

Children's and Young People Services

Guidance for Post 16 Young People with SEND

Implementation of the Ranges in Post 16 settings



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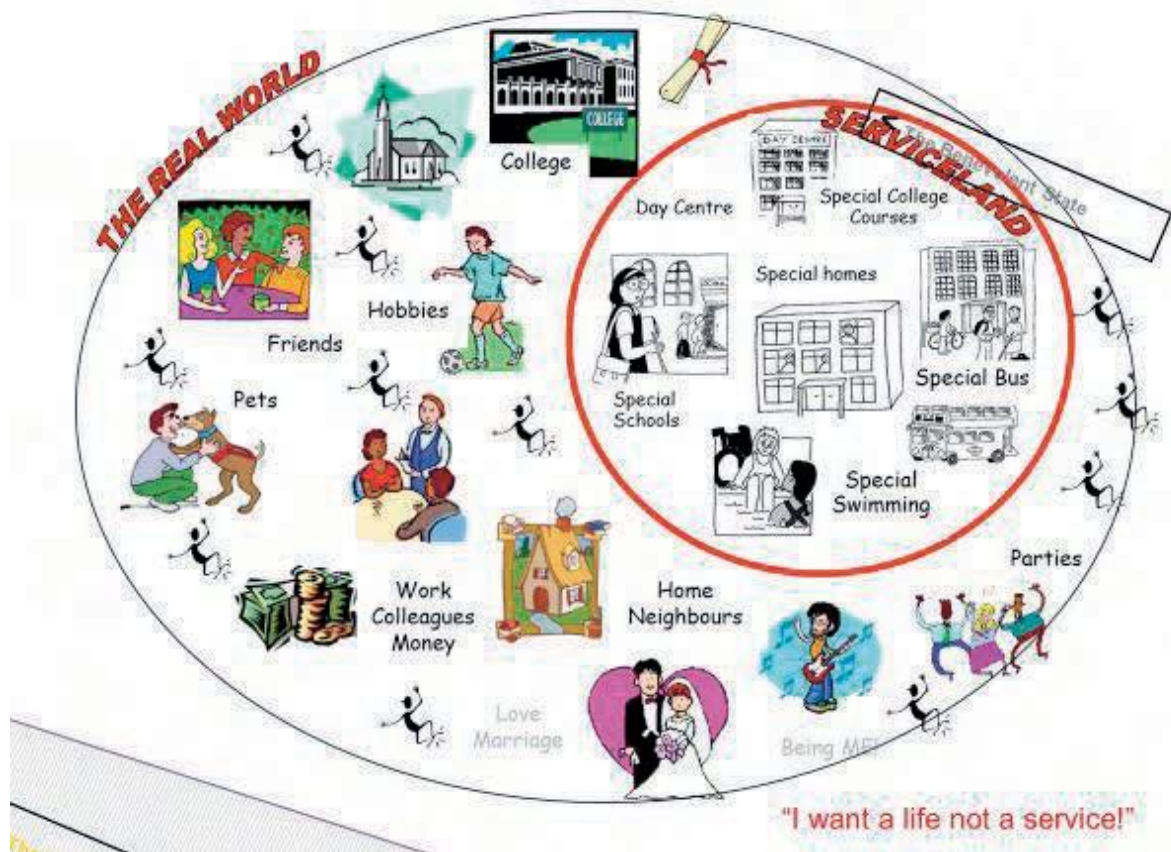


Page Contents

3	Implementation of the Ranges in Post 16 settings
5	Statutory duties placed on colleges
6	Graduated Response in the post 16 setting
7	Meeting needs and recording progress
8	Supporting SEND in Post 16 settings including colleges
9	Careers Guidance
10	What next?
11	Funding for SEND Support
12	Using the Guidance to Support Learning
15	Cognition and Learning
20	Communication and Interaction Needs – Autism Spectrum
22	Sensory and/or Physical Needs
29	Hearing Impairment
31	Dual Sensory Need
33	Vision Impairment
36	Social, Emotional and Mental Health Needs
43	Communication and Interaction Needs – Speech, Language and Communication Needs

Implementation of the Ranges in Post 16 settings

Preparation for Adulthood (PfA) should start in the Early Years and continue as a 'golden thread' through primary and secondary settings. It will be particularly important for the Post 16/19 sector to build on what has been learnt and experienced before in the PfA Outcomes and to ensure that these are fully developed and explored appropriate to the needs of the young person and their wishes.



Talking to young people and particularly those with SEND; it is apparent that they want all the things that every young person wants – a lifestyle that they can enjoy. The diagram above illustrates what young people have told us – “I want a life not a service!” So, the provision and opportunities regardless of the complexity of the needs of the young person should reflect all those areas that are in ‘The Real World’. To have friends and a social life is pivotal to emotional wellbeing and therefore our ‘curriculum’ which is everything we do, must give opportunities and creative ways in which young people can have friendship groups, access leisure facilities, and become more independent both in their provision but also in their local community.

The Post 16/19 Ranges therefore have a focus on PfA outcomes alongside the specific area of need. This is not exclusive to that need as most young people with SEND will have many needs that span most of the areas of the SEND Code of Practice. We also recognise that some young people will have significant complex needs and some less complex so the PfA outcomes will need to be implemented alongside the wishes of the young person which are pivotal, family views and the judgements of those professionals working with the young person. However, this gives an excellent framework to develop a realistic programme that will support the young person into adulthood. The framework will also support families to focus on those areas which are most important to their child and to give a common dialogue with professionals who are working alongside them.

The outcomes can be measured using a combination of quantitative and qualitative data and should be recorded on a provision map. Together for Children have an electronic provision map which needs to be completed to show the interventions, impact, and outcomes alongside the costings. Specific guidance will be available to show how this will need to be completed.

The most important and pivotal aspect of the PfA work will be the involvement of the young people themselves. Professionals will need to think creatively how to ensure that all their students/employees (if in the workplace) views, feelings and wishes are listened to and acted upon on a regular and systematic basis.

This guidance document aims to provide parents and carers of young people aged 16-25 with Special Education Needs and Disabilities (SEND), attending Post 16 Providers in Rotherham Council, with what they can expect as a minimum standard. When a young person reaches the age of 18, providing they have mental capacity, involvement of parent/carers does change but remains individualised. This needs careful consideration.

Every young person has the right to expect a good education, and the support they need to become independent adults and succeed in life.

In addition to this guidance document, you may wish to access the Rotherham Council Local Offer which sets out clearly what support is available from specialist services, and how to access it.

Once over compulsory school age, many young people with SEND move into further education (FE), such as FE and sixth form colleges and 16-19 academies or access alternative work-based providers. It is important that the young person's chosen provider becomes involved in their plans as they prepare to leave school so the provider can be prepared to meet their needs. This is often called 'Transition'. The young person should be given a chance, before they start at their new setting, to talk about their needs or disability, and how this might affect their learning. This will enable the provider to explain how they might be able to provide the right levels of support.

Statutory duties placed on colleges

Whilst this is not a legal document, it is based on the various acts, regulations and guidance. The Children and Families Act 2014, and the Special Educational Needs and Disability Regulations 2014 were introduced and came into effect from 1st September 2014.

The Government published the 0-25 Special Educational Needs and Disability Code of Practice 2014 (0-25 SEND Code of Practice) which all Local Authorities and service providers across education (including colleges), health and social care, have a legal duty to follow.

As part of the Children and Families Act 2014 all colleges MUST:

- Co-operate with the Local Authority on arrangements for young people with SEND. In Rotherham Council we have asked all providers to prepare and publish their own “Local Offer” which aims to explain how they can support young people with SEND.
- Admit the young person, if the provider is named on their Education, Health and Care (EHC) Plan.
- Comply with the 0-25 Special Educational Needs and Disability Code of Practice 2014 (0-25 SEND Code of Practice).
- Ensure the provider does their best to plan for and secure the special educational provision.

Ensuring young people’s positive outcomes – arrangements for assessing their needs

Every young person has individual needs requiring varying levels of support that need to be planned for - this is sometimes called a Graduated Response.

Graduated Response in the post 16 setting

The young person's chosen provider should help them to achieve their best. The provider will discuss and agree which course will best enable them to be more independent, find a job or whatever they choose to do next. When they start, the provider will help to set aspirational goals for the young person, in order for them to achieve the best possible outcome in their adult life – this is often called Preparing for Adulthood (PfA) (Chapter 7 SEND Code of Practice).

The provider must do its best in order to give the young person the support they need through an individual assessment. This will be provided through SEND Support. The provider may refer to this as SEND Support Stage. If, through discussions, the provider feels the young person might benefit from SEND Support, the provider will ensure the young person is kept involved throughout the planning process, updating with progress made.

When a young person reaches 18 and has mental capacity, it is their choice as to who else is kept updated on progress. SEND Support is part of what is known as the 'graduated approach'. Any support offered to the young person during the SEND Support Stage should take the form of a four-part cycle.

Assess

- The young person's difficulties at the time they make their application for enrolment, so that the right support can be provided.
- The provider will ask the young person what they feel their needs are as well as speaking to others who help them. This could include their parents/carers, teacher or support worker from a previous school or college, or any other professionals who work with them.
- When they start in the setting, the young person's tutor/ lecturer or nominated support person will regularly speak with them to see how they are getting on.

Plan

- The provider needs to plan and agree the outcomes that the SEND support is intended to achieve - in other words, how the young person is expected to benefit from the support they provide. These should be evidenced on the student's support plan.
- The young person is likely to be set "outcomes" that their provider will support them to achieve each term.
- Planning sessions with their tutors/ appropriate professionals should take place at least 3 times per year.
- Planning will look at the young person's aspirations (what they want to achieve next).

