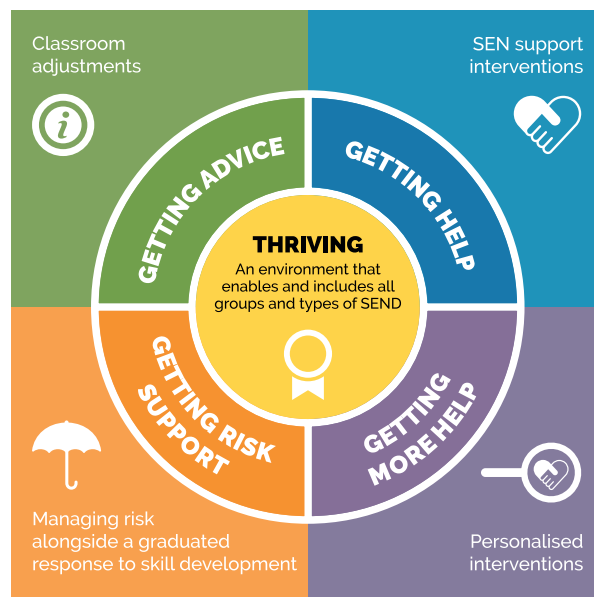![Tameside Metropolitan Borough]

SEND Children Thrive
Matching Provision to Need
Post 16

The THRIVE conceptual framework was developed by a collaboration of authors from the Anna Freud National Centre for Children and Families and the Tavistock and Portman NHS Foundation Trust

SEND Children Thrive
Matching Provision to Need

Tameside
Metropolitan Borough

Contents

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Schools and settings

Tameside

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Lewis Jowett - Broadbottom Primary

Kristy Todd - Broadoak Oasis Academy

Kelly Quinn - Buckton Vale primary

Michelle Bradley - Canon Johnson

Lyndsay Buckle - Canon Johnson CE Primary

Rachel Bardsley - Canon Johnson CE Primary

Debra Rafferty - Corrie Primary

Beverley Oldham - Discovery Academy

Elizabeth Hill - Endeavour Academy

Clare Stewart - Fairfield High School

Lauren Hughes - Fairfield road

Kelsie Baguley - Fairfield Road Primary

Fiona McCauley - Flowery Field

Helen Linder - Godley Primary

Nazia Suleman - Gorse Hall Primary

Kathy Casey - Great Academy Ashton

Nazira Frost - Greenfield Primary

Kim Ritson - Greenside Primary

Anna Szczotka - Greenside Primary School

Lindsey Taylor - Greswell Primary

Louise McMahon - Hawthorns

Jenna Boult - Holden Clough Primary

Pauline Nixon - Holy Trinity (Ashton-u-Lyne)

John Ross - Hyde Community College

Rachell Farebrother - Linden Road Academy

Rachel Cooper - Linden Road Academy

Lianne Marshall - Livingstone Primary

Emma Brennan - Manchester Road Academy

Emma Gorton - Micklehurst All Saints

Kelly Titterington - Milton St John's Primary

Ellen Patel - Moorside

Rachel Hindle - Oakdale

Anna Evans - Oakdale

Paula Anderson - Oakfield Primary

Anne Marie Spence - Our Lady of Mount Carmel

Zuzana Evans - Parochial Primary

Jennie Burlinson - Pinfold Primary

Leanne Ray - Poplar Street

Linda Field - TPRS Elmbridge School (Key Stage 2/3 provision)

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Tameside
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Lancashire

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Elaine Healey - Our Kids Eyes, Tameside

Lorraine Hopkins and Emma Lewis - Early Help, Neighbourhoods and Early Years Service

Geoff Catterall (Head of SEND) and SEND Board for Salford

Deanne Shaw - Salford Parent Voice

Margaret Gun - Starting Life Well

Rebecca Shirt, Fiona Taylor, Ellen Fleetwood - Salford Speech and Language Therapy Service

Simone Leese, Emma Kay Belcher, Victoria Buckley, Laura Jenkins - Autism, Communication, Education (ACE) Team

Asma Hughes - Team Leader/ Specialist Teacher within the Cognition and Learning Team, Learning Support Service (LSS)

Daniel Downes - Team Leader, Visual Impairment Education Team, Learning Support Service

Jane Angus - Team Lead for the Service for the Hearing Impaired / Qualified Teacher of the Deaf, Learning Support Service

Mary Kean - Qualified Teacher of the Deaf

Mandy Kast - Paediatric Therapy Team Leader & Highly Specialist Paediatric Occupational Therapist

Kate Greaves - Highly Specialist Paediatric Occupational Therapist

Jonathan Riemer - Highly Specialist Paediatric Physiotherapist

Patricia Stone - Specialist Teacher for the Visually Impaired

Steve Clarke - Primary Inclusion Team

Elaine Boulger - Safeguarding

Pauline Copeland - Harmful Sexual Behaviour Pathway

Kay Davidson - Youth Justice Service

Jane Davies - Child and Adolescent Mental Health Service (CAMHS)

Cath Beresford - Salford SEN Team Tameside and Glossop Child SALT team

Netty Llewellyn - CLASS, Tameside

Julie Chorlton, Jane Hopkins and Audrey Eastwood - BLISS, Tameside

Amanda Edwards - Advisory Teacher, Pupil Support

Paula Hull - Healthy Young Minds

Heather Morris - Tameside SEN Team

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Welcome!

This resource was developed by the Educational Psychology Service in consultation with schools, settings and services. It has been a pleasure to hear about all the amazing work that happens across our network of schools and settings. The resource aims to provide a tool to support excellent practice across Special Educational Needs and Disability (SEND) provision in educational settings and promote positive outcomes for children and young people identified as having additional needs. This tool is reflective of the LAs graduated response to SEND and embodies 2014 reforms* as it is collaborative, puts children and families at the centre, is transparent and it has a focus on outcomes.

We aspired to develop a resource that raised the standards of education and support for SEND children/young people through the sharing of best practice and known evidence-based interventions. The Special Educational Needs and Disability Co-ordinators (SENDCo) of the local areas have contributed with the ways of working that are effective in their schools and settings (practice-based evidence). They have been generous with their ideas and challenged thinking with regards to the high standards they promote and expect for their SEND families.

The THRIVE model has been used because the language is positive and appropriate for families who may want to explore the resource and it brings together the SEND and Mental Health in Education agendas**. We have also developed a one page print out for parents, which can be used to help them explore collaboratively with school staff where their child may sit along the SEND process at different time points.

In the past parents have told us that they have most difficulties with the SEND processes at the early stages of identification of needs and that practice is inconsistent between schools. The aspiration is that children, schools and families can feel confident that needs can be met in all of our schools and educational settings, at all levels of need.

We know our talented and committed SENDCo workforce are keen to ensure that parents feel supported throughout the whole SEND process; that parents and their children are guided to take an active role in decision making from very early on in the process. The best SENDCos are able to do this through high quality chairing of support meetings and through creative ways of ensuring children make a meaningful contribution to their planning.

It is our hope that through this collaborative work SENDCos will be empowered to advocate for SEND children from classroom practice to points of provision and to help the wider workforce understand that support needs to be targeted, evidence-based and focussed. Together we can ensure that SEND children THRIVE!

Claire Jackson, Executive Principal Educational Psychologist

*Children and Families Act 2014
**Department of Health; Department of Education; Transforming Children and Young Peoples Mental Health:
A Green Paper (December 2017) / Special Educational Need and Disability Code of Practice (0-25) 2014

Thrive Framework and CoP

This resource is aligned to both the SEND Code of Practice and THRIVE Framework, the model for reform to improve services for children and young people's mental health. The aim is to align the processes and use the positive messages from the THRIVE Framework that complement the changes we want to see for SEND children.

Classroom adjustments

SEN support interventions

GETTING ADVICE

GETTING HELP

THRIVING
An environment that enables and includes all groups and types of SEND

GETTING RISK SUPPORT

GETTING MORE HELP

Managing risk alongside a graduated response to skill development

Personalised interventions
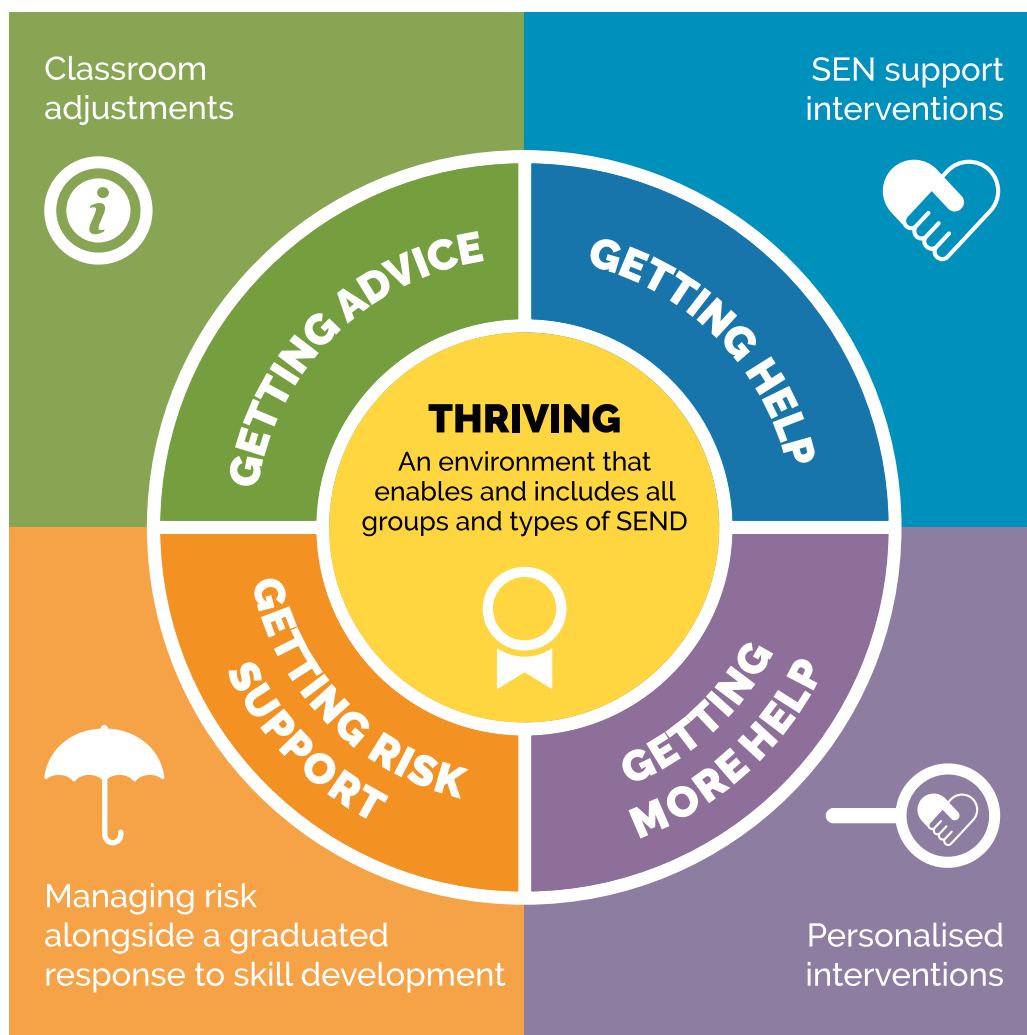
How to use this resource

The resource is separated in to three parts; 'Best Practice Walkthrough', 'Main THRIVE Tool' and 'Getting Risk Support'.

'Best Practice Walkthrough' gives an overview of Special Educational Needs (SEN) and the graduated response. It also provides guidance documents for parents.

