work relating to phonological awareness skills</p> <p>Direct Work: Colourful Semantics</p> <p>Extended communication group/1:1 based on advice from Communicate</p> <p>Referral to ELSA for targeted work, e.g. friendship groups</p>	
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<p>Zones of Regulation</p> <p>Ensure all planning is shared with relevant staff</p>	<p>Additional transition arrangements</p> <p>Ensure all planning and pupil documentation is shared with relevant staff, pupil and parents/carers.</p>	<p>regulation</p> <p>Transition booklets – co-produced</p> <p>Ensure all planning and pupil documentation is shared with relevant staff, pupil and parents/carers.</p>	
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Cognition and Learning Provision Map

Universal - ALL	Targeted - SOME	Bespoke - FEW	Specialist - FEW
<ul style="list-style-type: none"> ○ Quality First Teaching: ○ Use AFL to plan accessible sequential lessons using curriculum resources ○ Clear learning outcomes shared with the children <p>Revisit prior learning and deliver new learning in manageable steps.</p> <p>Provide visual support, concrete resources and learning aids</p> <p>Personalized and differentiated questioning</p> <p>Modelling: I do, we do, you do approach</p> <p>CUSP/CLUSP curriculum: development of oracy skills, vocabulary and general language development</p> <p>Reference to knowledge notes.</p>	<p>Provide targeted worked examples and models of the learning to aid the pupil's understanding</p> <p>Ensure processing time is provided.</p> <p>Use of Symwriter visuals</p> <p>SEND Team: targeted assessment of cognition and learning needs</p> <p>Use of a recording device</p> <p>Provide visual means to request help.</p> <p>Deployment of Learning Support Assistant to support access to the curriculum.</p> <p>Use of visual work schedules to promote independence</p> <p>Accessible questioning to support understanding</p>	<p>Referral to Specialist Education Services (SES) Cognition and learning Team.</p> <p>Implementation of SES Cognition and Learning Inclusion Plan</p> <p>Use of bespoke intervention packages as directed by SES.</p> <p>Use of technology, such as Clicker.</p> <p>Provide appropriate worked examples as a model.</p> <p>Bespoke curriculum offer - timetable, adult deployment</p> <p>Pre-teaching and post-teaching</p> <p>Use of TEACHH approach and visual aids to support organization and independence</p> <p>Targeted work relating to phonological</p>	<p>Request submitted for an Education, Health and Care Plan (EHCP) and Educational Psychology Advice</p> <p>Annual review and consideration of specialist cognition and learning placement</p> <p>Referral to Neuro Diverse Pathway</p> <p>Referral to external specialist advisor</p>

<p>Opportunities for collaborative working and peer interaction</p> <p>Clear and consistent feedback</p> <p>Calm and purposeful learning environment (dyslexia-friendly environment)</p>	<p>Read, Write Inc. Boosters/Reading fluency 1:1</p> <p>Additional transition arrangements</p>	<p>awareness skills</p> <p>Transition booklets – co-produced</p> <p>Referral to Educational Psychology Services</p>	
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Social, Emotional and Mental Health Needs			
Universal Support	Targeted Support	Personalized Support	Specialist
<ul style="list-style-type: none"> • High Quality Teaching • Meet and Greet – all transitions • Clear and consistent boundaries • Positive recognition systems • Celebration assemblies • Opportunities for team building exercises within the curriculum • Cyclical PSHE Curriculum focused on statutory relationships curriculum • Implementation of a restorative behaviour policy • Observations and monitoring of social and emotional wellbeing development • Worry Boxes/Opportunities to share concerns and worries with a trusted adult • Emotional check-in (class based) from all staff as Emotionally Available Adults • General signposting – 	<ul style="list-style-type: none"> • Targeted and responsive PSHE Lessons • Trauma Informed Practice – co-regulation strategies, mindfulness activities, sensory breaks. • Developed use and review of a wellbeing plan – over 2 terms • Agreed breaks from academic curriculum – use of break-out spaces • Planned support from ETA (Emotional Literacy Support Assistant) • Wishes and feelings – pupil voice work • Peer group support – anti-bullying policy • Boxall Profile assessment and activities scheduled into pupil's timetable – group based • Additional visual aids, e.g. 5-point scale, zones of regulation • Use of workstations • Access to a Family Support Worker. 	<p>Trauma Informed Practice (TIS) activities such as Sand tray and Big Empathy Drawings, School Bonding Questionnaire</p> <p>Access to an additional adult at specific times during the day to support access, co-regulation, safety and independence</p> <p>Wellbeing check-ins weekly/daily</p> <p>Strengths and Difficulties Questionnaire to provide further information for possible referrals</p> <p>Desty Emotional Resilience Sessions with a member of trained pastoral staff.</p> <p>NHS Anxiety workshop – delivered in school – 1:1 or small group</p> <p>Follow up peer support group (anxiety)</p> <p>Discrete and individual teaching relating to anger, bereavement, anxiety and self-esteem, routines and resilience.</p> <p>Referral to alternative provision external to school and In-Year</p>	<p>When specialist agencies are involved, the school will liaise with the family and the specialist agency and professionals, so that school attendance, safety, academic and social and emotional access is supported and maintained, from a school perspective. Where medication is provided, this will form part of an individual healthcare plan.</p> <p>If a pupil attending the school is discharged from a specialist support agency/professional, the school will work with the family to implement support at a school level, appropriate to the need and reflecting the personalized, targeted and universal support offer documented.</p>

<p>SENDIASS information, Online safety, parent workshops</p> <ul style="list-style-type: none"> • Before/ after school clubs • One-page profile for transition 		<p>Access Protocol (IYAP)</p> <p>The following referrals may be considered: Early Help, Letter to GP, School Nurse, Emotional Wellbeing Hub, Educational Psychologist, Inclusion Facilitator, PCSO, Diversion, Education Welfare Officer, Specialist Education Services – including inclusion surgeries, referral to Primary Mental Health Worker</p> <p>Signposting to agencies/charities that can provide support, e.g. Cruse (Bereavement)</p> <p>Individual transition plans</p>	
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What is available locally?