Do

- Following discussions with the young person, the provider will put the planned support into place.
- The young person's tutor / lecturer or nominated support person will remain responsible for working with them on a regular basis to track their progress.
- They will check that the support that has been put in place for the young person is doing what it was intended to do, and that they are achieving their expected outcomes.

Review

- The young person will have progress meetings with their tutor/lecturer or nominated support person. At these meetings the young person's progress will be recorded on their student profile or Individual Learning plan (ILP).
- The support that has been provided should be reviewed regularly - at least 3 times per year or each term as part of the personal progress reviews.
- Together with the young person's tutor/lecturer or nominated support person, they should decide whether the support put in place is having a positive impact.
- If either you (the parent/carer), the young person themselves or their tutor are concerned, or if the young person is falling behind, they will discuss and agree what can be done to better support the young person.

The young person's outcomes will be listed on either the SEND Support or EHC Plan. These may include the PfA goals such as finding employment, voluntary work, moving into higher education, living independently/semi independently, being as healthy as possible, making friends, participating in the local community and staying safe.

You can find out more by looking at the Preparing for Adulthood section of Rotherham Council Local Offer and on the National Development Team for inclusion (NDTI) website: www.preparingforadulthood.org.uk. The provider will ensure that the young person's opinions and views are considered and become a central and pivotal part of the decision making and planning process. The provider will work with them to agree and put in place a range of support that can be taken as steps towards achieving their long-term PfA outcomes.

Support opportunities could include:

- External visits.
- Extra-curricular activities.
- Involvement in community enterprise or voluntary work opportunities.
- Traineeships.
- Apprenticeships.
- Supported employment/internships.
- Buddy opportunities.

Equality and inclusion

The provider will have a SEN lead/SENDCo lead and additional specialist learning support staff, who will oversee the young person's support needs. The provider must do its best to meet the young person's needs. This could include:

- Ensuring that personal care needs are met.
- Providing one to one or small group learning opportunities.
- Providing training to enable more independence i.e., independent travel training.
- Ensuring tutors and learning support have the specialist skills and resources to support young people, for example information to be provided in suitable formats i.e., large print, easy read, symbols, audio etc., information is made available on coloured paper, the student has access to the right type of assistive technology, desk top prompts e.g. key word lists, colour coded timetables and a Picture Exchange Communication System (PECS) where required.

Supporting SEND in Post 16 settings including colleges

The purpose of identification is to work out what action the college/provider should take to support young people with SEND and NOT to fit them into a category. A young person's needs might cover more than one of the areas of the Code of Practice, and they also may change over time. The college/provider will complete a detailed assessment of need and produce your individual SEND Support Plan. This is so that your full range of needs are identified, in order for the college to plan and review your SEND Support Plan, or EHC Plan if necessary.

Four broad areas of need

Communication and interaction The young person will receive support in college if they have speech, language, and communication difficulties, that: • makes it difficult for them to make sense of what is being said to them, or • for them to be understood by others, or • to help them understand how to communicate more effectively	Cognition and learning The young person will receive support in college if they: • learn at a slower pace than others of their age • have difficulty in understanding parts of the curriculum • have difficulties with organisation and memory skills, or • have a specific difficulty affecting one particular part of their learning, such as English (Literacy) or Maths (Numeracy).
Social, emotional and mental health difficulties The young person will receive support in college if they: • have difficulty in managing their relationships with other people, • are withdrawn, or if they behave in ways that may hinder or affect their own or other students' learning, or • have a need which has an impact on their health and wellbeing.	Sensory and/or physical needs The young person will receive support in college if they have: • a visual and/or hearing impairment, or • a physical need that means they must have additional ongoing support and or equipment.
College support will ensure that they provide them with: • An inclusive learning environment. • High quality teaching and learning opportunities. • Social and emotional support. • Opportunities to achieve positive outcomes.	

Careers Guidance

As part of helping the young person to prepare for their future, schools and colleges have to ensure that all young people attending education provision from Year 8 until Year 13 are provided with independent careers guidance. FE colleges also have equivalent requirements to support and provide access to careers guidance, to young people from the age of 18 – 25.

High quality study programmes for Young People with SEND

All students aged 16-19, and those with an EHC Plan up to the age of 25, should be allowed to follow a coherent study programme that provides stretch and progression, and will enable them to achieve their best possible outcome in adult life. Colleges should:

Raise career aspirations of all SEND students, and

Broaden their employment opportunities. The college is expected to:

- Design study programmes which enable students to progress to a higher level of study than their prior attainment.
- Offer wide ranging qualifications.
- Enable them to gain basic skills such as English and maths.
- Allow them to participate in meaningful work experience and non-qualification activity.

When attending college, the young person should not be expected to repeat learning they have already completed successfully.

If they are not taking qualifications at college their study programme should:

- focus on high quality work experience, and provide non-qualification activity which prepares them well for - employment - independent living - being a healthy adult, and - participating in society

What next?

The vast majority of young people with SEND are capable of sustainable paid employment, providing they receive the right help and support. Having carefully understood their abilities, their college will work with them to provide them with the right type of opportunities, to help them meet their potential and aspirations.



Employment

College careers staff will discuss directly with the student which jobs they are looking for and how best to get one.

Traineeships

- Education and training programmes offering work experience.
- Focus on giving the skills and experience the student will need to get an apprenticeship or other job.
- To last a maximum of six months and include gaining key components of work preparation training i.e., English and maths (unless this is already achieved at GCSE A*-C standard) and a high-quality work experience placement.
- Available to young people aged 16 to 24, including those with EHC Plans.
- Young people with an EHC plan will retain their plan when undertaking a traineeship.

Apprenticeships

- Apprenticeships are paid jobs that incorporate training, enabling the student to gain a nationally recognised qualification.
- Young people can earn money as they learn and gain practical skills in the workplace.
- Many lead to highly skilled careers.
- Young people with an EHC Plan will retain this when they are doing their apprenticeship.

Supported Internships

Structured study programmes for young people with an EHC Plan. The EHC Plan will remain in place whilst they are undertaking the supported internship.

- Will normally be with an employer.
- Internships normally last for a year and include extended unpaid work placements of at least six months.
- Supported internships aim to support the young person move into paid employment.
- Offers a personalised study programme which includes the chance to study for relevant qualifications, if suitable, and English and maths to an appropriate level. Higher Education (University) is one option but not the only one. Foundation programmes are equally acceptable
- The college should give the young person advice and guidance about their aspiration of going on to university, and how they should make a claim for Disabled Students Allowance (DSA) where eligible
- Ensure that the correct level of support is maintained or provided to help them achieve their goal.

University

For some young people, securing a place in higher education will be their aspiration or goal.

- Specialist support is available for those young people who can go onto university through the disabled student's allowance and/or a variety of employment and support allowances.
- Many universities have disability support teams and mental health and wellbeing advisers.
- There are many areas where universities can do to help students with disabilities including:
 - Offering course materials in Braille and other accessible formats
 - Making sure buildings and facilities are accessible
 - Encouraging flexible teaching methods
 - Giving support during exams
 - Allowing additional time to complete courses.
- If the student has an EHCP this will no longer apply when they go to university however, it is a good idea to share all these documents so that the university can plan appropriately.

Funding for SEND Support

The college will write the SEND Support Plan. If additional support is required, the college will liaise with Rotherham Council's Special Educational Needs Assessment Service (Local Authority) to fund your support. If a young person requires an EHC Plan, the information contained within their SEND Support Plan will be used to inform this alongside information from relevant professionals. Independent advice in relation to SEND processes can be obtained either by contacting the SEND Team or the SEND Information Advice & Support Service (SENDIASS).

Funding entitlements

There are 3 categories of funding:

1. Funding entitlement for 16 -18-year-olds attending post 16 school provision or college is provided through Education and Skills Funding Agency (ESFA)
2. Young people aged 19-25 who have a EHC Plan will be funded through the Education and Skills Funding Agency (ESFA) with Top Ups from the LA
3. Young People aged 19 and over who attend college and have a learning difficulty or disability, but not an EHC Plan, may be entitled to 16-19 bursary fund from ESFA, there is some useful guidance surrounding 16-19 bursaries aimed at young people.

Packages of Support	
Education and Training	Education, Training and Social Care
College provision is based on 540 guided learning hours. This equates to 3 days per week over an academic year.	If it is agreed that the young person would benefit from, and is entitled to 5 days education, these additional 2 days could be paid for with their Personal Budget entitlement or through Social Care funding where eligible.
	If they are entitled to Social Care funding the support, they should receive will be included under the Social Care section of their EHC Plan where applicable. If the young person is entitled to receive a full package of provision across 5 days a week, this support provision does not have to be at one provider, it could involve amounts of time with different providers or to allow them to study independently or take part in opportunities such as: • Volunteering or participating in the community • Work experience • Independent travel training and/or skills for living independently in semi-supported or independent accommodation etc.

The following guidance follows the PfA outcomes that are required from Early Years:

- Independence,
- Employment/training,
- Staying healthy
- Inclusion into the local community –making friends and having a social life.

These outcomes should be embedded from Early Years through to Post 25 within the curriculum of settings, schools and the full range of provision.

Specific examples of effective PfA outcomes can be found in www.preparingforadulthood.org.uk PfA Outcomes.

Implementation of the Ranges in Post-16 Provision

The Post 16/Post 19 provision and practice should build on the effective SEND practice in schools and Early Years across all the SEND Ranges. Therefore, Post 16/19 providers must use the pre 16 cohort descriptors and the range of specific teaching interventions that have been successful and if appropriate in the planning of their Post 16/19 programme. The importance of transition cannot be underestimated.

Transition should begin at Year 8 and with regard to the four PfA outcomes – education/employment, developing independence, staying healthy and being included in the local community – making friends and having a social life – these should begin and be embedded from the Early Years.