The 'Main THRIVE Tool' is organised by type of need and key stage. The sections cover:

• Getting Advice (Adjustments in the Classroom)

• Getting Help (Targeted Interventions)

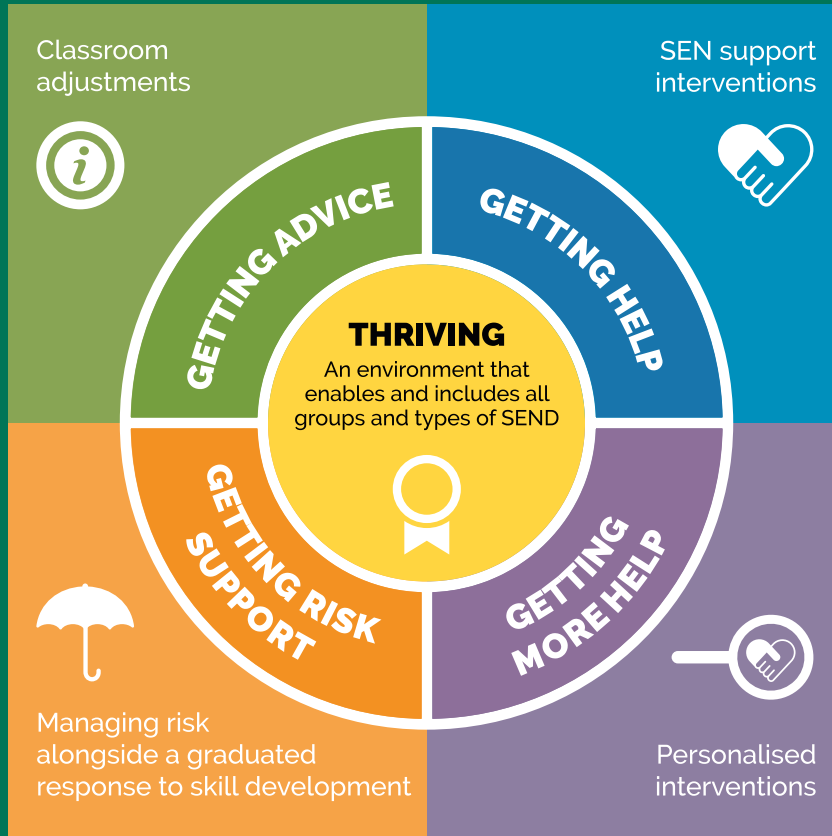• Getting More Help (Specialist Interventions)

Strategies are suggestions and not a tick list and it should be the case that some children just need the first section and others need the first two and others need all three.

Hyperlinks have been included within the document to make it easy to locate information about suggested approaches and interventions. A glossary is included at the end of each key stage, detailing information and costings for each intervention in response to consultation with schools and settings.

The THRIVE model has an additional section about 'Getting Risk Support' and we have included a corresponding section to support schools and settings to manage risk in relation to SEND. It is acknowledged that this is a standalone section that may be used at any point by staff to support with planning around children presenting with risk alongside the graduated response above. It is in no way a replacement for advice from local safeguarding boards or children mental health pathways.

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SEND Children Thrive
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Best Practice Walkthrough Post 16

Classroom adjustments

SEN support interventions

GETTING ADVICE

GETTING HELP

THRIVING
An environment that enables and includes all groups and types of SEND

GETTING RISK SUPPORT

GETTING MORE HELP

Managing risk alongside a graduated response to skill development

Personalised interventions

THRIVING!

Whole Setting Approaches

Education communities that are THRIVING for all staff and children and young people (CYP) tend to be more effective at meeting SEND needs. In the context of a setting with Quality First teaching and a broad, balanced and stimulating curriculum offer, the graduated response to SEND approach will work best.

In settings where SEND is a key focus for the Leadership Team when analysing attendance and exclusions data, this analysis effectively informs developments in the setting in relation to SEND. The most experienced Special Educational Needs and Disability Co-ordinators (SENDCo) and Inclusion Leads have a good overview of the skill sets of teaching and support staff in relation to SEND. They will ensure there is access to training for all staff on SEND and vulnerable groups on a needs led basis. This will lead to teachers having ownership of the progress of all young people within their classes.

All CYP will thrive in settings that are nurturing and inclusive; that have good systems for supporting individuals and monitoring issues pertinent to groups, for example, use of student council systems and regular opportunities for feedback from young people and staff. Inclusive and differentiated behaviour policies embed reasonable adjustments into the setting's response to behaviour. Examples include:

 Behaviour Regulation Policy.pdf

There are many programmes and accreditations that can support settings to embed inclusive practice at whole setting level including:

Emotionally Friendly Settings
www.emotionallyfriendly.co.uk
Dyslexia Friendly Schools
www.bdadyslexia.org.uk
Inclusion Charter Marks
http://iqmaward.com/

SENDCo comment:

Skills audits that come with these whole school approaches help to understand the strengths of the workforce and identify gaps in knowledge to inform the staff training offer.

Emotionally Friendly Schools Champion

Understanding Local Need

The spirit of the changes to SEND legislation in 2014 encourages professionals to identify how they are part of a wider system and that collaboration with partners is a key duty. It is important that SENDCo's, Inclusion Leads and Leadership Teams are activity engaged in the local vision and priorities for SEND young people and families. They will have a good understanding of their setting data and how that compares to local and national trends. Education settings that work in collaboration with the LA on identifying and addressing strategic issues will drive standards across the network of SEND professionals and ultimately have positive outcomes for the SEND population. You can find the current strategic priorities on the Local Offer. Tameside appreciates the time commitment SENDCos/ Inclusion Leads give to decision making panels. The feedback we get from participants is that it is mutually beneficial. Get involved!

Post-16 Setting SEND Data Profile

Our SENDCo practitioners and Inclusion Leads have a good grasp of the legal duties and entitlements of SEND young people. They should have an overarching understanding of budgets for SEND CYP. We are working together to enable SENDCos and Inclusion Leads to collate and analyse their SEND data and share their findings with services in order to maximise the impact of resources. SENDCos and Inclusion Leads need to be able to be creative when planning group support to ensure young people access timely and appropriate intervention to address their areas of need.

SEND Data Profile.pdf

SENDCo comment:

Data informs Continuing Professional Development (CPD) requirements of all school staff. Pupil progress meetings include a focus on children with SEND. Where progress is a concern, action is taken to ensure all staff have an understanding of the difficulties children may be experiencing and to empower them to try out new strategies through in-house or external CPD which focuses on the needs of children they are teaching.

We also ensure Teaching Assistants (TA's) are involved in all whole school CPD and they attend all multi-agency and review meetings for the children they support. Outside agency and in-house training is also used to support TAs to provide the best provision possible for children they are supporting.

SENDCo and Deputy Headteacher

SENDCo and Inclusion Lead as Advocates

Just as a subject lead in a setting will champion the importance and quality of the teaching of their subject the SENDCo/Inclusion Lead maintains an overview of the quality of the teaching of SEND CYP. The SENDCo/Inclusion Lead can do this through their SEND and inclusion polices. SENDCo's tell us that they feel they need a good knowledge of legal frameworks around exclusion to inform senior leadership regarding decisions around exclusion. Leadership teams have a lot to think about and they expect their SENDCo/Inclusion Lead to be advocating for the rights of SEND young people across all aspects of their education experience.

SENDCo comment:

Sadly, SEND children at risk of exclusion has been a really big issue for the last few years at our school. Advocating for SEND CYP was about staff buy in to understanding their needs and about how 'education' isn't just about academic but about children learning and developing in all and every aspect of life.

Thinking about the advocating for SEND CYP of different presentations with staff is a process. From the closest staff supporting them, widening that further and gradually and then whole staff discussions and dedicated time in staff meetings. After any big 'incidents' there were smaller briefings and opportunities for staff to be open and ask direct questions.

Experienced SENDCo

The Department for Education for Further Education settings states that under the Equality Act (2010):

Colleges must not discriminate against, harass, or victimise disabled children and young people and must make reasonable adjustments to prevent them being placed at a substantial disadvantage. This duty is anticipatory – ***it requires thought to be given in advance to what disabled young people might require and what adjustments might need to be made to prevent disadvantage****. (Further education: guide to the 0 to 25 SEND Code of Practice, 2014, pg. 9).*

For disabled young people, this included the duty to make reasonable adjustments to policies and practices and the provision of auxiliary aids. Settings must ensure that their policies and practices do not discriminate against young people by unfairly increasing their risk of exclusion.

Experienced SENDCos/Inclusion Leads will support and challenge teachers about the adjustments they are making for young people with SEND who have behaviours that challenge. Behaviour policies should be reviewed by the SENDCo/Inclusion Lead to ensure that practice doesn't discriminate against any particular type of need.

Our SENDCos and data tell us that often a young person is excluded prior to the identification of SEND.

Early intervention to address underlying causes of disruptive behaviour should include an assessment of whether appropriate provision is in place to support any SEN or disability that a pupil may have. The head teacher should also consider the use of a multi-agency assessment for a pupil who demonstrates persistent disruptive behaviour. Such assessments may pick up unidentified SEND but the scope of the assessment could go further, for example, by seeking to identify mental health or family problems.

Educational Psychologist comment:

In our profession we are trained to understand behaviour as a form of communication. I have attended many exclusions appeals as a SEND expert where the school have failed to complete early assessment and identification of need and the child's SEND has become apparent post exclusion.

Experienced Educational Psychologist

Collaboration with Young People and Their Families

The more experienced SENDCos/Inclusion Leads are also ensuring that SEND young people and their families are well informed about provision and approaches used across the setting. Through robust communication systems that provide regular sharing of information between the young person, the setting and the family (in line with the young person's wishes). They are also gathering the views of SEND young people and their families about what they would find helpful more broadly and feeding these views into the wider planning of support across the setting. For example, through the use of questionnaires and multi-agency coffee mornings alongside sharing information about other SEND support services. They are able to support young people and their parents/carers to understand the whole of the SEND pathway and where their needs are currently met on a continuum.

Guide to SEND Support.pdf

Guide to EPS.pdf

SEND young people's voices are also regularly and authentically gathered and used to inform development work and practice across the setting.

Parents of SEND children are used as experts to inform the approaches being used and the young person's support package.

Advice to SENDCo comment from parent:

"Realise that the parents are experts and be open to suggestions of new ways of doing things that have been successful elsewhere"

Special Needs Jungle

What is a Special Educational Need?

In Tameside we advocate for a broad definition of Special Educational Needs and Disability (SEND). If a child or young person needs adjustments to be made in order to be included or make progress, then consideration should be given to them having a Special Educational Need. We also recognise the benefits of identifying SEND early and how being responsive to individual needs early can have positive impacts on children and young people's outcomes in the longer term.

The Special Educational Needs and Disability (SEND) Code of Practice (Department for Education [DfE] & Department of Health [DoH], 2015) sets out guidance and expectations in relation to identifying, assessing and providing for children and young people (CYP) with special educational needs. It tells us in relation to identification:

A child or young person has a special educational need if they have a learning difficulty or disability which calls for special educational provision, namely provision that is different from or additional to that normally available.

A young person has a learning difficulty or disability if he or she:

- *'has a significantly greater difficulty in learning than the majority of others of the same age'; or*
- *'has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions'.*

(SEND Code of Practice, 2015, pg. 15).

The Code of Practice (2015) and Children and Families Act (2014) make it clear that settings have to meet the needs of all CYP with SEND, including those who do not have an Education, Health and Care Plan (EHCP). All settings are required to use their funding as part of a graduated response to meeting young people's needs.

Identification of SEND

Most education settings choose to hold a SEND register to support them with the identification of need. Settings are asked to categorise the nature of the young person's SEND through the census data. It is therefore important that this identification of need is based on careful assessment over time and the primary need categorised accurately. Many Special Educational Needs and Disability Co-ordinators (SENDCo)/Inclusion Leads embark on a cycle of plan-do-review in order to explore the nature of the CYP's SEND prior to recording the primary need in order to ensure an accurate classification is recorded. This data should then inform local strategic developments and commissions. The data is often included in the setting's SEND information report for young people and their parents/carers on the setting's website.

Identification of Need.pdf

Case Study - Categorisation.pdf

Graduated Response

The graduated response encourages teachers to revisit, refine and revise decisions and actions that have been made, in order to grow their understanding of young people's needs and provision. The SEND Code of Practice (DfE, 2015,pg. 100) encourages us to provide the right support at the right time. It is graduated in that for some young people they will require small adjustments within the classroom to be successful, whereas for others they will require a highly personalised timetable of support and intervention in order to make progress and be included. The code highlights;

- Where a young person is identified as having SEND, the setting should take action to remove barriers to learning and put effective special educational provision in place.
- Once a young person is identified as having SEND their family must be informed. The setting must work with parents/carers, listening to their views and involving them in any decision making and planning.
- The provision in place must be reviewed termly and involve the young person and their family.

There are a wide range of teams available across Tameside who can support settings to meet the needs of CYP with a wide range of SEND. It may also be decided that specialist advice from professionals is required to meet the needs of CYP for example Speech and Language Therapy (SALT), Healthy Young Minds (HYM), Educational Psychologist Service (EPS), Occupational Therapy (OT) and/or Physiotherapy Service.

Further information about these teams and how to access them is available on the Local Offer page for Tameside. Any recommendations provided by professionals should be clearly incorporated and referenced in planning for the CYP.