The Emotional Wellbeing Hub provides information, advice, and guidance to families and young people in East and West Suffolk, who are worried about the mental health of a child or young person aged 0-25 years, or if you're a young person experiencing emotional wellbeing difficulties.

You can make a referral to the Emotional Wellbeing Hub to access CAMHS (Children and Adolescence Mental Health Services).

This website provides more information:



<https://www.suffolk.gov.uk/children-families-and-learning/children-and-young-peoples-mental-health-and-emotional-wellbeing-support/suffolk-children-and-young-peoples-emotional-wellbeing-hub/>

Other Local Services

<https://www.wellbeingnands.co.uk/suffolk/>

This website provides information for people over the age of 16 who need support around their mental health.

<https://www.suffolkmind.org.uk/>

Suffolk Mind provide support and information on a range of subjects related to positive mental health.

<https://www.healthysuffolk.org.uk/projects/5-ways-to-wellbeing>

This website provides information and case studies on wellbeing.

<https://www.suffolklibraries.co.uk/advice/health-and-wellbeing>

This website provides information from Suffolk libraries about mental health and wellbeing support within Suffolk.

What is available nationally?

There are links below to websites that may be of interest.

www.samaritans.org

www.youngminds.org.uk

www.actionforhappiness.org

www.annafreud.org

www.childline.org.uk

www.kooth.com

www.minded.org.uk

<https://www.nhs.uk/conditions/stress-anxiety-depression/improve-mental-wellbeing/>

<http://mentalhealthatwork.org.uk>

<http://mindfulteachers.org>

<https://www.educationsupport.org.uk/helping-you/telephone-support-counselling>

Sensory and Physical Needs Provision Map

Universal - ALL	Targeted - SOME	Bespoke - FEW	Specialist - FEW
<p>Quality First Teaching</p> <p>Clear learning outcomes shared with the children verbally and visually</p> <p>Clear steps to success to meet the learning outcome shared with the children verbally and visually</p> <p>Accessibility plan in place for school</p> <p>Real-life sensory experiences built into planning throughout the curriculum</p> <p>Specific fine motor activities planned within EYFS and key stage 1 appropriate to universal needs of the pupils.</p> <p>Targeted planning to support universal handwriting development</p> <p>Teaching and modelling of tripod pencil grip</p>	<p>Access to alternate recording devices</p> <p>Use of adapted equipment, e.g. wobble cushion, writing slope, coloured overlays etc.</p> <p>Enlarged font on written materials</p> <p>Individual movement/sensory breaks</p> <p>Individual Intimate Care Plan</p> <p>Individual Health Care Plan</p> <p>Individual Provision Map detailing the primary need and any relevant medical information. This document maps out the provision within the classroom and the school environment</p> <p>Seating position adapted to meet the needs of the individual learner.</p> <p>Targeted provision to support fine and</p>	<p>Individual referral to Occupational Therapy Services.</p> <p>Referral to Community Paediatrician/Audiology/Eye Clinic via the GP</p> <p>Referral to Specialist Education Services (SES) Sensory and Physical Needs Team.</p> <p>Implementation of SES Sensory and Physical Inclusion Plan</p> <p>Sensory Circuits - individual plan</p> <p>Adapted seating, arm rests and equipment within the classroom or wider school as advised by medical professionals or specialist education services</p> <p>Application for additional time/access in formal assessments.</p>	<p>Request submitted for an Education, Health and Care Plan (EHCP) and Educational Psychology Advice</p> <p>Referral to external specialist advisor</p> <p>Implementation of specialist training, planning and adaptations informed by medical professionals</p>

<p>Use of adapted pencil grips and scissors</p> <p>Adaptations to technology ,e.g. background colour of interactive whiteboard</p> <p>Teaching resources selected for clarity and accessibility</p> <p>Whole class movement breaks</p> <p>Teacher considers methods of communication, classroom layout and organization to remove barriers to learning</p> <p>Reference to the School's intimate Care Policy</p> <p>Reference to the Schools' policy: Supporting Pupils with Medical Needs</p> <p>Opportunities for peer collaboration within learning</p> <p>Universal health checks for hearing and vision</p>	<p>gross motor skills development</p> <p>Targeted handwriting provision within class</p> <p>Targeted sensory circuit provision with PE lessons and whole class learning</p> <p>Targeted sensory resources, e.g. chewelry, fidget tools</p>	<p>Individual arrangements for SATs</p> <p>Additional planning and arrangements for transition and movement around the school.</p> <p>Audit of the classroom and school environment related to individual needs. Implementation of any identified environmental changes.</p>	
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