Post 16/19 providers should be involved with schools and settings from Year 8/9 in understanding the needs of the young person, the curriculum that they are undertaking and how this can be built upon successfully in college, work placements, voluntary work and in shaping the 'lifestyle' that the young person wishes to have. Therefore, the Post 16/19 section of the SEND Ranges will focus in the main on the PfA outcomes with links to the specific needs and Ranges pre-16.

Most young people with SEND will have been identified prior to entering Post 16 providers through the embedding of the Ranges in schools and settings, however, there will be some young people for whom their needs have not been met. It will be important for the Post 16 providers to use the Range descriptors in identifying the needs of those young people and the subsequent provision that should be in place to meet those needs.

The importance of specialist training of all staff in the Post 16/19 provision will be pivotal in achieving good and outstanding PfA outcomes. Providers will have to demonstrate, like schools, how they are spending their monies on the individual young people.

Rotherham is currently reviewing all their High Needs Block funding arrangements. A work group has been established to look at High Needs funding 0-25. It is likely that providers will be required, like schools and settings to demonstrate how they are spending the first £6K before they can access any monies from the High Needs Block. This will be out for consultation. So, once embedded, there will be a seamless transition from Early Years through to 25 of accountability and transparency of spend and the impact on young people's outcomes. The SEND Ranges will provide the framework for this.

The ranges are a very useful guide for learning support staff/tutors/services to assess and identify the needs of students and to put into place the appropriate support. They describe the young person's needs and provide suggestions for the types of interventions that will be required. Providers will need to evidence all their interventions and the impact of these through a provision map and other evidence. This is best practice nationally and Ofsted require this level of evidence of input and impact.

The setting will use Support Plans and One Page Profiles to support provision. The support plan should show not only setting-based interventions, but also those of specialists and outside agencies if they are involved. This will give an informed overview of the interventions, as well as their impact and the progress that the young person has made as a result. The support plan should be part of a progress

In some cases, young people will fall into more than one range or will have needs in more than one area. The setting will need to study the ranges and to highlight where the greatest need is. This may change in time and as the young person matures.

There will be specific times such as transition where the needs may change because of the differing environments and expectations.

The ranges are a guide and provide a framework for the evidence that will be required. Some services that are available to schools and settings may not be available to colleges and/or have to be specifically bought in from the Element 1 and 2 or top up monies in the college

check every half term and a data run at the end of every term, in line with the assessment framework and process in each setting. Undertaking support planning in this way will also correlate the attainment/achievements alongside other indicators such as attendance, behaviour etc.

Using the Guidance to Support Learning

1. Once the young person's needs have been agreed professionals will find advice about how to support the learning of students at each range.
2. It is important to recognise that Quality First Teaching will provide a firm basis upon which to use the additional strategies.
3. Specialist health interventions may be required at any level, and this is an indicative framework as to how health resources may be deployed.

The ranges are colour-coded throughout the Post 16 guidance as follows:

-  Range 1 – Post 16 setting-based responses – Universal mainstream
-  Range 2 – Post 16 setting-based responses – Universal/Targeted mainstream
-  Range 3 – Post 16 setting-based responses – Targeted mainstream
-  Range 4 – Targeted/Specialist either in mainstream or specialist additional resource
-  Range 5 – Specialist Resource/ Special School / Specialist College
-  Range 6 - Special School / Specialist College
-  Range 7 – Highly Specialist Provision possibly 24 hours

Cognition and Learning Post 16 - 19

Cognition and Learning Needs Guidance		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	• May be below age-related expectations • Difficulty with the acquisition/use of language, literacy and numeracy skills • Difficulty with the pace of curriculum delivery • Some problems with concept development • Evidence of some difficulties in aspects of literacy, numeracy or motor coordination • Attainment levels are likely to be a year or more delayed	Please refer to information contained within the Range 1 Cognition and Learning section of the School Age Guidance
Range 2 Mild - Moderate	• Continuing and persistent difficulties in the acquisition/use of language/literacy/numeracy skills • The student is operating at a level well below expected outcomes and there is evidence of an increasing gap between them and their peers despite targeted intervention and differentiation through a support plan • Evidence of difficulties with aspects of cognition i.e., memory, concept development, information processing, understanding, sequencing and reasoning that impact on learning and/or limit access to the curriculum • Progress is at a slow rate but with evidence of response to intervention • Support is required to maintain gains and to access the curriculum • Attainment is well below expectations despite targeted differentiation • Processing difficulties limit independence and student may need adult support in some areas • The student will have mild but persistent difficulties in aspects of literacy, numeracy or motor co-ordination despite regular attendance, appropriate intervention and quality first teaching • May have difficulties with organisation and independence in comparison to peers • Difficulties impact on access to the curriculum • Student will require reasonable adjustments to support them in the classroom • Self-esteem and motivation may be an issue • Possibly other needs or circumstances that impact on learning	Please refer to information contained within the Range 2 Cognition and Learning section of the School Age Guidance

Range 3 Moderate	As above plus: • Persistent difficulties in the acquisition/use of language/literacy/numeracy skills • May appear resistant to previous interventions • Student is operating at a level significantly below expected outcomes and there is evidence of an increasing gap between them and their peers despite targeted intervention, differentiation and curriculum modification • Moderate difficulties with independent working and may sometimes need the support of an adult and a modified curriculum <u>or</u> assessment findings from a range of standardised cognitive assessments • Assessment by an Educational Psychologist indicates significant and enduring difficulties with several aspects of cognition e.g., memory, concept development, information processing, understanding, sequencing and reasoning • Difficulties impact on learning and/or limit access to the curriculum • Significant discrepancies between different areas of cognition or a highly unusual profile of strengths and difficulties • Personalised learning plan • Access to advice from a specialist • Support for reading/recording to access the curriculum at the appropriate level of understanding • Student will have moderate and persistent difficulties with literacy, numeracy and/or motor co-ordination despite regular attendance, significant levels of focused intervention, effective provision mapping and quality first teaching • Difficulties in some aspect of cognitive processing will be present, i.e., slow phonological processing, poor working memory, and difficulties with auditory and visual processing • Difficulties will affect access to curriculum, and specialist support/advice and arrangements will be required • May require assistive technology and/or augmented or alternative communication supports • Difficulties with learning may impact on self-esteem, motivation and emotional wellbeing despite positive support • Involvement of student in target setting and personalised learning	Please refer to information contained within the Range 3 Cognition and Learning section of the School Age Guidance
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Range 4a Significant	• Student will have significant and persistent difficulties with literacy, numeracy or motor co-ordination despite regular attendance and high-quality specialist intervention and teaching • Key language, literacy and/or numeracy skills are well below functional levels for their year group – the student cannot access text or record independently • Student has significant levels of difficulty in cognitive processing, requiring significant alteration to the pace and delivery of the curriculum • Difficulties likely to be long term / lifelong • Condition is pervasive and debilitating • Significantly affects access to curriculum and academic progress • High levels of support required which include assistive technology • Social skills and behaviour may be affected, and issues of self-esteem and motivation are likely to be present • The student may appear to be increasingly socially immature and vulnerable because of limited social awareness, difficulties with reasoning, understanding, or expressing thoughts	Please refer to information contained within the Range 4a Cognition and Learning section of the School Age Guidance
Range 4b	As Range 4a plus: • Difficulties are so significant that specialist daily teaching in literacy and numeracy and access to a modified curriculum are required • The level of adjustment and specialist teaching across the curriculum required is significantly greater than is normally provided in a mainstream setting	Please refer to information contained within the Range 4b Cognition and Learning section of the School Age Guidance
Range 5 Severe	• Severe learning difficulties have been identified • Significant and persistent difficulties in the acquisition/use of language/literacy/numeracy skills within the curriculum and out of school activities • Complex and severe language and communication difficulties • Access to specialist support for personal needs • Complex needs identified*	Please refer to information contained within the Range 5 Cognition and Learning section of the School Age Guidance

Cognition and Learning: PfA Outcomes and Provision				
	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 16	YP will build upon strengths and interests highlighted in personal/vocational profile. YP will achieve steps toward academic and vocational qualifications. YP will achieve A level results, or equivalent to enable progression on to university or other education/training opportunities. YP will have skills in CV writing and in applying for jobs or Higher Education.	YP will be able to manage potential income, including personal independence payments and incoming bills. YP will demonstrate skills in time management and negotiating travel/transport. YP will understand different types of living arrangements and which of these are positive or possible for each YP. YP will begin to plan for future living.	YP will understand personal budgets and how they could be spent post 16 to further PfA aspirations. YP will understand the potential risks relating to drugs and alcohol within the community and will be able to make safe choices. YP will understand how the criminal justice system works to enable them to function appropriately with the community. YP will develop increasing social awareness including understanding and reasoning skills to promote social and emotional wellbeing and reduce vulnerability within the community.	YP will have an understanding of their health needs and will be able to manage these where applicable. YP will see a GP or other health professionals as appropriate. YP will have an understanding of the importance of regular medical, dental and optical checks. YP will understand healthy choices, including healthy eating and benefits of exercise and will take steps to remain health and active.
Post 19	YP will consolidate or complete learning, achieving outcomes to enable progression into employment/adult education or community learning. YP will understand processes and support in relation to job centre provision. YP will understand and access benefits where applicable.	YP will continue to develop independent living skills through appropriate study programmes. YP will understand correspondence/bills and manage them appropriately. YP will have planned living arrangements in place.	YP will show awareness of the role of adult social care and will access the service as required. YP will develop increasing social awareness including understanding and reasoning skills to promote social and emotional wellbeing and reduce vulnerability within the community.	YP will manage health appointments/interventions.
Provision	An adapted curriculum/ workplace-based training programme to consider difficulties in relation to independent working and personal organisation. This may require learning and	Specific programmes of teaching relating to finance, independent travel, time management, types of living	Supported opportunities to access community-based activities and to make choices in relation to	Support to understand their own healthcare requirements.