This **SEND support** should take the form of Assess-Plan-Do-Review Cycles, through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the young person's needs, alongside what support the young person requires to make good progress and secure good outcomes (SEND Code of Practice, 2015, pg. 100, 6.44). The Assess-Plan-Do-Review Cycle is the foundation of the graduated response and key to meeting the needs of all CYP identified as having any form of SEND.

Reflective Practice and SEND

The best teachers reflect on their teaching style and approach and revise their approach based on what works well for them and the CYP they work with. This is a crucial aspect of working with our SEND population as they are all individuals; what works for one young person may not work for another even with a similar SEND profile or diagnosis. Staff with good self-awareness and a willingness to adjust to the young people they engage with, experience the greatest success within the classroom and with SEND support.

'Reflective Practice is learning through and from experience towards gaining new insights of self and practice.' (Finlay, 2008)

Reflective Practice is to critically evaluate experience from both the past and present and to use that information to inform and plan teaching and learning.

Reflective Practice is: about learning from others;
a shared activity;
about improving your objectivity; and
a key factor in improving learner experience.
.

Reflective Practice supports good teaching and support for SEND pupils: Reflective Practice supports identification of and provision for SEND young people and fits well with the Assess-Plan-Do-Review Cycle.

The Assess-Plan-Do-Review Cycle

'Where a pupil is identified as having SEND, early years' settings, schools and colleges should take action to remove barriers to learning and put effective special educational provision in place' (DfE, SEND Code of Practice, p.100). The SEND Code of Practice promotes the use of the 'Assess-Plan-Do-Review' Cycle to support this process. This works by revisiting, refining and revising our understanding of a student's needs and what works to support them.

This means that the understanding of the young person's needs should become clearer over time. This does not mean starting again; current understanding and approaches should clearly be informed by what has gone before. In SEND there has been a culture of each new teacher or practitioner working with the young person wanting to formulate their own overview of need, which is likely to be frustrating for the young people and parents/carers who experience a disconnect across the system. A good SENDCo/Inclusion Lead will try to understand differences of opinion or experiences and make sense of them to inform the young person's needs and provision.

Parent comment:

"We want to know that when our children go to school, … they are taken care of, looked after, kept safe - but we also want to know that they can do everything that they could possibly do to reach their full potential, whatever that potential may ultimately be. That they are thought of not as a burden, but our children are thought of as an asset."

Carrie Grant, TV Presenter & parent

Our experienced SENDCos have created one page versions of the ASSESS-PLAN-DO-REVIEW Cycle to support parental understanding.

Parent Explanation.pdf

ASSESS-PLAN-DO-REVIEW Cycle

Review

Following the plan phase, key educational professionals, SENDCo/Inclusion Lead, parent/ carer and young person should meet to review the plan. The review should include:

- Evidence of the impact of the plan, both in terms of the desired outcomes and the success criteria.
- Everyone's views on progress and impact, including the young person themselves.
- A plan for next steps. Does there need to be another cycle of 'assess-plan-do-review' or can the young person's needs now be met through 'Quality First Teaching'? Does a referral need to be made to another service?
- A written record.

If it is agreed that the young person would benefit from further support, then a second round of 'assess-plan-do-review' should begin.

Assess

Clear and comprehensive assessment of the young person's needs by key educational professionals, Special Educational Needs Coordinator (SENDCo)/ Inclusion Lead, parents/carer and young person, based on a combination of:

- Discussions to gather the views and aspirations of the young person and their family.
- Universal and targeted in-house assessments and observations carried out by a range of setting staff.
- Young person's current attainment and progress.
- Young person's previous attainment and progress.
- Tracking of data and comparisons with national data.
- Any relevant assessment information provided by external agencies e.g. Health, Educational Psychology (EP), and Social Care.

Do

In this phase the plan is put into action. The SEND Code of Practice makes it clear that it is the responsibility of class/subject teachers to implement the plan on a day-to-day basis. This should be supported by the SENDCo. The 'do' phase should involve teachers:

- Delivering 'Quality First Teaching' to all learners.
- Implementing any adjustments, specific strategies, interventions, or approaches to teaching that have been identified as teacher-led within the 'plan' phase.
- Managing any teaching assistants (TAs) or Support Assistants who are supporting learners with SEND within the class.
- Continually assessing and monitoring the young person's progress and making any necessary adjustments.
- Communicating with TAs and any other teachers providing interventions to learners and making plans for them to generalise their skills within the wider education environment.
- Communicating how things are going with the learner, their family and the SENDCo/Inclusion Lead.

Robust information should be gathered during this phase so that the following can be discussed at review:

Plan

Following the assessment phase, key educational professionals, SENDCo,parent/carer and young person, meet and agree a plan of action. This plan should be outcome focussed (e.g. improve, develop, and achieve) and should include:

1. SMART (specific, measurable, achievable, relevant, time-based) targets.
2. Details of the adjustments, equipment, support, and interventions that need to be put into place to fulfil the plan.
3. Details of who will be running the programme and when.
4. Details of success criteria, including how progress will be measured, when and by whom.
5. A date for review, typically 6-8 weeks.

The plan should be recorded and circulated to all relevant parties before it begins. Any training needs should be identified and addressed prior to the start of the 'do' phase.

Learn

At the end of each cycle there should be an explicit pause built into the process within which professionals, the family and the young person reflect on what has been learnt (e.g. regarding their learning preferences, motivation, approach, strategies that support and those which do not). This learning should be explicitly incorporated into any subsequent cycles of 'assess-plan-do-review' and into all 'Quality First Teaching' that the young person receives. In this way there should be a clear thread linking subsequent plans and approaches.

Gathering and Responding to Young People's Views

SEND young people have the same rights as non-disabled children and young people to participate in decisions and issues that affect them. The importance of the participation of SEND CYP is reflected in both the UN Convention on the Rights of the Child and in duties placed on the local authorities to support and involve young people in decision-making. Sadly, research suggests that despite this SEND young people in practice remain inactive in decisions about their education and future.

Why gather the views of young people with SEND?

Research suggests that listening to the views of young people with SEND is beneficial for several reasons. There are clear advantages including increased motivation, independence, perception of personal control and progress. Todd (2003) notes that if young people are part of decision-making processes they can provide appropriate information about their skills and abilities and offer their views about possible interventions; enhancing the likelihood of successful outcomes.

The SEND Code of Practice makes it very clear that throughout the process of assessment the young person's views should be sought. Every cycle is an opportunity to enable the CYP to be involved in decision making. It is important to have regard to the views, wishes and feelings of the young person and for these views to be clearly incorporated into Assess-Plan-Do-Review Cycles.

'Planning should start with the individual and local authorities must have regard to the views, wishes and feelings of the child, child's parent or young person, their aspirations, the outcomes they wish to seek and the support they need to achieve them.' (SEND Code of Practice, 2015, pg. 147).

'After compulsory school age (the end of the academic year in which they turn 16) the right to make requests and decisions under the Children and Families Act 2014 applies to young people directly, rather than to their parents. Parents, or other families members can continue to support young people in making decisions, or acting on their behalf, provided that the young person is happy for them to do so, and it is likely that parents will remain closely involved in the great majority of cases.' (Further education: guide to the 0 to 25 SEND Code of Practice, 2014, pg. 12)

Throughout the assessment/planning process staff should:

• Focus on the young person as an individual.
• Enable the young person to express their views wishes and feelings.
• Enable the young person to be part of the process.
• Ensure what is being discussed is easy for the young person to understand.
• Highlight the young person's strengths and capabilities.
• Elicit what they have done, what they are interested in and what outcomes they are seeking in the future.

Using a person-centred approach, involving young people and their families, is key.

1. Things to consider

- The developmental stage of the young person;
- How they like to communicate and their level of understanding (e.g. are they able to share their views verbally or would they be best supported with a visual activity, such as picture sorting, or multiple-choice questions?
- Whom they like to communicate with – is there a member of staff whom they feel most comfortable being honest with? Are parents/carers better placed to gather views at home?

2. What views to gather?

- Likes and dislikes (What subjects do they like / like less? What do they like to do outside of education?)
- What support they value (What helps them to learn? What helps them less?)
- Who supports them to make progress and develop (Who can they go to that can help them? Who helps them feel safe or manage their feelings, who helps with their learning?)
- Long-term goals and aspirations in relation to preparing for adulthood (What would they like to be better at? What job would they like when they are older? What college courses / qualifications might they like to do?)
- Young people's views should be sought across the four Preparing for Adulthood outcomes; paid employment, independent living, good health and friends, relationship and community (community inclusion/participation).

3. How can we do it?

A variety of methods can be used to gather CYP's views. Some young people will be happy to talk and complete questionnaires whereas others will need the practitioner to be more creative (e.g. young people with speech and language difficulties or young people with profound and multiple learning difficulties). All young people should be encouraged to give a view, to gain a realistic view of how they perceive their educational experiences. This will then help highlight actions that will support adaptations to Quality First Teaching and other more targeted interventions.

For young people who may not communicate verbally or prefer using visual supports try non-verbal methods e.g.

- taking photos of all of their favourite parts of the classroom;
- card sorts to pick favourite subject / least favourite;
- line up photos or pictures in order from favourite to least favourite;
- card sorts focused on the different elements of the Preparing for Adulthood outcomes.
- projective techniques in which they might select a picture that shows how they feel e.g. the Blob School resources

For young people who are able to communicate verbally, use verbal or written methods (adults could scribe / young person could use speech to text / they could write their own views if they wish). For example (templates included in the Appendix):

· Three wishes – if you could have three wishes about education, what would they be?
· Perfect week – describe your perfect week in detail;
· Good day/bad day – describe what happens on a good day (from the moment you get up)
· Relationship circle (who is important in your life?)
· Decision making profile

Older young people can contribute to planning in well structured meetings. Here are two ways of sharing views and representing planning of actions jointly with CYP in a visual and inclusive way:

· MAP – a visual way of planning for CYP with SEND.
· Planning Alterative Tomorrows with Hope (PATH) – a visual tool for longer term planning as a group.

The importance of enabling young people to have a voice in decisions regarding their life and learning is central to SEND policy. Participation should be encouraged in all decision-making processes including setting individual targets, support plans and contributing to assessments and reviews. Schools and settings need to promote a culture of ensuring student voice across a range of issues and young people need to be taught and supported to contribute appropriately and effectively. It's up to the adults to ensure young people see the impact of their contribution, as many become frustrated when their voice appears to be ignored.

4.Young people's views within Annual Reviews

Annual Reviews can be an intimidating experience for some young people as they are sometimes asked to express their views in a room full of adults. It can be helpful to ensure that their views are gathered well in advance of the meeting, perhaps over several weeks. The young person may prefer to be supported by a key adult or trusted member of staff, in articulating their ideas. They may also wish to be supported by their key adult in the review meeting, for moral support. Alternatively, the young person may wish to prepare a video or PowerPoint to share their views, or to ask a trusted adult to share their views on their behalf without the need to attend the review meeting in person.

It may be helpful following the Annual Review for the young person to talk through the meeting with a supportive adult to answer queries or highlight the actions of the review and the next steps.

> **Young person comment**
>
> "I have never been to an Annual Review…. People think I am stupid and they are probably right…I would like to be a writer in the future but everyone keeps talking about me doing courses in hair and beauty… I really want to go to university but I don't know if I can."
>
> *Year 10, Secondary Student*

Education, Health and Care Plans (EHCP)

Schools and settings have a duty to meet the needs of all their learners and to follow a graduated response to identification and meeting Special Educational Needs. For a small number of low incidence-high need young people the setting may need further guidance and resources from the local authority in order to meet their specific individual needs. In these cases, the setting have a duty of care to apply for an Education, Health, Care (EHC) assessment and the local authority has a duty to respond within legal timeframes. The Education Health and Care Plan (EHCP) is a legal document which sets out a description of a young person's special educational, health and care needs and what provision (what will be done) to meet their needs to enable the young person to make progress. It is crucial that the young person and the family are fully informed of the Education, Health, Care needs assessment process and supported through it. Parents routinely report that they feel set up for a battle and that they have multiple professionals and panels contradicting each other, which causes understandable frustration. It is the duty of all SEND professionals to have a robust and working knowledge of processes locally and nationally so that parents and young people can be supported through the process amicably.

There are a number of resources available to explain an EHCP to CYP.

Guide for CYP.pdf

Who Requires an Education Health and Care Plan?

Generally, only a very small number of CYP with complex and severe needs, who require very high levels of individualised support, are issued with an EHCP. All schools and settings have a budget that is available to support CYP with SEND. Most CYP will access help in their educational placement through the level known as SEN Support or as we describe it within the Main THRIVE tool 'Getting Help' and 'Getting More Help'.