	work-based tasks to be broken down into smaller stages with a higher level of adult direction. Curriculum/work-based materials and instructions which are adapted to the YP's developmental level and individual learning needs. Alterations to the pace of delivery in work-based settings in accordance with the YP's ability to process and internalise information. A regular programme of activities designed to promote the development of skills for further training/employment to include skills in CV writing, interviews, job applications, understanding job-centre access and support. Provision of careers advice Access to assistive technology as required.	arrangements, and provision of information to support the YP's understanding of these and ability to make positive choices. Supported opportunities to negotiate daily living tasks to include travel, income, bills, planning living and a future in accordance with the YP's cognitive functioning. Support to access documentation relating to health needs including NICE guidance and health check guide.	participation in activities available to them. Individual programmes of support to facilitate community participation in accordance with the YP's choices and levels of cognitive function. Specific teaching in relation to community participation including potential risks, to include drugs, alcohol, criminal activity, social vulnerability, and provision of information to support the YP's understanding of these and ability to make safe choices.	Support to access and understand information with regard to healthy eating and healthy lifestyle and exercise choices. Access to adult health services. Access to specialist services in line with any medical assessments.
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Communication and Interaction Needs – Autism Spectrum

Communication and Interaction Needs Guidance Autism Spectrum		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	- Students will have communication, and interaction needs that may affect their access to some aspects of the National Curriculum, including the social emotional curriculum and school life - The student does not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency team - Students may or may not have low level sensory needs	Please refer to information contained within the Range 1 Communication and Interaction: Autism Spectrum section of the School Age Guidance
Range 2 Mild - Moderate	- Students will have communication, and interaction needs that affect access to several aspects of the National Curriculum, including the social emotional curriculum and school life - Students may or may not have low to moderate sensory needs	Please refer to information contained within the Range 2 Communication and Interaction: Autism Spectrum section of the School Age Guidance
Range 3 Moderate	- Students will have communication, and interaction needs that will moderately affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life - This is especially true in new and unfamiliar contexts - The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention, and generalisation of skills and therefore on the result of any assessment - Students may or may not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency team - Students may or may not have moderate sensory needs	Please refer to information contained within the Range 3 Communication and Interaction: Autism Spectrum section of the School Age Guidance
Range 4a Significant	- Students will have communication, and interaction needs that significantly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life - This is especially true in new and unfamiliar contexts but will also affect access at times of high stress in some known and familiar contexts and with familiar support/people available	Please refer to information contained within the Range 4a Communication and Interaction: Autism Spectrum section of the School Age Guidance
Range 4b	As Range 4a plus: - Students will have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum - They will require significantly more support than is normally provided in a mainstream setting - Students may or may not have sensory significant sensory needs	Please refer to information contained within the Range 4b Communication and Interaction: Autism Spectrum section of the School Age Guidance

Range 5 Severe	- Students will have communication, and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available - The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment Students at range 5 may be in the following settings: Mainstream: - Students may have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum - They will require significantly more support than is normally provided at a universal level in a mainstream setting Special: - Attainment profile is below expected NC performance indicators and/or PIVATs /B Squared. - They may or may not have a diagnosis of an autism spectrum disorder and or EHCP. - Students may or may not have severe sensory needs	Please refer to information contained within the Range 5 Communication and Interaction: Autism Spectrum section of the School Age Guidance
Range 6 Profound	- Students will have communication, and interaction needs identified by the range descriptors that profoundly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available - Students will need an environment where interpersonal challenges are minimised by the adult managed setting - The pervasive nature of the Autism/C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment - Students may or may not have profound sensory needs - Students within the specialist provision need an environment where interpersonal challenges are minimised by the adult managed setting	Please refer to information contained within the Range 6 Communication and Interaction: Autism Spectrum section of the School Age Guidance

Sensory and/or Physical Needs

Sensory and/or Physical Needs Guidance Physical/Medical		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	• Some mild problems with fine motor skills and recording • Mild problems with self-help and independence • Some problems with gross motor skills and coordination often seen in PE • Some implications for risk assessment e.g. educational visits, high level P.E. or playground equipment • May have continence/ toileting issues • Possible low levels of self-esteem • May have medical condition that impacts on time in school and requires an Individual Healthcare Plan The NHS notes: • A Children's Occupational Therapist may see children at any range due to an open referral system. • It would be anticipated that schools would usually be able to implement first line strategies at this point, based on advice and strategies given by Children's Occupational Therapy. • Physio may intervene with children who have mild physical issues to prevent further deterioration/reduce impact of condition/early intervention to achieve more successful outcomes	Please refer to information contained within the Range 1 Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance
Range 2 Mild - Moderate	• Continuing mild to moderate problems with hand/eye co-ordination, fine/gross motor skills and recording, impacting on access to curriculum • Making slow or little progress despite provision of targeted teaching approaches • Continuing difficulties with continence/ toileting • Continuing problems with self-esteem and peer relationships • Continuing problems with self-help and independence • Continuing problems with gross motor skills and coordination often seen in PE • Some implications for risk assessment e.g. educational visits, high level P.E. or playground equipment • May have medical condition that impacts on time in school and requires an Individual Healthcare Plan The NHS notes: • A Children's Occupational Therapist may see children at any range due to an open referral system. • Physio may intervene with children who have mild-moderate physical issues to prevent further deterioration/reduce impact of condition/early intervention to achieve more successful outcomes • Physio will accept referrals from the school SENDCo. Schools are required to work through the school's pack, prior to referral	Please refer to information contained within the Range 2 Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance

Range 3 Moderate	• Moderate or persistent gross and/or fine motor difficulties • Recording and/or mobility now impacting more on access to the curriculum • May need specialist input to comply with health and safety legislation; e.g. to access learning in the classroom, for personal care needs, at break and lunch times • Increased dependence on seating to promote appropriate posture for fine motor activities/feeding • Increased dependence on mobility aids i.e. wheelchair or walking aid • Increased use of alternative methods for extended recording e.g. scribe, ICT • May have medical condition that impacts on time in school and requires an Individual Healthcare Plan The NHS notes: • A Children's Occupational Therapist may see children at any range – episodes of care will be implemented regardless of range. • These children may form the basis of targeted assessment – assessment and advice to home and school with programme/strategies to follow • Physio needs would be based on assessment on a case-by-case basis – if a child is at the level when they need a walking aid/wheelchair they will already be known to Physio • Physio will accept referrals from the school SENDCo. Schools are required to work through the school's pack, prior to referral	Please refer to information contained within the Range 3 Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance
Range 4a Significant	• Significant physical/medical difficulties with or without associated learning difficulties • Physical and/or medical condition will have a significant impact on the ability to access the curriculum. This may be through a combination of physical, communication and learning difficulties • Significant and persistent difficulties in mobility around the building and in the classroom • Significant personal care needs which require adult support and access to a hygiene suite • May have developmental delay and/or learning difficulties which impact upon access to curriculum • Will require or will have an Education, Health and Care Plan • Primary need is identified as physical/medical The NHS notes: • OT intervention will be based on functional needs and not necessarily on diagnosis or medical condition. • Children in this category may require specialist equipment via physio/OT services • Physio needs would be based on assessment on a case-by-case basis – children with degenerative neurological conditions or traumatic physical injury requiring rehabilitation would be known to physio in most cases	Please refer to information contained within the Range 4a Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance

Range 4b	• Severe physical difficulties and/or a medical condition with or without associated learning difficulties • Impaired progress and attainment • Persistent difficulties in mobility around the building and in the classroom • Severe physical difficulties or a medical condition that requires access to assistive technology to support communication, understanding and learning • A need for high level support for all personal care, mobility, daily routines and learning needs • Will need an Education, Health and Care Plan • Primary need is identified as physical/medical • Physical conditions that require medical/therapy/respite intervention and support • The need for an environment to support self-esteem and positive self-image • A developing neuro-muscular degenerative condition or traumatic incident resulting in brain or physical injury The NHS notes: • OT intervention will be based on functional needs and not necessarily on diagnosis or medical condition • Children in this category may require specialist equipment via physio/OT services • Physio needs would be based on assessment on a case-by-case basis – children with degenerative neurological conditions or traumatic physical injury requiring rehabilitation would be known to physio in most cases	Please refer to information contained within the Range 4b Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance
Range 5 Severe	• A level of independent mobility or self-care that restricts/prevents an alternative mainstream placement • An inability to make progress within the curriculum without the use of specialist materials, aids, equipment and high level of adult support throughout the school day • Furniture and/or extensive adaptations to the physical environment of the school • Difficulties in making and sustaining peer relationships leading to concerns about social isolation, the risk of bullying and growing frustration • Emotional and/or some behavioural difficulties including periods of withdrawal, disaffection and reluctance to attend school • A requirement that health care inputs and therapies be intensive and on a regular basis • Given appropriate facilities is nevertheless unable to independently manage personal and/or health care during the school day and requires regular direct intervention • Is an Augmentative Alternative Communication (AAC) user • Has a degenerative condition which impacts upon independence The NHS notes: • OT intervention will be based on functional needs and not necessarily on diagnosis or medical condition • Children in this category may require specialist equipment via physio/OT services	Please refer to information contained within the Range 5 Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance

	- Physio needs would be based on assessment on a case-by-case basis – children with degenerative neurological conditions or traumatic physical injury requiring rehabilitation would be known to physio in most cases - A child with a degenerative condition may not require to be in this range simply as a result of diagnosis, - e.g. Duchenne Muscular Dystrophy children remain quite independent through most of their childhood years and may only require a lower range	
Range 6 Profound	A permanent, severe and/or complex physical disability or serious medical condition. The young person will present with many of the following: - The associated severe and complex learning difficulties impact on their ability to make progress within the curriculum despite the use of specialist materials, aids, equipment, furniture and/or extensive adaptations to the physical environment of the school - Difficulties in making and sustaining peer relationships leading to concerns about social isolation and vulnerability within the setting and wider environment - Emotional and/or behavioural difficulties including regular periods of withdrawal, disaffection and ongoing reluctance to attend school - A requirement that health care inputs and therapies be intensive and daily - Given appropriate facilities is nevertheless unable to manage personal and/or health care during the school day and requires a high level of direct intervention - Has a complex medical need requiring frequent monitoring and medical intervention throughout the school day - Has a significant additional condition such as HI/VI/MSI which gives rise to the complexity of need - Is an Augmentative Alternative Communication (AAC) user - Has a degenerative condition - May have intervention from Occupational Therapist/ Physiotherapist - May require specialist equipment via physiotherapist/ Occupational Therapist - The NHS notes: - OT intervention will be based on functional needs and not necessarily on diagnosis or medical condition - Children in this category may require specialist equipment via physio/OT services - Physio needs would be based on assessment on a case-by-case basis – children with degenerative neurological conditions or traumatic physical injury requiring rehabilitation would be known to physio in most cases - A child with a degenerative condition may not require to be in this range simply as a result of diagnosis, e.g., Duchenne Muscular Dystrophy children remain quite independent through most of their childhood years and may only require a lower range	Please refer to information contained within the Range 6 Sensory and/or Physical Needs: Physical/Medical section of the School Age Guidance

Physical, Medical and Sensory: PfA Outcomes and Provision

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 16	YP will be able to access and function within work-based environments in relation to apprenticeships, supported internships and traineeships to progress with future career choices. YP will be able to present their skills in written form (C.V) to help secure future education and work-based options.	YP will have life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances. YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances. YP will have an awareness of risk within the home context and will manage this appropriately in order to remain safe. YP will plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.	YP will be able to access community, leisure and social facilities to enable participation within the local community in accordance with the YP's preference. YP will be able to access appropriate transport in order to facilitate participation within community, leisure and social activities. YP will show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.	YP will recognise the need for dental, medical and optical health and will take responsibility for making appointments as required. YP will take steps to remain physically active and healthy in the context of their individual circumstances. YP will make healthy eating choices in order to promote physical wellbeing. YP will maintain any physiotherapy regimes necessary to ensure physical health and optimum mobility in the context of their individual circumstances. YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.

Post 19	YP will be able to access and function within work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices. YP will be able to access and function within higher education provision in order to progress with future career choices. YP will be able to present their skills in written form (C.V) to help secure future education and work-based options. YP will be able to access job centre provision to support pathways into employment post education.	YP will access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing.	YP will be able to access community, leisure and social facilities to enable participation within the local community in accordance with the YP's preference. YP will be able to access appropriate transport in order to facilitate participation within community, leisure and social activities. YP will show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.	YP will recognise the need for dental, medical and optical health and will take responsibility for making appointments as required. YP will take steps to remain physically active and healthy in the context of their individual circumstances. YP will make healthy eating choices in order to promote physical wellbeing. YP will maintain any physiotherapy regimes necessary to ensure physical health and optimum mobility in the context of their individual circumstances. YP will engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.
Provision	Adapted education and workplace arrangements to consider the YP's physical and medical needs Access to onsite medical professionals as required Adaptations to daily education/employment-based routines to consider any ongoing Physiotherapy/OT programmes. Adult support as required to facilitate delivery.	Adapted living arrangements suited to the YP's physical and medical needs Access to appropriate equipment/resources: standing frames, wheelchairs, manual and power, walking aids Access to equipment to facilitate independence in self-care routines Adapted forms of accommodation and transport to consider the	Access to appropriate equipment/resources: standing frames, wheelchairs, manual and power, walking aids Adapted forms of accommodation and transport to consider the physical needs of the YP and facilitate independence Provision of information relating to disabled access and adapted environments.	Access to equipment to facilitate independence in selfcare routines Access to appropriate equipment/resources to facilitate mobility: standing frames, wheelchairs, manual and power, walking aids Medical teams or trained carers on site as required or if a day provision Access to a medically trained carer as required.

	Access to appropriate equipment/resources: standing frames, wheelchairs (manual and power), walking aids Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio aids; electronic voice output communication aids (VOCA) as appropriate. Adult support to facilitate alternative/adapted forms of communication as required.	physical needs of the YP and facilitate independence Enhanced PSHCE/life skills and SRE programmes to ensure skills embedded	Adult support to facilitate community participation Programmes of study to facilitate the YP understanding of risk in the context of community participation and support to enable them to make informed choices suited to the YP's individual needs	Access to Children's Occupational Therapy programmes to be carried out by a trained carer Access to physiotherapy programmes that will be delivered by trained carers/ family members. Training in the delivery of emergency medications to appropriate professionals/carers People working with/supporting people in this cohort must have knowledge of the individuals' method of communication. Sensory input where required
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Sensory and/ or Physical and Medical Needs – Hearing Impairment

Sensory and/or Physical Needs Guidance Hearing Impairment		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	- Young people who are not aided (see previous proposed descriptor). Local Authority Assessment may be carried out at the request of Audiology/ENT to support decisions. - Unilateral/bilateral hearing loss greater than 20dBHL - This is likely to include children with a mild or unilateral loss which may be temporary/fluctuating conductive or permanent sensorineural but who can manage well with reasonable adjustments and are subsequently not aided.	Please refer to information contained within the Range 1 Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance
Range 2 Mild - Moderate	- Bilateral mild long term conductive or sensorineural hearing loss - May have Auditory Neuropathy Spectrum Disorder - Mild to moderate permanent unilateral (moderate or greater hearing loss) - Hearing aids used - Moderate difficulty with listening, attention, concentration, speech, language and class participation	Please refer to information contained within the Range 2 Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance
Range 3 Moderate	- Bilateral moderate long term conductive or sensorineural hearing loss - Will have hearing aids and may have a radio aid - Will have moderate difficulty accessing spoken language, likely language delay - May have Auditory Neuropathy Spectrum Disorder and may require frequent monitoring - Moderate difficulty with listening, attention, concentration and class participation	Please refer to information contained within the Range 3 Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance
Range 4a Significant	- Bilateral moderate or severe permanent hearing loss with no additional learning difficulties - Severe difficulty accessing spoken language and therefore the curriculum - May have additional language delay associated with hearing loss - Will have hearing aids and may have a radio aid - Auditory Neuropathy Spectrum Disorder and may have hearing aids - Difficulties with attention, concentration, confidence and class participation	Please refer to information contained within the Range 4a Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance
Range 4b	- Bilateral moderate/severe or severe/profound permanent hearing loss - May have additional language/learning difficulties associated with hearing loss - Will have hearing aids or cochlea implant - Will have a radio aid - Auditory Neuropathy Spectrum Disorder and may have cochlea implants - Speech clarity may be affected - Severe difficulties with attention, concentration, confidence and class participation - Significant difficulty accessing spoken language and therefore the curriculum	Please refer to information contained within the Range 4b Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance

Range 5 Severe	• Bilateral moderate/severe/profound permanent hearing loss • Profound language delay and communication difficulties which prevent the development of appropriate social and emotional health • British Sign Language (BSL) or Sign Supported English (SSE) may be needed for effective communication • Will have hearing aids or cochlear implants • Will have a radio aid • Profound difficulty accessing spoken language and therefore the curriculum without specialist intervention • Speech clarity may be profoundly affected • Will have significant difficulties with attention, concentration, confidence and class participation • Auditory Neuropathy Spectrum Disorder • Additional language/learning difficulties associated with hearing loss	Please refer to information contained within the Range 5 Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance
Range 6 Profound	• Bilateral moderate/severe/profound permanent hearing loss • Profound language/learning difficulties associated with hearing loss • Profound language delay and communication difficulties which prevent the development of appropriate social and emotional health • May use BSL/SSE or augmentative communication to communicate • Will have hearing aids/cochlear implants • Will have a radio aid • Profound difficulty accessing spoken language and therefore the curriculum • Speech clarity will be affected • Difficulty with attention, concentration, confidence and class participation • Auditory Neuropathy Spectrum Disorder • Additional difficulties and learning needs not associated with hearing loss	Please refer to information contained within the Range 6 Sensory and/or Physical Needs: Hearing Impairment section of the School Age Guidance

Sensory and / or Physical Needs – Dual Sensory Need

Guidance Dual Sensory Impairment		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 3	- MILD loss in both and making good use of at least one modality - May have hearing aids and/or Low Visual Aid (LVA) - Non-progressive condition - May have a slower pace of working but has good compensatory strategies - May have some difficulty with listening, attention and concentration but language and communication largely match potential given appropriate support - Low level of support needed to manage equipment and aids - May have additional learning needs - Have Auditory Processing Disorder/Auditory Neuropathy/Cerebral Visual Impairment	Please refer to information contained within the Range 3 Sensory and/or Physical Needs: Dual Sensory Impairment section of the School Age Guidance
Range 4	- MODERATE loss in one modality and MILD/MODERATE in the other - May have hearing aids and/or LVAs - Non-progressive condition - May have additional language/learning needs associated with dual sensory impairment - Likely to have difficulties accessing incidental learning, including signed and verbal communication - May have a slower pace of learning, difficulties with attention, concentration and the development of independence and social skills - May have additional learning needs - Have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment	Please refer to information contained within the Range 4a Sensory and/or Physical Needs: Dual Sensory Impairment section of the School Age Guidance
Range 5	- SEVERE/PROFOUND loss in one modality and MODERATE in the other or has a late diagnosed or recently acquired MSI - Uses hearing aids and/or LVAs - Non-progressive condition - May have delayed development in some areas of learning and difficulties generalising learning and transferring skills - May have difficulties coping with new experiences and have underdeveloped independence and self-help skills - Likely to have communication difficulties - Significant difficulties accessing incidental learning and the curriculum - Likely to require some individual support to access learning and social interactions and to develop life-skills - Likely to require a tactile approach to learning with access to real objects and context- based learning experiences and/or access to visual or tactile signed communication - Significant difficulties with attention, concentration, confidence and class participation	Please refer to information contained within the Range 5 Sensory and/or Physical Needs: Dual Sensory Impairment section of the School Age Guidance