Where provision cannot reasonably be provided through services and resources that are normally available, it may be necessary to request an EHC assessment. Schools and settings typically request EHC assessments, but parents and professionals can do too. Young people aged 16 and over have the right to request an EHC assessment independently. Schools, colleges and other bodies can also request assessments but they can only do this with the knowledge and agreement of the young person and/or person with parental responsibility. The young person has to have a special educational need that is severe and/or complex and which has persisted in spite of the setting following the graduated response; including taking all expected steps and using the highest level of its resources to identify, assess and meet the need. The Local Authority (LA) SEND panel also considers whether or not the difficulties are having an effect on the young person's emotional wellbeing.

The Local Offer in Tameside will enable families and practitioners to find out what is available locally and further afield and should help everyone to make the most of many services and opportunities that are available, without the need to have an EHCP.

The EHC Assessment Process

The Referral

This is the first part of the process in making a request for an EHC assessment and is a key document that the local authority will consider when making decisions. It is important for the referral to identify outcomes for the young person and any reports should highlight these outcomes.

The decision to draw up an EHCP will depend on the severity of a young person's needs and if any resources are identified that need adding to those already available.

The referral should be accompanied by evidence of provision made for an individual CYP from the SEN funding within the educational placement. This must take the form of a costed provision map completed on the referral template (please only provide the individual young person's provision map rather than the whole setting provision map). If a young person has support in small groups, please ensure that you divide the cost between the number of young people accessing the group.

The **My Hopes and Aspirations for Tameside** documents completed by parents and CYP should be included. It should be evident that the setting have been working on the aspirations highlighted by parents and CYP.

Settings should make every effort to identify strengths in all areas as well as difficulties. It is also helpful to detail what has worked in the last two/ three cycles of Assess-Plan-Do-Review and what additionality is needed to maintain or enhance the young person's rate of progress.

The Timescales

Time line	Action
Week 0	Request for assessment is made to the local authority by a school, setting, individual with parental responsibility or other professional e.g. Health and Social Care.
Week 0-6	The LA has 6 weeks to make a decision as to whether an assessment should commence. If the LA decide not to proceed with an assessment, setting, young people and parents/carers will be notified in writing with information about the LA decision and parents/carers right to appeal. A follow-up meeting to support settings, young people and parents/carers with next steps following a 'no to assess' decision is available upon request.
Week 6	If yes to assess the EHC assessment starts. The LA must gather advice and information as to: (1) the young person's needs; (2) the provision needed to support those needs; (3) the outcomes that would be expected to result from the provision being put in place. The LA must seek: (a) advice and information from the child's parent or the young person; (b) educational advice and information from the head teacher or principal of the nursery, school, post-16 or other institution that the child or young person is attending (or other appropriate person where this is not available); (c) medical advice and information from a health care professional identified by the responsible commissioning body; (d) psychological advice and information – from an Educational Psychologist; (e) advice and information in relation to social care; (f) advice and information from any other person the local authority thinks is appropriate; (g) where the young person is in or beyond Year 9, advice and information in relation to provision to assist the young person in preparation for adulthood and independent living; (h) advice and information from any person the child's parent and/or young person reasonably requests that the LA seek advice from. The SEND Code Of Practice states that the advice should be clear, accessible and specific (pg. 157, 9.51). There is only one exception to seeking new advice which is where it is agreed, in relation to a particular advice, that existing information and advice is "sufficient" for the purposes of the assessment. The judgement that an individual report is sufficient must be made by all of the following: (1) the LA; (2) the original author of that report, and; (3) the parent or young person. If any one of the above disagrees or is no longer available, then the LA must seek new advice. A LA must not make a "blanket" decision that all existing information and advice is sufficient for a young person, but must look at each piece of advice and request consent from the author and the parent or young person. The SEND Code of Practice (pg. 155, 9.47) advises that parents and young people should be supported to make an informed decision.

The Timescales

Time line	Action
Week 14	A draft EHCP needs to have been produced and sent to the parent or young person by this time. At the same time, the LA must advise the parent or young person where they can find information about the schools and colleges that are available for the CYP to attend. The parent or young person then has at least 15 calendar days after receipt of the draft plan in which to: 1. make representations to the LA about the contents of the draft EHC plan; 2. ask for a meeting with an LA officer to discuss the draft EHC plan; 3. tell the LA the type of school/college (mainstream or special) and the actual school/college they would like named in the final EHC plan.
Week 16	If the LA decides not to issue an EHC plan, having carried out the EHC needs assessment they must so notify the parent/young person by this date. The parent/young person will have a right of appeal to the Special Educational Needs and Disability Tribunal against the decision to refuse to issue a plan. Where an LA has issued an EHC Plan, the LA must consult with the school/college the parent or young person has requested. School or college should respond to the LA within 15 days (SEND Code paragraph pg. 173, 9.83).
Week 20	Final EHC plan issued by the LA. This must be sent to the parent/carer or the young person; the governing body, proprietor or principal of any school, other institution or provider named in the EHC Plan and the responsible commissioning body.

Annual Reviews of Education, Health and Care Plans

Overview

The Annual Review is the statutory process by which a young person's progress against the outcomes set out in the EHC Plan are reviewed in order to ensure that the provision and targets are up to date and relevant. The review also helps to consider whether the EHC Plan is still necessary to support the young person's needs in the future, and to plan the outcomes for the coming year, setting new outcomes if necessary.

Statutory requirements

- An Annual Review must be undertaken in partnership with the young person and their parent, or the young person (if over 16), and must take account of their views, wishes and feelings, including their right to request a Personal Budget.
- A Personal Budget is the amount of money identified by the LA to deliver aspects of provision set out in an EHC Plan where the parent or young person (over 16 years of age) is involved in securing that provision. The funds may be held and managed either by the LA, school or college; the family; a third-party arrangement; or a combination of the aforementioned.
- The Annual Review process must be completed on or before the anniversary of when the EHC Plan was first issued or the anniversary of the last review.
- In the Early Years an EHC Plan should be reviewed every 6 months up to the child's 5th birthday (SEND Code of Practice, pg. 198, 9.178)

The Annual Review meeting
Before the meeting

- The host (usually the SENDCo/Inclusion Lead in the educational placement) will contact relevant professionals to gather up-to-date reports and must contact the parent and young person to invite them to contribute their views, wishes and feelings.
- The host must send an invitation to attendees at least 2 weeks prior to the meeting date and circulate copies of the gathered reports and views.
- The host should arrange a suitable meeting place, where confidential conversations can be held without disruption.

During the meeting

- The aim of the process is to review the young person's progress towards achieving outcomes and must cover the following:
    - Are the outcomes and objectives still appropriate? Agree new outcomes or short-term objectives if required.
    - Is the educational provision (including any health and social care provision) and the arrangements for delivering still appropriate?
    - Have the aspirations of the young person changed? From Year 9 onwards, Annual Reviews must include an explicit focus on the young person's aspirations for the future in relation to <u>preparing for adulthood</u> outcomes (paid employment, good health, independent living and community inclusion/participation).
    - Is a Personal Budget required?

Following the meeting

- The host must prepare a report including any recommendations for amendments to the EHC Plan, documenting differences of opinion if necessary, rather than a general consensus. This must be circulated to those invited and the LA within 2 weeks of the meeting.
- The LA will consider the review documentation and decide whether the EHC Plan should either remain unchanged; be amended or be ceased. The LA must inform the parent or young person of this decision within 4 weeks from the review date and should be no later than the anniversary of either when the EHC Plan was first issued or the previous Annual Review.

Special review meetings

- The Year 5 Annual Review helps to inform decisions about the transfer from primary to high school and is an opportunity to make clear recommendations about the type of provision a young person's needs on transition to high school. The Year 6 review is then an opportunity to make sure these arrangements are working or consider alternative / additional planning.
- The Year 11 and Year 13 Annual Reviews will be held shortly before a young person leaves school or education. There will need to be a focus on the support needed by the young person in <u>preparing for adulthood</u> considering paid employment, independent living, good health and community inclusion/participation.
- In some cases it may be appropriate to call an Annual Review ahead of the usual timeframe. This would typically be when there has been a significant change in circumstances, where a significant change is anticipated, or where it is felt that the support outlined in the EHC Plan may no longer be needed.

Best practice tips/ things to consider

- Ensure adequate time for planning, organising and completing relevant paperwork following the Annual Review. Invite all relevant professionals who have had recent involvement (last 12 months); it may be helpful to think ahead about these arrangements at the start of the year (e.g. during planning meetings with outside agencies).
- Ensure the communication needs and accessibility of information (e.g. written text) has been considered for all participants. Ensure an interpreter is provided if required (using a professional service rather than a family member or family friend) and consider the use of visuals or other alternative communication methods where appropriate.
- Ensure all attendees are able to contribute to relevant parts of the review. At the start of the meeting it can be helpful to clarify that it is a group process and all attendees are bringing their own skills and expertise to draw upon in the meeting. Using a visual methods (e.g. MAP or PATH) as described in 'Gathering and responding to young people's views' above can help make the process collaborative.
- It can be helpful to spend time with young people and/or parents ahead of the Annual Review to explain the process and ensure that all reports and information have been shared in a way that is accessible. If there have been any particular difficulties or issues, it is important that parents/carers are made aware of these concerns outside of and in advance of the Annual Review, and for this information to not be shared for the first time within the context of a multi-agency meeting.
- Ensure attendees are familiar with the outcomes and objectives and how the educational setting has worked with the young person and their family to make progress towards outcomes.
- Have relevant paperwork and reports from the last 12 months available, this can help to clarify a timeline of events if necessary (e.g. appointments attended) and plans for future involvement (e.g. if a re-referral is required after a missed appointment).
- Celebrate positives and successes e.g. sharing examples of the young person's work or extra-curricular achievements.
- The Annual Review is the opportunity to revisit, refine and revise the outcomes and provision within the EHCP to ensure it is effective in supporting the young person to meet their potential. This should include a detailed discussion about how the provision detailed in the plan has been implemented and the impact it has had in meeting the outcomes and objectives. If something is not working or no progress has been made, it is important to explore the reasons why (e.g. are there barriers to provision being successfully implemented? Is a different approach or type of support needed?) Having these discussions during a multi-agency meeting leads to a collaborative approach to planning provision that draws on the expertise within the room so as to improve the support plan for the coming year.

SENDCo/ Practitioner Wellbeing

The role of the SENDCo/ Inclusion Lead has continued to expand with each revision to the Code of Practice. The role is diverse and interesting, but the pace of change has accentuated SENDCo turnover. SENDCos' roles can be emotional laborious as they are in a position where they are supporting the wellbeing of others; young people, families, teachers and support staff. It is, therefore, essential that they get the support they need to fulfil their vital role for SEND young people. Research (Lewis, 2017) suggest that SENDCo's resilience is protected by access to social support from other SENDCos, having a position in school that enables systemic change (Leadership Team or clear links to), access to training and learning opportunities, and by individual coping strategies with workload and emotionally charged situations.

Research has shown that peer networks can offer valuable support and development opportunities for SENDCos and teaching staff (Hayes and Stringer, 2016). Cluster meetings between settings are often a helpful way to share ideas, training costs and generate solutions to commonly occurring challenges. Similarly, finding time to meet as a staff team can be powerful. School staff who engaged in group problem solving sessions reported they were: 'productive', 'structured' and 'supportive'. All respondents (10 staff) reported an impact on their understanding of SEN, and 90-80% of respondents reported the groups helped them learn new strategies, try new things in the classroom and feel more confident about SEN. 70% reported the groups helped them feel less stressed (Lyons, 2019).

The Educational Psychology Service can facilitate group problem solving sessions and offer supervision to other professionals such as setting staff, which can provide a safe space to reflect on your role, concerns and coping; ask your Educational Psychology service for more details.

Using the Following Sections.

We hope this overview has given you a good understanding of the best SEND practices within settings. The remainder of this document will support you to meet need within your school across the Getting Advice, Getting Help, Getting More Help (Main Thrive Tool) and Getting Risk Support sections of the Thrive Framework.

References

Finlay, L. (2008). Reflecting on 'Reflective practice'. Practice-based Professional Learning Paper 52, The Open University.

Hayes, M. and Stringer, P. (2016) Introducing Farouk's process consultation group approach in Irish primary schools. Educational Psychology in Practice, 32 (2), 145-162.

Lewis, T, F. (2017). Special Educational Need Coordinator (SENDCO) wellbeing: a mixed methods exploration of workplace demands and effective coping actions. University of Birmingham.

Lyons, R. (2019). Reducing Exclusions in Salford: Identifying and Supporting Special Educational Needs (SEN), Summary Report (Part Three). Salford: Salford City Council.

Todd, L. (2003). Enabling pupil participation. Special Children. April/May, 22-25.

Appendix 1: Guidance documents for parents

Overview of SEND Support

Guidance to SEND Support.pdf

What to do if you think your child has Special Educational Needs

EHCP Helpsheet 1.pdf

What is an EHCP Needs Assessment?

EHCP Helpsheet 2.pdf

How do I make a parental request for statutory assessment of SEN?

EHCP Helpsheet 3.pdf

What is an Education Health and Care Plan (EHCP)?

EHCP Helpsheet 4.pdf

What is an Annual Review?

EHCP Helpsheet 5.pdf

Timescales/EHCP Pathway

EHC plan assessment pathway.pdf

Educational Psychology Service

Example of a Parent Coffee Morning.pdf

Appendix 2: Examples of tools to gain pupil views

My Three wishes

My Three Wishes.pdf

Perfect Week

Perfect Week.pdf

Relationship Circle

Relationship Circle.pdf

Decision Making Profile

Decision Making Profile.pdf

Good and Bad Days

Good and Bad Days.pdf

How to share your views for your annual review

How to share your views for your annual review.pdf

Appendix 3: EHCP Request and Annual Review paperwork

1. Referral statutory assessment - template.pdf

0. All about me - hopes and aspirations template.pdf

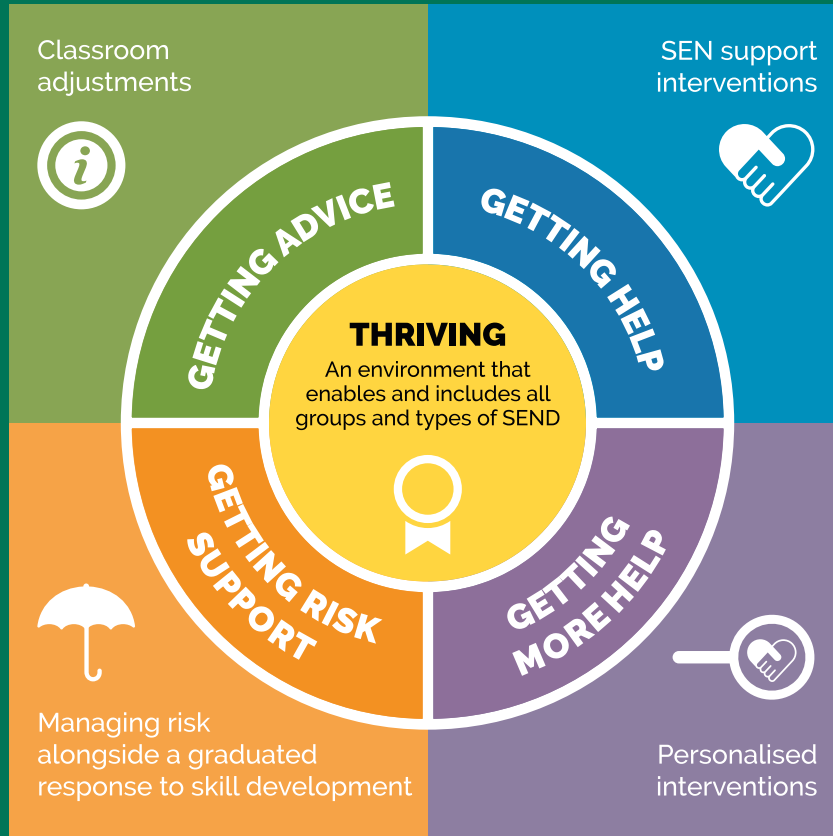*9a. Local guidance for reviewing of an EHCP.pdf*

9. Review of an EHCP - template.pdf

SEND Children Thrive
Matching Provision to Need

SEND Children Thrive
Matching Provision to Need

Main Thrive Tool Post 16

Tameside
Metropolitan Borough

Classroom adjustments

SEN support interventions

GETTING ADVICE

GETTING HELP

THRIVING
An environment that enables and includes all groups and types of SEND

GETTING RISK SUPPORT

GETTING MORE HELP

Managing risk alongside a graduated response to skill development

Personalised interventions

SOCIAL, EMOTIONAL, MENTAL HEALTH

SKILL	GETTING ADVICE Classroom adjustments	GETTING HELP SEN support interventions	GETTING MORE HELP Personalised interventions
General	• Whole setting approaches to promoting emotional wellbeing and mental health such as Emotionally Friendly Settings are in place. • Interventions and approaches to promoting emotional wellbeing and mental health such as Seasons for Growth, .b (Mindfulness in Schools Project), Lions Quest Skills for Action and the Adult Resilience 16-18 programme (FRIENDS programmes). • Staff have received relevant training from external support service on emotional wellbeing, mental health and other areas such as attachment, trauma, resilience and emotion coaching. • There are regularly updated policies related to the social, emotional and mental health of young people which are regularly monitored, implemented consistently and underpin practice across the setting. Reasonable adjustments are considered and made in to meet individual needs. • Systems are in place for staff to routinely check the emotional wellbeing of all students, this includes gathering the views from the young people directly. • Use of appropriate assessments to identify difficulties early, establish a greater understanding of the young person's needs and inform appropriate referral to other services (examples are provided under specific needs below). • Set realistic targets and review termly in collaboration with the Inclusion Manager/Pastoral Lead, teaching staff and the young person, including parents and carers where appropriate and in line with the young person's wishes. • Implement appropriate interventions for young people with specific needs e.g. anxiety-based difficulties and attachment difficulties (examples are provided under specific needs below). • Refer to external agencies e.g. Educational Psychology Service, Healthy Young Minds, Adult Mental Health Services, 42nd Street. • Use the Plan-Do-Review-Learn process to monitor the young person's progress, alongside any external agencies' advice, whilst collating evidence of the impact of the strategies being used (refer to 'Best Practice Walkthrough' document). • Obtain and record young people's views using tools and resources (including picture sort and visual activities), the Blob Tree and observations. • Information about young people's needs is shared with staff who are working with them.		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
General	**Where a young person has an EHCP:** • Refer to described outcomes and provision and implement. • Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. • Regularly update with strategies as they are tried. • Complete Annual Review of EHC Plan. • Continue to request and act upon advice from external agencies, as necessary. • Carry out and review assessments, as advised by external agencies.		
Peer Interactions / Relationships	Use questions and strategies to guide and encourage young people to find mutually satisfying solutions e.g. understanding the other's position, saying sorry, looking for solutions that meet each young person's needs, for example, using a solution circle approach. Use turn taking, mutual help activities and co-operative learning activities during subject lessons. Rotate groups, so that young people work with different group members, helping to build a range of social skills and fostering inclusiveness. Create learning opportunities by introducing classroom routines to teach friendly behaviour and positive relationships. For example, model giving compliments and then set up situations where young people can practice giving and receiving them. Adopt a planned PSHE curriculum that involves group discussion and activities that explore different relationships. Use of whole school anti-bullying policies and programmes.	Time limited intervention programmes to teach SEMH skills, with staff who have knowledge and skills to address specific needs. Small group delivery includes good role models. Set programmes include: • S.S. GRIN. • Why Try: Resilience for Youth. • FRIENDS: Adult Resilience Programme. • Circle of Friends. Use of Pyramid Clubs. Small group work in class which supports the differentiated curriculum/programme and individual goals. This could include the teaching/instruction of specific social skills and language. Use conflict resolution strategies and other similar techniques such as restorative justice to support young people through conflicts. Use of resources such as Spiralling Toolkit for Safe Healthier Relationships and Expect Respect Education Toolkit and UK Says No More.	Conduct appropriate assessments to develop understanding of the presenting needs in relation to friendships. For example: • Social Skills Improvement System (SSiS). • Emotional Literacy Assessment. • Multidimensional Students' Life Satisfaction Scale • Boxall Profile Offer additional transition visits, transition books, transition clubs before the young person starts. Observe and record the young person's presentation and patterns of interaction and behaviour (e.g. using an ABC chart) across a range of varied contexts/times to understand what they are trying to communicate and to inform possible strategies. Use personalised Social Stories (Carol Gray) to reaffirm appropriate behaviour in specific situations according to the needs of the individual young person.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Peer Interactions / Relationships	Staff / peer modelling to promote social skills and interaction. Environmental considerations to the organisation of the space, seating and group dynamics. Provision of planned opportunities to learn and to practice social and emotional skills during structured activities. Set up peer mentoring or 'buddy' systems' for use during unstructured times. Established routines and secure and explicit boundaries across curriculum areas. Clear routines for transitions. Clear pathways to access further support within the setting are known to young people and displayed around the setting including information about services that they can access. Access to Mental Health First Aid training for staff to support their understanding of fostering positive peer relationships. Access to quiet areas in college during unstructured times. Access to a range of social opportunities and extra-curricular activities. Offer social time support, for example, setting up a club around a young person's interest (e.g. gardening or gaming).		An appropriately trained adult, (supported by the Inclusion Lead, Educational Psychologist or CAMHS professional), to be available to provide de-escalation and reflection work following any confrontation with peers. One tool that might be used is Comic Strip Conversations to support the young person to reflect on real-life events and consider alternative ways of responding. Implement appropriate one to one tailored interventions for young people with specific individual needs that have been planned to enable the young person to meet specific targets in relation to peer integration / friendships. Access to key adult support at specific times that have been identified as challenging for the young person, e.g. unstructured times. Ensure that one to one time with this key adult is prioritised in order for the key adult and young person to build a relationship. **Key adult characteristics:** nurturing yet able to hold firm boundaries; resilient; patient; empathetic; and able to seek and accept support from another adult. Access to a peer mentor. Provide adult support to structure any group or paired work. Personalised timetable introduced in negotiation with the young person, parents and staff.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Peer Interactions / Relationships	Use of the freely available Developing Emotional Awareness and Listening Programme (Samaritans) training for teachers and whole class session plans.		Access to in-college support base (e.g. college-based counsellor. If negative thoughts are a barrier to the young person engaging with their peers, try cognitive behavioural approaches such as Think Good Feel Good.
Emotional Regulation	Create a calm, positive and nurturing learning environment. Offer whole setting training to support staff in de-escalation techniques. Use of emotional validation strategies when upset, angry or distressed e.g. Emotion Coaching approach. See EPS for more detail. Discuss and model feelings and emotions often, using a wide vocabulary of feelings and emotion words. Staff to model that getting things wrong is okay. Create displays focused on developing emotional awareness and vocabulary. Ensure consistent rules and routines across the setting: • Rules should be in the form of a positive statement. Avoid rules framed as negatives. • Rules need to be stated clearly. • Minimise your list of rules (3-5 rules). Other whole setting approaches may include: • Provision of a safe space/area young people can access to support their emotional regulation.	Identify and complete appropriate assessments to establish a greater understandings of the young person's needs, for example: • Boxall Profile. • The Strengths and Difficulties. Questionnaire (SDQ). • Blob Tree. Offer support to develop skills related to emotional regulation and emotional literacy e.g. recognising and labelling emotions and self- calming techniques. Use appropriate emotional awareness and regulation workbooks or programmes within individual or a small group, such as: • Think Good, Feel Good. • Starving the Angry Gremlin. • Starving the Depression Gremlin. Consideration is given to the emotional arousal continuum to support young people's emotional regulation. Use of the Incredible 5-Point Scale to aid emotional regulation. Work with a group of key staff to identify an individual profile of the young person and gain an understanding of their individual	Work with a group of key staff to identify the individual profile of the young person to gain an understanding of their individual triggers, observable behaviours, as well as specific escalating and de-escalating adult responses. An example of this might be the RAMP (Reducing Anxiety Management Plan). Contact EPS for information. Assign a key adult/team of adults to provide daily opportunities for the young person to talk through success and achievements experienced that day and to develop their skills. Such as: • Daily check ins (may be helpful on arrival and/or part way through the day). • Daily opportunities to spend time identifying and building on strengths with an adult, on a 1:1 basis (e.g. make a strengths jar (Ioan Rees, 2005) using art materials). Complete appropriate assessments to establish a greater understanding of individual young people's needs. Teach self-calming techniques, such as breathing, visualisation or repetitive, soothing or sensory activities (colouring, play dough, theraputty). Always ensure access to these activities at all times through use of a 'calm box'.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Emotional Regulation	• Sensory breaks/sensory diets. • Opportunities for daily mindfulness. • Use of emoji card/timeout cards. • Use key visuals e.g. visual timetables. All staff are aware and understand that behaviour is a form of communication and assessments / methods for monitoring environmental triggers (e.g. Antecedent, Behaviour, Consequence charts) are used.	Use of the Incredible 5-Point Scale to aid emotional regulation. Work with a group of key staff to identify an individual profile of the young person and gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de-escalating adult responses. An example of this might be the RAMP (Reducing Anxiety Management Plan).	Environmental audits completed to identify aspects of the environment that might lead to increased anxiety, emotional arousal or sensory sensitivity, with monitoring of behavioural responses and adjustment to support plans / adult responses as necessary. Use the Incredible 5-Point Scale to aid emotional self-regulation. Teach self-calming techniques such as breathing, visualisation or repetitive, soothing or sensory activities. Use of gentle praise when self-calming strategies are attempted, even if unsuccessful. Consideration is given and appropriate referrals made to services such as: • Healthy Young Minds. • Adult Mental Health Services. • Educational Psychology Service. • 42nd Street. Put an appropriate support plan in place (may be a risk management plan / behaviour plan) which has been developed with the young person according to what they feel helps them to feel calm. Any plan should include how to reflect upon, learn from and "incident" or "behaviour" debriefing for the staff but also for the young person.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Emotional Regulation			Provide a safe place for the young person to take time out and calm. Provide time within the day for one to one work with an appropriate accredited therapist (art therapy etc). Reintegration to the setting following therapeutic work needs to be managed sensitively and appropriately. High quality training is provided for all staff involved in delivering and monitoring targeted provision. Contingency plans are in place in case of changes to routine or staff absence. Access to specialist therapeutic interventions if needed including self-help internet-based activities such as Beating the Blues and Mood Gym. Ensure reasonable adjustments to behaviour policies and procedures, for example, flexibility of behaviour systems to account for a young person's individual needs.
Self Esteem/Self Efficacy	Identify and complete appropriate assessments to establish a greater understanding of the whole group/whole setting's needs, for example Pupils Attitudes to Self and School (PASS) (age range 4-18+). Embed a whole group growth mindset approach which focuses on effort over achievement. Use of positive environmental management strategies such as PIP & RIP (praise in public and reprimand in private).	Conduct appropriate assessments such as: • Self Image Profile. • Pupil's Attitude to Self and School. Offer small self-esteem groups as a supportive way of building a young person's confidence and self-esteem. Ideas for activities can be founds within Emotionally Friendly Schools and on the ELSA website.	Assign a key adult/team of adults to provide daily opportunities for the young people to talk through successes and achievements experienced that day. Provide daily opportunities to spend time identifying and building on strategies with an adult on a 1:1 basis: • Make a strength jar. • Use the hidden treasures approach (Ioan Rees, 2006). • Use Strengths Cards.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Self Esteem/Self Efficacy	Provide regular opportunities for young people to identify and celebrate success and achievements and share these with others. Ensure praise is specific and focuses on the learning process i.e. learning from mistakes and taking on challenges. Young people's successes and achievements are shared with adults that are important to them. Provide opportunities for young people to engage with extra curricular activities which allow them to showcase their strengths for example, debating club, gaming club or gardening club.	Offer groups such as Pyramid Clubs to support transitions from Year 11 for young people who are shy, anxious and withdrawn and therefore tend to find transition difficult to manage. Plan out self-esteem building exercises as part of a group to enable young people to receive positive messages and acceptance from one another. Set self-esteem programmes can be used. For example, Think Good Feel Good or Banish Your Self Esteem Thief. Interventions to support unhelpful thoughts which are impacting upon self-esteem such as Anxiety Gremlin If self-esteem is impacting upon engagement with exams and ability to manage stress, try evidence-based exam stress groups which involve positive affirmations and relaxation activities. Use of group support focused on body confidence and image, for example, The Dove Self Esteem Project. Introduce and support the use of self-help software and apps such as GG Body Image GG Confidence and Self-Esteem and Good Blocks.	Use person centred reviews and meetings as an opportunity to evidence and celebrate positive achievements, with an audience of people who are significant to the young person Consider Exam Access arrangements.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Reducing Anxiety	Use of stories and therapeutic metaphors to teach about feelings and normalise feelings of anxiety Explore negative thinking styles as part of PSHE groups and tutorials, as well as strategies to challenge these. Practise calming strategies routinely, both in classes and tutorials, particularly after a transition e.g. mindful breathing. All staff have received training on anxiety and have an understanding of adjustments that can be made within the classroom for young people. There is information available to all young people with the setting about understanding what anxiety is and how they may be able to get further support and support themselves. Embed growth mindset as a whole setting approach. This could be done by creating posters that are displayed around the setting and having regular tutorials, offering the experience of days that focus on developing a growth mindset, for example, celebrities or inventor who failed many times before succeeding.	Identify and complete appropriate assessments to establish a greater understanding of the young person's needs, for example: The Strengths and Difficulties Questionnaire (SDQ). Consider Cognitive Behavioural approaches to group work provided over a specified period of time e.g. Think Good Feel Good and the FRIENDS Programme. Offer groups such as Pyramid Clubs. Introduce and support the use of self-help software and apps such as SAM, Mindshift, Chill Panda and Mindful Gnats. Systems and processes are in place for young people who are finding it difficult to attend due to anxiety to support them to gradually and sensitively transition back to attending their course.	Identify and complete appropriate assessments to establish a greater understanding of the young person's needs, for example: • Schools and Students Health Education Unit (SHEU) surveys. Provide opportunities for a daily check-in with a key adult / team of adults. Allow engagement with a neutral task or complete an assigned "job" of responsibility to reduce feelings of anxiety. Use of strategies related to the emotional arousal continuum e.g. Reducing Anxiety Management Plan (RAMP).
Resilience	Embed a whole class growth mindset approach which focuses on effort over achievement. Whole setting resiliency training, e.g. Bounce Forward.	Identify and complete appropriate assessments to establish a greater understanding of the young person's needs and inform group interventions, for example: • Child and Youth Resiliency Measure. Consider group interventions to develop resilience in young people, e.g. Smart Moves®.	Consider risk and protective factors to provide a profile of the young person, e.g. BOING BOING.