	• Significantly slower pace of learning • May have additional learning needs • Have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment	
Range 6	• PROFOUND/SEVERE loss in one modality and MODERATE/SEVERE in the other and/or progressive condition • Likely to use hearing aids and/or LVAs • Severe communication difficulties requiring an individual communication system using alternative and augmentative approaches • May require a tactile approach to learning with access to real objects and context- based learning experiences and/or access to visual or tactile signed communication • May have severe difficulties generalising learning and transferring skills • Difficulties coping with new experiences • May have underdeveloped independence and self-help skills • May have difficulties developing relationships and lack social awareness leading to social isolation • Likely to require a high level of individual support to access learning and social opportunities and to develop life-skills • May display challenging and/or self-injurious behaviour • May have additional learning needs • May have limited clinical assessment information because of additional complex educational needs • Have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment	Please refer to information contained within the Range 6 Sensory and/or Physical Needs: Dual Sensory Impairment section of the School Age Guidance
Range 7	• PROFOUND/SEVERE loss in both modalities • Likely to use hearing aids and/or LVAs • Severe and complex communication difficulties requiring an individual communication system using alternative and augmentative approaches • Severely restricted access to incidental learning • May require a tactile and experiential approach to learning and individual curriculum and/or access to visual or tactile signed communication • May require individual support with most aspects of basic care needs and to access learning and social opportunities • May lack the strategies and motivation to make effective use of residual hearing and vision and require sensory stimulation programmes • May be tactile defensive/selective and highly wary of new experiences • May have difficulties developing relationships and lack social awareness leading to social isolation • May display challenging and/or self-injurious behaviour • May have additional learning needs • May have limited clinical assessment information because of additional complex educational needs • Have Auditory Processing Disorder / Auditory Neuropathy / Cerebral Visual Impairment	Please refer to information contained within the Range 7 Sensory and/or Physical Needs: Dual Sensory Impairment section of the School Age Guidance

Sensory and / or Physical Needs – Vision Impairment

Visual Impairment		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	Mild Visual Impairment • Young person may find concentration difficult • Young person may peer or screw up eyes • Distance vision approximately 6/18. This means that the young person needs to be about 2 metres away to see what fully sighted young persons can see from 6 metres • Can probably see details on a whiteboard from the front of a classroom, as well as others can see from the back of the room • Near vision: likely to have difficulty with print sizes smaller than 12 point or equivalent sized details in pictures • Young persons who have nystagmus may be within this range or subsequent ranges depending on what their visual acuity is at worst. Young persons who have nystagmus have fluctuating vision. Their vision can worsen if they are tired, upset, angry, worried or unwell. It is likely their vision will worsen in unfamiliar places. They may struggle with depth perception and may find unfamiliar steps difficult or be cautious if the ground is uneven.	Please refer to information contained within the Range 1 Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance
Range 2 Mild - Moderate	Moderate Visual Impairment • Young person may find concentration difficult • Young person may peer or screw up eyes • Young person may move closer when looking at books or notice boards • Young person may make frequent “copying” mistakes • Distance vision: approximately 6/24. This means that the young person needs to be about 1.5 metres away to see what fully sighted young persons can see from 6 metres • Will not be able to see details on a white board from the front of classroom as well as others can see from the back • Near vision: likely to have difficulty with print sizes smaller than 14 point or equivalent sized details in pictures	Please refer to information contained within the Range 2 Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance
Range 3 Moderate	Moderate to Significant Visual Impairment • Young person will find concentration difficult • Young person will peer or screw up eyes • Young person will move closer when looking at books or notice boards • Young person will make frequent “copying” mistakes • Young person will have poor hand - eye coordination • Young person will have a slow work rate	Please refer to information contained within the Range 3 Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance

	- Distance vision: approximately 6/36. This means that the young person needs to be about 1 metre away to see what fully sighted young persons can see from 6 metres - Will not be able to see details on a white board without approaching to within 1 metre of it - Near vision: likely to have difficulty with print sizes smaller than 18 point or equivalent sized details in pictures - Young persons may have Cerebral Visual Impairment (CVI) – these young persons have normal or near normal visual acuities but will display moderate to significant visual processing difficulties	
Range 4a Significant	Cerebral Visual Impairment (CVI) - CVI must be diagnosed by an ophthalmologist. The young person will typically have good acuities when tested in familiar situations, but this will vary throughout the day. A key feature of CVI is that vision varies from hour to hour with the young person's well-being. - All young persons with CVI will have a different set of difficulties which means thorough assessment is a key aspect. The young person has difficulties associated with dorsal processing stream, ventral processing stream or a combination of both. Dorsal stream difficulties include: - Difficulties seeing moving objects - Difficulties reading - Difficulties doing more than one thing at a time (e.g. looking and listening) Ventral Stream Difficulties include: - Inability to recognise familiar faces - Difficulties route finding - Difficulties with visual clutter - Lower visual field loss	Please refer to information contained within the Range 4a Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance
Range 4b	Severe Visual Impairment - Young person is likely to be registered severely sighted/Visually Impaired or blind but still learning by sighted means - Distance vision: 6/36 or 6/60 or worse. This means that the young person can see at 6m what a fully sighted person could see from 60m. It represents a difficulty identifying any distance information, people or objects. - Young persons would be unable to work from a white board in the classroom without human/technical support. - Near vision: likely to have difficulty with any print smaller than 24 point. Print sizes must be in a range from 24 – 36, and materials will require significant differentiation and modification.	Please refer to information contained within the Range 4b Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance
Range 5 Severe	- Usually, young persons who have suffered a late onset visual impairment, or where their vision has deteriorated rapidly - Some young persons may also be continuing to use print at point 48 - Some young persons will be making the transition from print to Braille	Please refer to information contained within the Range 5 Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance

	• These young persons will usually be registered blind and learning by tactile methods • Some may have little or no useful vision, and very limited or no learning by sighted means	
Range 6 Profound	• Usually, young persons who are born with severe visual impairment, who are identified early on as being tactile learners • Young persons who are new to the country, with severe visual impairment • These young persons will usually be registered blind and learning by tactile methods; they will have little or no useful vision, and very limited or no learning by sighted means • Young persons with severe learning difficulties as a prime need, and who are blind or partially sighted, or have a diagnosis of CVI, as a secondary need • Distance vision: difficulty identifying any distance information • Near vision: will have difficulty responding to facial expressions at 50 cm	Please refer to information contained within the Range 6 Sensory and/or Physical Needs: Visual Impairment section of the School Age Guidance

Social, Emotional and Mental Health Needs

Social, Emotional and Mental Health Needs Guidance		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	MILD - Children will have been identified as presenting with some low-level features of behaviour, emotional, social difficulties - They may sometimes appear isolated, have immature social skills, be occasionally disruptive in the classroom setting, be overactive and lack concentration - They may follow some but not all school rules/routines around behaviour in the school environment - They may experience some difficulties with social /interaction skills - They may show signs of stress and anxiety and/or difficulties managing emotions on occasions	Please refer to information contained within the Range 1 Social, Emotional and Mental Health section of the School Age Guidance
Range 2 Mild - Moderate	MILD – MODERATE - Difficulties identified at range 1 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and range 1 interventions being in place. - SEMH continues to interfere with young person's social/learning development across a range of settings and young person do not follow routines in school consistently - Young person beginning to be at risk of exclusion and may have continued difficulties in social interactions/relationships with both adults and peers, including difficulties managing a range of emotions - Young person may have become socially and emotionally vulnerable, withdrawn, isolated, and unpredictable patterns of behaviour that impact on learning may be beginning to emerge - Young person may show patterns of stress/anxiety related to specific times of the day - Young person may prefer own agenda and be reluctant to follow instructions - Young person may have begun to experience short term behavioural crises	Please refer to information contained within the Range 2 Social, Emotional and Mental Health section of the School Age Guidance
Range 3 Moderate	MODERATE - Difficulties identified at range 2 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and range 1 and 2 interventions being in place. - SEMH interfere more frequently with young person's social/learning development across a range of settings and young person does not follow routines in school without adult support - Young person may have experienced fixed term exclusion and more sustained difficulties in social interactions/relationships with both adults and peers, including difficulties managing a range of emotions - Young person remains socially and emotionally vulnerable, withdrawn, isolated, and susceptible to unpredictable patterns of behaviour that impact on learning - Young person patterns of stress/anxiety related to specific times of the day have become more common - Young person may prefer own agenda and may be reluctant to follow instructions - Short-term behavioural crises have become more frequent and are more intense	Please refer to information contained within the Range 3 Social, Emotional and Mental Health section of the School Age Guidance