COGNITION AND LEARNING

SKILL	GETTING ADVICE Classroom adjustments	GETTING HELP SEN support interventions	GETTING MORE HELP Personalised interventions
General	• The setting demonstrates an inclusive ethos that supports the learning and well-being of all students. • All staff have received training on different areas of cognition and learning needs and how to support young people. • There is a proactive approach to identifying needs and monitoring that appropriate action is taken. • The differentiation of lessons, written work and coursework is monitored as part of the setting's improvement / development plan. • Regular specific focused teaching, which is increasingly individualised, from the lecturers/ tutors or support staff is offered. • The setting utilises the SEN Code of Practice (2015), Equalities Act (2010) and local guidance to identify students who may require additional and different provision. • Access arrangements allow candidates/learners with special educational needs to access the assessment without changing the demands of the assessment. This may include allowing extra time, providing a scribe or having a reader. These need to be applied for by the school/college, check the relevant exam board guidance for more information. • Use the Plan-Do-Review-Learn process to monitor the young person's progress, alongside any external agencies' advice, whilst collating evidence of the impact of the strategies being used (refer to 'Best Practice Walkthrough' document). • Obtain and record young people's views using tools and resources (including picture sort and visual activities), the Blob Tree and observations. • Information about young people's needs is shared with staff who are working with them. • Use of effective assessment and monitoring tools to identify all young people's learning levels and track progress. **Where a young person has an EHCP:** • Refer to described outcomes and provision and implement. • Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. • Regularly update with strategies as they are tried. • Complete Annual Review of EHC Plan. • Continue to request and act upon advice from external agencies, as necessary. • Carry out and review assessments, as advised by external agencies.		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
General	Create a supportive learning environment - e.g. 'help box' with appropriate resources in each classroom; folders in classrooms (on tables) containing resources such as word mats; using off-white paper (not black text on white paper); colour coding/ dyslexia friendly environment; working walls and purposeful displays (e.g. key vocabulary); prompts/ reminders/ 'to do' lists; seating selection; visual cues and timetables; timed rewards and consequences; brain breaks. Differentiation- e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels. Scaffolding of work- e.g. task plans; word banks; sentence starters; writing frames. Promotion and encouragement of independence – e.g. through scaffolding; visuals; sharing expectations; work pitched at the young person's level; effective deployment of support staff; offering mediation at a lower level first before increasing, where necessary (see Getting Help column). Staff awareness of the learning hierarchy to support their understanding of the stages involved in developing a skill and identifying which stage young people have reached/ where additional support to progress may be needed:	Facilitate learning activities in smaller and targeted groups, in limited distraction environments where possible. Awareness of learners who may benefit from additional support at the acquisition and fluency stages of the learning hierarchy (e.g. strategies such as pre-teaching of key concepts/ vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently). See Getting Advice column. Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress. Good starting points for finding out about evidence-based interventions, programmes and approaches are: • Education Endowment Foundation. • What Works for Children and Young People with Literacy Difficulties. • Evidence 4 Impact – an independent service that supports educators in using evidence-based practice in order to improve outcomes for leaners. • The Early Intervention Foundation guidebook – provides information about early intervention programmes that have been evaluated and shown to improve outcomes for young people. Different young people will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence. The focus of mediation may include:	Use appropriate assessments to identify difficulties early, establish a greater understanding of the young person's needs and inform appropriate referral to other services. Over rehearsal of information to enable young people to progress through the hierarchy of learning (see General section) e.g. Precision Teaching (PT) intervention. PT intervention is suitable for those who struggle with working memory difficulties and retaining information and is used as an intensive 1:1 intervention. Higher levels of mediation during tasks (see Getting Help). Referral or multi-agency meetings for assessment and advice for further support around learning and the factors that may impact a young person's progress. Agencies may include: • Educational Psychology Service. • Advisory Teacher. • Speech and Language Therapy Service.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
General	• Acquisition (being introduced to a task. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve). • Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy. Individuals will make different rates of progress). • Mastery (task is fully learnt and feels like 'second nature'; the learner has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill. • Generalisation (mastered task is now used in other situations; with instruction, the learner applies the skill with novel materials or under different conditions. Learning is less prescribed, and reinforcement can take place through everyday experiences, enabling simple problem solving). • Adaptation (the mastered skill is fully generalised and the information can be used in novel ways and for more complex problem solving. Specific instruction in complex or new situations isn't needed and the learner can ask themselves what skills or knowledge they might need to solve the problem).	• Regulation of behaviour (finding out what helps the young person to manage behaviours associated with learning such as attention, impulsivity and distraction); • Rule teaching (helping and encouraging the young person to find and apply rules); • Insight (helping the young person to use 'what works' and apply these tactics to new and novel situations - generalising); or • Sequencing (helping the young person to respond in an organised and sequenced way). Modes of mediation may include: • Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues); • Motor (drawing, moving objects into the young person's line of sight, hand over hand guidance); • Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well). Mediation should begin at the lowest level needed for the young person; some will need to begin at a higher level than others. Mediation progresses from higher to lower levels as follows: • Hand over hand guidance. • Modelling with initial guidance which is gradually faded. • Modelling the task using specific examples of rules, concepts and strategies. • Pointing out general characteristics (but not task-specific). • Asking for further applications of previously used strategies.	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
General		• Teaching how to select appropriate strategies using previous input from mediation. • Young person applies previous strategies and rules with increasing flexibility. • Previous mediation internalised and fully self-regulating.	
Thinking Skills	Employ strategies to develop young people's metacognition and self-regulation (i.e. the ability to monitor, direct and review their own learning, through explicitly thinking about their own learning, setting goals and evaluating progress) and executive function skills (these are a set of skills and mental processes that develop throughout childhood and adolescence, which support young people to self-regulate, initiate, attend to and persevere with activities successfully). Explicit teaching and reference of metacognitive strategies following the seven-step modell: 1. Activating prior knowledge. 2. Explicit strategy instruction. 3. Modelling of learned strategy. 4. Memorisation of strategy. 5. Guided practice. 6. Independent practice. 7. Structured reflection. Organise and structure group talk and dialogue, including 'Socratic talk', talk partners and debating.	Promote and develop metacognitive talk in the classroom and in interactions with young people. Dialogic teaching, for example, emphasises classroom dialogue through which young people learn to reason, discuss, argue and explain. Gather observational data and conduct targeted assessments to further clarify strengths and needs (e.g. Automated Working Memory Assessment). Explicitly teach young people how to organise and effectively manage their learning independently – provide guided practice. Provide exam preparation and self-study support in small groups for targeted students. Use of self-evaluation and feedback tools such as 'exam wrappers' (a pre and post-exam self-evaluation tool). Small group/individual intervention to develop targeted skills (e.g. working memory instruction/practice: Cogmed. Skills learned during targeted provision should be complimented with strategy-based practice within classes.	The use of appropriate assessments to identify needs early, establish a greater understanding of the young person's needs and inform appropriate referral to other services. More fine-grained assessments of skills may be required for young people with more complex needs (e.g. Engagement Profile). Referral or multi-agency meetings for assessment and advice to inform programmes and activities to inform intervention and programmes to develop key skills (e.g. attention and listening, memory and retrieval, inhibition control etc). Agencies may include: • Educational Psychology Service. • Advisory Teacher. • Speech and Language Therapy Service. Strong links between young person, school/college, external agencies and home. Access to a highly personalised curriculum incorporating additional support to enable 'readiness for learning' (e.g. self-regulation, planning, preparation, and organisation). Professional reports to inform support and provision map for young person.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Thinking Skills	Teacher/lecturer/tutor scaffolding and modelling of own thinking at a whole-group level (e.g. modelling self-talk when preparing for a task, making mistakes or monitoring comprehension).	Teach and model working memory and recall strategies within small groups (rehearsal and chunking of information, visual memory strategies and creating narratives).	Individualised planning around key skills for independence to support plans for employment or training.
	Use of structured planning templates (task plans, checklists and writing frames), worked examples, and breaking down activities into steps.	Small group-based support around key skills for independence (e.g. time management, self-regulation and self-organisation) to support plans for employment or training.	
	Provide prompt sheets, questions to answer, key words to build sections or paragraphs around.		
	Provide explicit teaching of independent study and working skills.		
	Provide journals/notebooks for young people to sequence their thoughts, log ideas or questions during lessons.		
	Provide multiple examples of new concepts, taking examples from real life experiences.		
	Access to key information (e.g. subject specific vocabulary, key spellings, number facts etc.) visually to promote independence and reduce working memory loads.		
	Use of verbal and visual cues/prompts to direct or redirect attention – access to opportunities for movement breaks and different modalities of teaching and learning.		
	Teaching and support for independence skills, for example: planning, organising and time management.		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy	Collaborative learning and peer tutoring approaches (e.g. Paired Reading, Cued Spelling). Whole group literacy programmes which can be differentiated for individuals e.g.: Empower3000. Effective quality first teaching, whole setting approaches and assessment. Ensure all text and print is clearly visible, using appropriate fonts and backgrounds. Allow extra time for processing information, answering questions and completing tasks. Present new information in small chunks and keep language simple. Introduce material in a multi-sensory way. Use technology to support learning. Consider seating arrangements and grouping so that peer support can be implemented and encouraged. Opportunities for pre-teaching/instruction and over learning including repetition. Modification of level and pace of curriculum content to account for young people's needs. Alternative forms of recording e.g. PowerPoints, oral presentations, posters, sound buttons, mind maps, matching labels to pictures, sorting, etc.	Targeted assessments such as Connective Learning. Standardised assessments such as the Comprehensive Test of Phonological Processing (CTOPP), the Detailed Assessment of Speed of Handwriting and the Wide Range Achievement Test 5. Discussion with the young person involving them in planning. The young person may be happy to disclose information on any previous support and any past assessments should be considered. Further investigate gaps in learning to identify specific needs or barriers. Small group support for young people struggling with literacy. Resources should be specific to need with pre/post measure assessments to evaluate progress. Interventions should allow for a focus on meaningful texts to their course and their aspirations in relation to preparation for adulthood, e.g: • Reciprocal Teaching to raise reading comprehension levels. Good starting points for finding out more about evidence based interventions or approaches include: • SEN Support: research evidence on effective approaches and examples of current practice. • SEN Support: a rapid evidence assessment.	Boosting sessions and one to one sessions. High quality training/support is provided to all staff involved in delivering and monitoring targeted provision. Access to resources such as aurally encoded dictionaries. Increasingly individualised / adapted personalised curriculum/programme and bespoke timetables. Evidence based interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching). Referral or multi-agency meetings for assessment and advice to inform programmes and activities to inform intervention and programmes to develop key skills. Agencies may include: • Educational Psychology Service. • Advisory Teacher. • Speech and Language Therapy Service. Skills learned during targeted provision are practised in other key environments. High levels of support for modelling and enabling the young person to access learning / curriculum / programme. Strong links between young person, school/college, external agencies and home.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy		Use of software and technology such as Dragon, Inspiration, Claro and DocsPlus. Introduce accessibility tools on Microsoft Word e.g. Immersive Reader. Explore alternative methods of recording, for example, access to a laptop or tablet, Dictaphones, or other voice to text support. Use of a reading pen. Opportunities are provided for skill reinforcement / over learning / revision / transfer and generalisation. Pre teaching and pre learning of content required for individual lessons.	
Numeracy	Effective quality first teaching, whole setting approaches and assessments. Collaborative learning and peer tutoring approaches. Use technology to support learning of key skills. Opportunities to practise skills learned in real life contexts. Cross curricular embedding of key Maths skills. Promotion of concepts such as Mathematical Resilience and Growth Mindset approaches focused on Maths skills.	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include standardised assessments as well as formative, criterion-referenced and curriculum-based assessments such as Precision Teaching baseline probes. Discussion with the young person involving them in planning. The young person may be happy to disclose information on any previous support and any past assessments should be considered. Use of interventions such as Precision Teaching). Access to real-life maths learning e.g. Realistic Mathematics in Education and Making Sense of Maths. Embed numeracy into aspirations to support relevance and context. Opportunities are provided for skill reinforcement / over learning / revision / transfer and generalisation.	High quality training/support is provided to all staff involved in delivering and monitoring targeted provision. Increasingly individualised / adapted personalised curriculum/programme and bespoke timetables. High levels of support for modelling and enabling the young person to access learning / curriculum / programme. Strong links between young person, school/college, external agencies and home. Skills learned during targeted provision are practised in other key environments. Referral or multi-agency meetings for specialist assessment / intervention for example: • Educational Psychology Service. • Advisory Teacher.

COMMUNICATION AND INTERACTION

SKILL	GETTING ADVICE Classroom adjustments	GETTING HELP SEN support interventions	GETTING MORE HELP Personalised interventions
General	• Whole staff training and awareness of the implications of communication and interaction difficulties and on individual needs that relate to communication and interaction. The Speech, Language and Communication Framework is a free online professional development tool, accessible to all, which sets out the skills and knowledge that everyone working with young people should have in order to support speech, language and communication. • There is a proactive approach to identifying needs and monitoring appropriate actions. • If young people are learning English as an additional language (EAL) it is important to work with the young person and important adults around them to find out what their skills in their home language are like. These young people may need specific strategies in place to support their understanding of English and their learning but it should not be assumed that they have a special educational need. • The setting utilises the SEND Code of Practice (2015), Equalities Act (2010) and local guidance to identify students who may require additional and different provision. • Access arrangements allow candidates/learners with special educational needs to access the assessment without changing the demands of the assessment. This may include allowing extra time, providing a scribe or having a reader. These need to be applied for by the school/college. Check the relevant exam board guidance for more information. • Use the Plan-Do-Review-Learn process to monitor the young person's progress, alongside any external agency advice, whilst collating evidence of the impact of the strategies being used (refer to 'Best Practice Walkthrough' document). • Obtain and record young people's views using tools and resources (including picture sort and visual activities), the Blob Tree and observations. • Information about young people's needs is shared with staff who are working with them. • Use of effective assessment and monitoring tools to identify all young people's learning levels and track progress. **Where a young person has an EHCP:** • Refer to described outcomes and provision and implement. • Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. • Regularly update with strategies as they are tried and reviewed. • Complete Annual Review of EHC Plan. • Continue to request and act upon advice from external agencies, as necessary. • Carry out and review assessments, as advised by external agencies.		

Tameside
Metropolitan Borough

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Language Development	Awareness of the impact of speech and language needs on reading and writing, with adjustments made in support of these needs.

Identification of designated Communication Champions or Leads.

Use of free environmental checklists to evaluate whether the space supports communication and interaction, such as the free Communication Friendly Environment Checklist from the Communication Trust.

Identification of communication needs using a checklist such as the free Universally Speaking Age 11- 18 checklist, available from The Communication Trust.

Use of resources from The Royal College of Speech and Language Therapists website.

Adult to position themselves where young people can see their face clearly, and keep distractions to a minimum. Use the young person's name at the start of any instruction or information giving, allowing extra time for processing.

Regular checking of the young person's understanding of tasks and recording of work.

Alternative means of showing understanding if needed, e.g. pictorially or using technology. | Increase observations to understand how the young person communicates, with whom and where they communicate best, what their strengths and interests are, and how these can be used to encourage engagement in the classroom. Monitor how the young person responds to your communication with them and whether they follow the words you are saying and/or the gestures you are using.

Assess, monitor and support language skills. For example, assess verbal reasoning skills using Elklan's Test of Abstract Language Comprehension 2.

Plan and adapt tasks and activities to take account of the young person's individual communication needs.

Provide frequent practice to develop communication skills through recall and repetition.

Access additional staff training on supporting young people with specific communication and interaction needs (e.g. with Speech and Language Therapy Service, Educational Psychology Service).

Access additional staff training to support key adults to understand and respond to behaviours associated with communication and interaction difficulties (e.g. frustration at not being able to communicate, distressed behaviours as a result of not understanding spoken instructions or expectations). | Multi-agency assessment to identify persistent and complex needs. Referral to ISCAN

Provide access to assessment and advice from external services such as Advisory Teachers, Speech and Language Therapy and the Educational Psychology Service, to tailor programmes and activities to support speech and language development, including attention and listening skills and social skills.

Black Sheep Press (11-16) provides resources for teachers and speech and language therapists working with young people with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN).

Staff to deliver and support daily one-to-one and small group intervention based on support and guidance from external services.

Further Resources:
Raising awareness of Developmental Language Disorder (RADLD) provides free information and fact sheets about Developmental Language Disorder (DLD), as well as a range of helpful resources.

Afasic produces free downloads with information for parents and professionals about talking and understanding language and getting the right help. They offer free downloads, free parent support days and workshops and useful links to mobile apps and other support. For example, 'Teenagers and beyond' and planning for life after 16 |

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Language Development	The Communication Trust offer a range of free practical resources and online training to support Post 16 practitioners working with young people with speech, language and communication difficulties. Access to free training "An Introduction to Speech Language and Communication" which is available from The Communication Trust. Encourage and develop informed choice-making. This is particularly important in the context of future life decisions and young people making decisions independently.	Additional support is in place to develop emotional vocabulary and emotional expression using visual and real-life situations (e.g. use of feeling scales or agreed strategy cards). ELKLAN - Accredited courses for education and other staff working with those with speech, language and communication needs. Provides staff with an in-depth knowledge and understanding of a range of practical ideas and skills to deliver a range of small-group, targeted interventions. (Elklan Trained TAs). Elklan Language Builders Resources are practical books which provide detailed advice and activities to promote speaking and listening skills for post-16 young people. Certain interventions may require specialist training from the Speech and Language Therapy Service (e.g. Vocabulary training). Speak Up Salford have a section on their website where young people can access support in a range of areas, including making friends, learning words and life after secondary school. They also offer a range of training and support for staff.	British Stammering Association - A range of information, resources and advice to support those with a stammer as well as their families and carers. The website includes recommended therapies and courses, as well as 'Everyday Tips' and apps and devices. Michael Palin Centre for Stammering offer a range of support services for young people and parents and training courses for professionals. If child is presenting with a stammer they would need a referral and assessment/therapy from SALT team. Access Arrangements and reasonable adjustments should be made during speaking exams for pupils with a stammer.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Receptive Language	A communication friendly classroom offering focused support and prompts from an adult, including key cues and prompts to supplement student's understanding and participation in lessons. These cues should be multi-sensory and age appropriate. For example: visual (e.g. signs, objects, written and symbols), audio (e.g. songs), smell (e.g. spraying different scents on different days of the week). Daily routines are clear and predictable. Visual Timetables, classroom rules/expectations and daily routines are clearly displayed and personalised as needed. Widget provides a wide range of symbols which can be used to signpost around the classroom environment, for displays and to create visual timetables. Break down the amount of information provided at once into chunks (e.g. Break up multi-step instructions and deliver 1 or 2 at a time). Encourage the young person to recognise when they have not understood and discuss self-help strategies to solve this. Encourage the use of self-help strategies to aid active listening (self-repetition, requesting repetition, etc). Try to avoid use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible, e.g. with pictures, diagrams or objects.	Provide a classroom that uses a range of teaching and learning styles with emphasis on use of gestures, key visuals and concrete examples to support spoken language. Provide more time to respond to questions and instructions (e.g. 10-second rule) and to complete multi-step tasks. Alternative ways to record work/learning, to include photographic or video recording. Check the young person's understanding by asking them what they need to do after they have been instructed. Use a buddy system whereby the young person and a partner work together to ensure correct understanding of verbal information. A peer or adult buddy would check their correct understanding before starting. Staff are mindful of how lesson information is communicated. For example, a key word list is available and supported by a high level of visuals. Use of a personalised visual dictionary. Provide support to ensure access to a range of communication opportunities (e.g. student to adult, peer to peer, small group, whole group). Use of specific interventions such as: TALC 2 - An ELKLAN resource that is designed to help speech and language therapists, education staff and the wider workforce to assess the verbal reasoning skills of young people. Based on the assessment results from the TALC, students would then be supported to develop their verbal reasoning skills through the use of Blank Levels of Questioning.	Provide a Total Communication environment that uses a range of teaching and learning styles with emphasis on the use of visuals and concrete examples to support spoken language (e.g. signing and key visuals). Additional differentiation and scaffolding of tasks, which may require individualised planning for much of the day. Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such as Advisory Teachers, Speech and Language Therapy and the Educational Psychology Service) to tailor programmes and activities to support speech and language development, including attention and listening skills and receptive language skills. Staff to deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from Speech and Language Therapists. Black Sheep (11-16) provides resources for teachers and speech and language therapists working with young people with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN).