Range 4a Significant	SIGNIFICANT • Young person continues to present with significant and persistent levels of behaviour, emotional, social difficulties which are now more complex, and which necessitate a multi-agency response. • Young person is more likely to have experienced fixed term exclusion from school • Young person does not have the social and emotional skills needed to cope in a mainstream environment without adult support for a significant proportion of the school day • Significant and increasing difficulties with social interaction, social communication and social understanding which regularly impact on classroom performance • Young person is increasingly isolated and struggles to maintain positive relationships with adults or peers • Careful social and emotional differentiation of the curriculum essential to ensure access to the curriculum and progress with learning	Please refer to information contained within the Range 4a Social, Emotional and Mental Health section of the School Age Guidance
Range 4b	SEVERE • Young person continues to present with severe and persistent levels of behaviour, emotional, social difficulties which continue to be complex and long term, and which necessitate a continued multi-agency response. • Young person is at increased risk of permanent exclusion • Young person does not have the social and emotional skills needed to cope in a mainstream environment without adult support for a significant proportion of the school day • Significant and increasing difficulties with social interaction, social communication and social understanding which regularly impact on classroom performance • Young person is increasingly isolated and struggles to maintain positive relationships with adults or peers • Careful social and emotional differentiation of the curriculum essential to ensure progress with learning Complex Needs identified *	Please refer to information contained within the Range 4b Social, Emotional and Mental Health section of the School Age Guidance
Range 5 Severe	SEVERE Severe and increasing behavioural difficulties, often compounded by additional needs and requiring provision outside the mainstream environment, including: • Moderate/ severe learning difficulties, mental health difficulties, acute anxiety, attachment issues • Patterns of regular school absence • Incidents of absconding behaviour • Disengaged from learning, significant under-performance • Verbally and physically aggressive • Reliant on adult support to remain on task • Struggles with change – both to routines and relationships • Regular use of foul and abusive language • Engaging in high-risk activities both at school and within the community • Difficulties expressing empathy, emotionally detached, could have tendency to hurt others, self or animals • Issues around identity and belonging • Needing to be in control, bullying behaviours (victim & perpetrator)	Please refer to information contained within the Range 5 Social, Emotional and Mental Health section of the School Age Guidance

	- Difficulties sustaining relationships - Over-friendly or withdrawn with strangers, at risk of exploitation - Provocative in appearance and behaviour, evidence of sexualised language or behaviours - Slow to develop age-appropriate self-care skills due to levels of maturity or degree of Learning Difficulties - Physical, sensory and medical needs that require medication and regular review Complex needs identified *	
Range 6 Profound	PROFOUND Continuing profound and increasing behavioural difficulties, often compounded by additional needs and requiring continued provision outside the mainstream environment, including: - Significant challenging behaviour - Requiring a range of therapeutic interventions or referral to specialist support services (CAMHS, YOS) - Unable to manage self in group without dedicated support - Subject to neglect, basic needs unmet or preoccupied with hunger, illness, lack of sleep, acute anxiety, fear, isolation, bullying, harassment, controlling behaviours - Consistent use of foul and abusive language - Involved in substance misuse either as a user or exploited into distribution/selling - Poor attendance, requires high level of adult intervention to bring into school, even with transport provided - Refusal to engage, extreme abuse towards staff and peers, disengaged, wilfully disruptive - Regular absconding behaviour - Significant damage to property - Requiring targeted teaching in order to access learning in dedicated space away from others - Health and safety risk to self and others due to increased levels of agitation and presenting risks - Sexualised language and behaviour, identified at risk of Child Sexual Exploitation (CSE) Complex needs identified *	Please refer to information contained within the Range 6 Social, Emotional and Mental Health section of the School Age Guidance
Range 7	Continued long term and complex behavioural, emotional, and social difficulties, necessitating a continued multi-agency response coordinated as annual, interim or emergency SEND review and met in specialist provision. Needs likely to include: - Self-harming behaviour - Attempted suicide - Persistent substance abuse - Extreme sexualised language and behaviour, sexually exploited - Extreme violent/aggressive behaviour - Serious mental health issues - Long term non-attendance and disaffection - Regular appearance in court for anti-social behaviour/criminal activity - Puts self and others in danger - Frequently missing for long periods	Please refer to information contained within the Range 7 Social, Emotional and Mental Health section of the School Age Guidance

	• Extreme vulnerability due to MLD/SLD • Medical conditions that are potentially life threatening and cannot be managed without dedicated support Complex needs identified*	
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Social Emotional and Mental Health: PfA Outcomes and Provision

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 16	YP will have acquired the necessary social skills to interact with employers and clients to function effectively in apprenticeships, internships and traineeships as required. YP will have appropriate communication and interaction skills to facilitate the development of relationships with peers within the workplace/education environments to promote emotional wellbeing. YP will understand and manage their feelings and emotions, accessing appropriate strategies or assistance as required.	YP will understand their right to make choices, and to exercise decision making in relationships with others with emphasis on best interests and informed consent. YP will have an awareness of boundaries and social conventions with respect to a range of relationships and social situations (including online). YP will be able to recognise potential abusive and exploitative behaviour in others and will be able to make safe choices. YP will understand different types of living arrangements and those which are positive and possible in relation to their own circumstances.	YP will understand and manage their feelings and emotions, accessing appropriate strategies or assistance as required to facilitate/mediate interactions with others. YP will have developed appropriate social skills to establish new friendships in the context of community involvement. YP will demonstrate awareness of social conventions and boundaries and will be able to negotiate these to maintain personal safety while in the community. YP will have an awareness of boundaries and social conventions with respect to a range of relationships and social situations (including online). YP will be able to recognise potential abusive and exploitative behaviour in others and will be able to make safe choices. YP will understand risks associated with drugs and alcohol and will adhere to legal restrictions regarding these substances.	YP will engage with self-care routines to maintain appropriate levels of personal hygiene. To include their environment. YP will make safe choices in relation to sexual health. YP will understand and manage their feelings and emotions, accessing appropriate strategies or assistance as required to maintain emotional wellbeing. YP will employ strategies to maintain good mental health. To include recognition of times when they are not coping and being able to seek assistance as required.
Post 19	YP will have acquired the necessary social skills to interact with employers and clients or academic	YP will make positive choices in relation to their own living arrangements considering	YP will have developed appropriate social skills to maintain friendships	YP will engage with self-care routines to maintain appropriate levels of personal hygiene. To include their environment...

	staff in order to function effectively in voluntary work, paid work or Higher Education as required. YP will have appropriate communication and interaction skills to facilitate the development of relationships with peers within the workplace/education environments to promote emotional wellbeing. YP will understand and manage their feelings and emotions, accessing appropriate strategies or assistance as required.	circumstances and possible options best suited to facilitate social and emotional wellbeing.	in the context of community involvement. YP will demonstrate awareness of social conventions and boundaries and will be able to negotiate these to maintain personal safety while in the community. YP will have an awareness of boundaries and social conventions with respect to a range of relationships and social situations (including online). YP will be able to recognise potential abusive and exploitative behaviour in others and will be able to make safe choices. YP will understand risks associated with drugs and alcohol and will adhere to legal restrictions with regard to these substances.	YP will make safe choices in relation to sexual health. YP will understand and manage their feelings and emotions, accessing appropriate strategies or assistance as required. YP will employ strategies to maintain good mental health. To include recognition of times when they are not coping and being able to seek assistance as required.
Provision	Highly supported work experience placements and short-term training opportunities with specific teaching in relation to interactions with employers, peers and clients in preparation for access to longer term learning provision and/or employment. An adapted curriculum/work- based training programme to consider the YP's emotional/mental health needs and appropriate provision to ensure the promotion of positive mental health and wellbeing.	Access to programmes designed to support and develop the YP's awareness of social boundaries and conventions in relation to a range of social situations and relationships. Adult support and guidance to ensure that the YP is able to apply taught knowledge and skills to enable them to make safe choices within the community. Specific teaching in relation to risks associated with social media/online communities and	Access to programmes designed to support and develop the YP's awareness of social boundaries and conventions in relation to a range of social situations and relationships. Adult support and guidance to ensure that the YP is able to apply taught knowledge and skills to enable them to make safe choices within the community. Community based activities/groups appropriate to the YP's age and developmental level designed to	Programmes of activities designed to promote positive self-care routines (relating to personal care and the home/work environment) and support to apply and embed these within daily routines. Programmes of activities and provision of information relating to sexual health and associated risks and support and guidance as required to enable the YP to make positive relationship choices and remain safe. Information and guidance to positive mental health and wellbeing and individual

	Regular monitoring of the YP's workload, behaviour patterns, interactions with others to identify early indications of stress, anxiety, depression etc. ensuring that appropriate steps are taken to support the YP to manage this as required. Adult guidance and support to apply my regulatory or coping strategies and provision within the workplace or education setting to accommodate these. Access to agencies/organisations who provide mental health and emotional support within the workplace or education setting as appropriate.	guidance and support to apply protocol relating to e-safety.	facilitate socialisation and the development of friendships. Links to organisations who provide social and emotional support as required. Specific teaching in relation to risks associated with drugs, alcohol, criminal activity, social vulnerability and provision of information to support the YP's understanding of these and ability to make safe choices. Specific teaching in relation to risks associated with social media/online communities and guidance and support to apply protocol relating to e-safety.	programmes of activities to identify coping strategies and mechanisms in accordance with the YP's circumstances and emotional/mental health needs. Links to agencies /organisations who provide mental health and emotional support as required. Access to emotional support workers as required.
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Communication and Interaction Needs – Speech, Language and Communication Needs

Communication and Interaction Needs Guidance Speech, Language and Communication Needs		
	Range Descriptors Overview	Assessment, Intervention, Provision and Resources
Range 1 Mild	Student will have communication, and interaction needs which may affect access to some aspects of the National Curriculum, including the social emotional curriculum and school life: • Student does not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency team • Speech is understood by familiar adults but has some immaturities, which may impact on social interaction and may impact on the acquisition of literacy • Difficulties with listening and attention that affect task engagement and independent learning • Comments and questions indicate difficulties in understanding the main points of discussion, information, explanations and the student needs some support with listening and responding • Difficulties in the understanding of language for learning (conceptual language: size, time, shape, position) • Reduced vocabulary range, both expressive and receptive • May rely on simple phrases with everyday vocabulary • Social interaction could be limited and there may be some difficulty in making and maintaining friendships • Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement • May present with difficulty in talking fluently e.g., adults may observe repeated sounds, words or phrases, if this is consistent, higher levels of need may be present	Please refer to information contained within the Range 1 Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance
Range 2 Mild - Moderate	Student will have communication, and interaction needs that affect access to several aspects of the National Curriculum, including the social emotional curriculum and school life: • Speech is usually understood by familiar adults; unfamiliar people may not be able to understand what the child is saying if out of context. • The child's speech may have some immaturities or use of more unusual sounds within their talking, which may impact on social interaction and the acquisition of literacy	Please refer to information contained within the Range 2 Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance

Range 3 Moderate	Student will have communication, and interaction needs that will moderately affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life. This is especially true in new and unfamiliar contexts. • The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment • Students may or may not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency team • Persistent delay against age related speech, language and communication • Persistent difficulties that do not follow normal developmental patterns (disordered) Speech: • Speech may not be understood by others i.e., parents/family/carers where context is unknown. Difficulty in conveying meaning, feelings and needs to others due to speech intelligibility • Speech sound difficulty may lead to limited opportunities to interact with peers • May be socially vulnerable • May become isolated or frustrated • Phonological awareness (Speech sound awareness) difficulties impact on literacy development. Expressive: • The student may have difficulty speaking in age-appropriate sentences and the vocabulary range is reduced. This will also be evident in written work • Talking may not be fluent • May have difficulties in recounting events in a written or spoken narrative Receptive: • Difficulties in accessing the curriculum, following instructions, answering questions, processing verbal information, following everyday conversations • Needs regular and planned additional support and resources • Difficulties with listening and attention that affect task engagement and independent learning • May not be able to focus attention for sustained periods • May appear passive or distracted • Difficulties with sequencing, predicting, and inference within both social and academic contexts. This may impact on behaviour and responses in everyday situations e.g., not understanding the consequences of an action	Please refer to information contained within the Range 3 Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance
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	Social Communication: • Difficulties with speech and/or language mean that social situations present challenges resulting in emotional outbursts, anxiety, social isolation and social vulnerability • Difficulties with using and understanding non-verbal communication (NVC) such as facial expressions, tone of voice and gestures • Poor understanding of abstract language and verbal reasoning skills needed for problem solving, inferring and understanding the feelings of others • Anxiety related to lack of understanding of time and inference • Needs reassurance and forewarning of changes to routine or when encountering new situations/experiences	
Range 4a Significant	Student will have communication, and interaction needs that significantly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life. This is especially true in new and unfamiliar contexts but will also affect access at times of high stress in some known and familiar contexts and with familiar support/people available. • The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention, and generalisation of skills and therefore on the result of any assessment • Student will have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum • Student may or may not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency diagnostic team • Could communicate or benefit from communicating using Augmented and Alternative Communication • Some or all aspects of language acquisition are significantly below age expected levels • Significant speech sound difficulties, making speech difficult for all listeners to understand when out of context (and sometimes where it is known). Must have an identified Speech, Language and /or Communication Delay/Disorder This could be difficulties in: • Understanding and/or using language. • Speech Sound development • Social Interaction Identification: • Diagnosed by a Speech and Language Therapist	Please refer to information contained within the Range 4a Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance

	- Students with Developmental Language Disorder (DLD) may have associated social communication difficulties - Students with DLD may have difficulties with literacy associated with writing fluency, reading comprehension and spelling Students with DLD may have behavioural, emotional and social difficulties which impact on everyday interactions and learning	
Range 4b	Student will have communication, and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available. - The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment - Could communicate or benefit from communicating using AAC - Some or all aspects of language acquisition are significantly below age expected levels - Significant speech sound difficulties, making speech difficult for all listeners to understand when out of context (and sometimes where it is known). Must have a diagnosis of Developmental Language Disorder (DLD) The main categories are: - Mixed receptive/expressive language disorder - Expressive only language disorder - Higher order processing disorder - Specific Speech Impairment Identification: - Diagnosed by a Speech and Language Therapist - Students with DLD often have associated social communication difficulties evident in rigid and repetitive behaviours - Students with DLD have difficulties with literacy associated with writing fluency, reading comprehension and spelling, problem solving and reasoning in addition to contextual based Math's – more evident in mastery curriculum - Students with DLD have difficulties with numeracy associated with mathematical concepts, word problems and working memory	Please refer to information contained within the Range 4b Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance

Range 5 Severe	Student will have communication, and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available.	Please refer to information contained within the Range 5 Communication and Interaction Speech, Language and Communication Needs section of the School Age Guidance
Range 6 Profound	Student will have communication, and interaction needs that profoundly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available. Students at range 6 will need an environment where interpersonal challenges are minimised by the adult managed setting.	Please refer to information contained within the Range 6 Communication and Interaction: Speech, Language and Communication Needs section of the School Age Guidance

Communication and Interaction: PfA Outcomes and Provision

	PfA Outcomes			
	Employability/Education	Independence	Community Participation	Health
Post 16	YP will have appropriate communication and interaction skills to facilitate successful access to apprenticeships, internships, traineeships as required. YP will have appropriate communication and interaction skills to facilitate the development of relationships with peers within the workplace/education environments to promote emotional wellbeing. YP will demonstrate appropriate communication skills, written or verbal, to enable successful application for jobs or higher education. YP will be able to respond appropriately to questions, displaying the communication skills required to present their skills and attributes within an interview situation.	YP will have the communication and interaction skills to participate in residential and local learning options where relevant. YP will have the communication and interaction skills to facilitate independent living (shopping, travel). YP will have the communication and interaction skills to enable them to discuss their views and opinions in relation to future living arrangements. YP will be able to access information relating to travel and transport to facilitate independent travel appropriate to individual circumstances.	YP will demonstrate appropriate communication and interaction skills to be able to access community, leisure and social activities within the local community in accordance with the YP's preference. YP will be able to communicate their choices and preferences to ensure their personal wellbeing within the community. YP will demonstrate appropriate communication and interaction skills necessary to successfully engage in voluntary work and/or community-based projects/initiatives. YP will be able to communicate effectively with relevant agencies and /or emergency services as required.	Young Person (YP) will access information relating to relevant health services in order to maintain good health. YP will take responsibility for dental, medical and optical appointments, communicating their needs and interacting with appropriate staff to arrange these. YP will have the communication and interaction skills necessary (in the context of individual circumstances) to articulate health concerns/needs to relevant health professionals during appointments.

Post 19	YP will demonstrate appropriate communication and interaction skills necessary to successfully engage in paid work, voluntary work or higher education.	YP will have the communication and interaction skills to enable them to arrange independent/supported living options as applicable.	YP will be able to communicate appropriately with professionals from adult social care in order to access assistance as required. YP will be able to interact effectively with others within a range of social situations, including online, in order to make and maintain appropriate reciprocal friendships and relationships.	YP will access information relating to relevant health services in order to maintain good health. YP will take responsibility for dental, medical and optical appointments, communicating their needs and interacting with appropriate staff to arrange these. YP will have the communication and interaction skills necessary (in the context of individual circumstances) to articulate health concerns/needs to relevant health professionals during appointments.
Provision	Clear information given to relevant others in relation to the preferred communication method of the YP. Provision of education/workplace information in a range of forms as may be appropriate to individual needs. This may include enlarged print, braille, audio, electronic and visual information as appropriate. Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio aids; electronic voice output communication aids (VOCA) as appropriate.	Clear information given to relevant others in relation to the preferred communication method of the YP. Provision of information relating to local learning options, living provision and transport in a range of forms as may be appropriate to individual needs. This may include enlarged print, braille, audio, electronic and visual information as appropriate. Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio aids; electronic voice output communication aids (VOCA) as appropriate.	Clear information given to relevant others in relation to the preferred communication method of the YP. Provision of information relating to community-based activities in a range of forms as may be appropriate to individual needs. This may include enlarged print, braille, audio, electronic and visual information as appropriate. Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio	Clear information given to relevant others in relation to the preferred communication method of the YP. Provision of health services information in a range of forms as may be appropriate to individual needs. This may include enlarged print, braille, audio, electronic and visual information as appropriate. Access to appropriate strategies and resources to facilitate the YP's communication and interaction skills. This may include access to visual approaches, such as PECS; access to augmented and alternative communication; BSL or SSE; hearing aids/cochlear implants; radio aids; electronic voice output communication aids (VOCA) as appropriate.

	Adult support to facilitate alternative/adapted forms of communication as required. Opportunities to interact with peers through supported social activities. Provision of information and instruction at a level appropriate to the needs of the YP. Repetition and reinforcement as required. Alterations may need to be made to the pace of delivery. Access to electronic forms of communication (phone, text, email), modified if necessary to assist workplace operation. This may include assistive technology. Advice and guidance from SALT, HI team/ToD, VI team as required.	Adult support to facilitate alternative/adapted forms of communication as required. Adult support to facilitate independent living as required (transport, shopping, bills). Access to electronic forms of communication (phone, text, email, social media), modified if necessary to assist accessibility. This may include assistive technology. Advice and guidance from SALT, HI team/ToD, VI team as required.	aids; electronic voice output communication aids (VOCA) as appropriate. Community based activities/groups appropriate to the YP's age and developmental level designed to facilitate the development of friendships through communication, interaction and shared interests. Adult support to facilitate alternative/adapted forms of communication as required. Access to electronic forms of communication (phone, text, email, social media), modified if necessary to assist accessibility. This may include assistive technology. Advice and guidance from SALT, HI team/ToD, VI team as required.	Adult support to facilitate alternative/adapted forms of communication as required. Access to electronic forms of communication (phone, text, email), modified, if necessary, to assist with the making and checking of appointments. This may include assistive technology. Advice and guidance from SALT, HI team/ToD, VI team as required.
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