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Receptive Language	Try to avoid use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible, e.g. with pictures, diagrams or objects. Use a range of whole-group or whole-setting intervention programmes, for example providing consistent visual support to structure or record ideas (scaffolds or templates). Use word webs and vocabulary maps as a whole group when learning new vocabulary. Slow down pace of delivery and encourage the young person to repeat the information back to themselves (verbal rehearsal). Provide additional time to complete tasks and acquire new vocabulary/ concepts. Define key words simply and record visually. Use pictures/drawings/mind maps to record information given verbally.	Talk for Writing - A teaching framework that provides a flexible process for developing understanding and expression. Certain interventions may require specialist training/support from Speech and Language Therapists.	
Expressive Language	Provide a range of planned communication opportunities in a range of contexts, with enough time given for processing (e.g. 10-second rule), thinking and responding to verbal information and new vocabulary (e.g. see Elklan Language Builders book for activity ideas). Use of a range of whole-group or whole-setting intervention programmes, for example providing consistent visual support to structure or record ideas (scaffolds or templates). Use word webs and vocabulary maps as a whole group when learning new vocabulary, and story planners when re-telling a story or giving a personal narrative.	Young people will need support to identify functional language outcomes which are appropriate for their own contexts and aspirations. Provide an environment in which young people are surrounded by spoken and written words and inspired to learn them using multi-modal approaches (e.g. key words highlighted on the board and in worksheets to remind the young person to check their vocab sheet). Ensure access to a range of communication opportunities, so young people can contribute in different ways or across contexts and in relation to different topics (e.g. including those they are more confident/interested in).	Additional differentiation and scaffolding of tasks, which may require individualised planning for much of the day. Additional adult support to contribute to group activities using a range of communication methods (e.g. gesture, vocalisations, instruments, visuals) alongside/ instead of spoken language. Create personalised dictionaries or knowledge organisers. Use of word webs to promote experiential language learning.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Expressive Language	Provide opportunities for communication throughout the day in a range of lessons, including opportunities for discussion around books and narratives. During group work allow the young person to answer after others and when adults have modelled the answer a few times. Recap relevant vocabulary. Ensure knowledge of vocabulary before introducing a new topic. Use clear adult models of speech and language, and repeat, emphasise and expand, as needed. Use technology to support learning.	Opportunities to pre-teach key vocabulary and support generalisation to the classroom (e.g. have worksheets with key vocabulary on their desks, which they can refer to, and use of word webs to promote experiential language learning). Consider the three tiers of vocabulary: 1. Everyday, basic words. 2. More complex words (e.g. using 'combine' for mix) or words with more than one meaning. 3. Subject specific e.g. Galapagos. Focus on developing the young person's understanding and use of words in Tier 2. These words have the highest utility in helping to close the language gap for those young people with limited vocabulary. Provide support for Tier 3 words at the start of a new topic (e.g. using knowledge organisers). Use of vocabulary checklists/word maps. Create personalised dictionaries, vocab cards or knowledge organisers. Use the STAR approach in content-rich subjects: Select the really useful vocabulary that is from the topic or class text. Teach the selected vocabulary in a structured manner. Activate the meaning by using the words in context, linking the word to the student's existing knowledge. Review the taught words to ensure they are retained. Access training provided from the Speech and Language Therapy Service for young people, parents and education staff supporting narrative and vocabulary development.	Referral into Speech and Language Therapy Service to support the young person and implement targeted approaches including adaptions to learning. Use of an additional or augmented communication system. These may include: Makaton - A language programme that uses symbols, signs and speech to enable people to communicate. Use of an additional or augmented communication system (ACC). These may include PECS (Picture Exchange Communication System) - An alternative augmentative communication system in which simple picture cards are used to communicate simple needs initially, but then work towards more complex sentence structures, signing, or high-tech communication systems and software (such as Proloquo2Go). Other ACC which may be used include direct access boards and PODD. Use of PODD books (Pragmatic, Organisation Dynamic Display) to support sentence structure using visuals.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Expressive Language		Use of intervention programmes within a small group such as: Black Sheep Press: Talking about Community, social skills. The Narrative Intervention Programme: a resource for young people and young adults between the ages of 8 and 18. The Vocabulary Enrichment Programme: A resource for older children and young adults focusing on enhancing the understanding and expression of vocabulary and word meanings in students aged between 8 and 18.	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Selective mutism/ selective speaking *Speaking fluently in some situations but remaining silent in others*	Staff have an awareness of selective mutism and understand it as an anxiety-based need. Key staff have access to information on how to support young people with selective mutism for example, from the SMiRA website. Check the Helping Students in Secondary School-Staff Guide and the Older Children and Teens guide by www.selectivemutism.org.uk. The website has a range of information, resources and advice to support those with selective mutism, as well as their families and carers. Establish a communication safe environment that includes: • Providing unpressured opportunities for the young person to speak. Don't react if the young person does speak. • Use of questions such as 'I wonder…' • Encouraging joint activities with a quiet peer. • Identifying a key adult for the young person to build rapport and confidence with. • Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally.	Seek multi-agency support from outside services and work with the young person and their family (in line with the young person's wishes) to devise an individualised support plan. Speech and Language Therapists will assess receptive language and provide support in this area if required. If receptive language skills fall within normal limits, pupil will be referred to Healthy Young Minds for support with Selective Mutism. If they fall below normal limits, targets will be set to support this and a referral can also be made to Healthy Young Minds. Join the Greater Manchester Selective Mutism Network. Use of the 'Sliding in Technique' detailed in The Selective Mutism Resource and included on the SMiRA website. The steps can be accomplished either in a single session or over 2–3 weeks. This involves an adult (parent/carer or staff member) as the young person's talk partner. Activities are completed on a regular basis with the young person's talk partner in a safe and quiet area of the setting. The activity should be simple and involve something that the young person enjoys and is familiar with (e.g. a favourite game or book from home). As the young person becomes confident, their tolerance to another person gradually coming closer and joining the activity ('sliding in') is increased. Carefully support the young person's transition to college and into training or employment. Further information about selective mutism can be found at SMiRA: www.selectivemutism.org.uk	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Social Communication *Young people with social communication needs can often have sensory processing differences – please also see the Sensory and/ or Physical Needs section*	All staff should have awareness and understanding of autism, in order to provide a differentiated curriculum which meets the needs and aspirations of each learner, e.g. making use of the Autism Education Trust (AET) Post-16 Programme. Provide Visual Timetables/Written schedules. Tell young people in advance about any significant changes to the daily routine and illustrate this with the visual timetable/written schedule. The visual timetable can also demonstrate timings of lessons. Create an environment that is as predictable, stable and consistent as possible. Prepare the young person for changes to activities/ routines/staffing. Use the environment to support understanding of expectations around work and behaviour. For example, clearly label learning environments. Provide visual reminders of classroom rules. Widget provides a wide range of symbols which can be used to signpost around the classroom environment, for displays and to create visual timetables. The TEACCH approach is a way to provide high levels of visual structure and clarity to support young person's understanding of the environment, expectations and activities. It is not a single method and can be used alongside other approaches.	Provide a more personalised curriculum allowing flexibility in the organisation of the learning environment and the day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks. Adaptations to teaching materials, such as written/ visual task lists and timers. Access to staff training on the use of visuals to support communication. Use of a Sensory Checklist and environmental adaptations to minimise impact of sensory distractions and sensory processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing focused activities, access to tailored sensory activities or resources). Support to better understand inferencing, idioms and metaphors (e.g. using resources such as Test Your English Idioms, Black Sheep Press - Idioms) and My Favourite Idioms. Provide a small social communication group, focusing on the explicit teaching of social skills within a small group environment, with the opportunity to then generalise the skills into the wider environment. This may include the reading of social cues, body language, gestures, facial expressions and intonation. Pastoral interventions such as meeting and greeting, peer mentoring, buddy systems and shared interest lunchtime clubs.	Provide a highly personalised curriculum allowing increased flexibility in the organisation of the learning environment and the college day (e.g. offering access to additional adult support to enable young people to participate in the less structured parts of the day such as breaks and lunch, and provide access to a quiet, distraction-free place in the setting if the young person feels anxious). Visuals in place for the young person to use to access break rooms (e.g. "I need a break"). Regular staff briefings centred around the young person's strengths and support needs. A One Page Profile may help to communicate this. If a young person has a personalised Visual Timetable they will need to be told as early as possible about any changes to their routine. From the sensory assessment checklist(s) devise a bespoke sensory diet. Implement and regularly review, with the young person. Provide Social Stories as needed - short descriptions of a particular situation, event or activity, which include specific information about what to expect in that situation and why. Wherever possible and appropriate, you should include the young person in the creation of the social story.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Social Communication *Young people with social communication needs can often have sensory processing differences – please also see the Sensory and/ or Physical Needs section*	Provide clear roles during group work. Reinforce the understanding of these roles visually (e.g. written information/symbols). Incorporate sensory or movement breaks into lessons. Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects). Provide social communication opportunities through wider sports, leisure and community activities which also encourage positive self-esteem. Any trips to be planned well in advance, taking the young person's needs into consideration.	Interventions to consider include: TalkAbout - A complete programme for developing self-esteem, social and friendship skills. LEGO Therapy - An intervention to help improve social competence while conducting fun, naturally rewarding LEGO clubs. Social Thinking gives strategies to teach essential life skills such as socio-emotional learning and self-regulation across different environments. Resources for 14-18-year-olds can also be purchased (e.g. Social Thinking and Me). SULP (Social Use of Language Program) - A framework for personal, emotional and social development from a communication and thinking skills perspective, providing multisensory activity sequences with interactive stories. Circle of Friends - A group intervention that enhances inclusion through peer support. The Circle of Friends approach works by mobilising the young person's peers to provide support and engage in problem solving with the person in difficulty. Talking About Community, social skills Materials that can be used to teach young people social skills in everyday settings. Independence through Communication, social skills A pack of activities, ideas and sessions for learners who need visual structure and may be non-readers or speakers.	Comic strip conversations can be used to help young people understand social interaction by visually showing them (using symbols, stick-figure drawings and colour) the different levels of communication – including thoughts, feelings, words and actions – that take place in a conversation. Training for staff/parents/young person to attend to develop awareness of social stories and comic strip conversations. From completion of Autism Education Trust's environmental audit make environmental changes as appropriate to meet young person's need. An individualised skills development programme informed by specialist multi-agency team assessment and advice (e.g. this might include Specialist Outreach Teams, Speech and Language Therapy and the Educational Psychology Service. Augmented communication systems such as Makaton or PECS (Picture Exchange Communication System) or PODD (language programmes that use symbols and signs alongside/instead of speech to enable people to communicate – see Expressive Language above). Use of transition books/support to allow a smooth transition into a new year group or the move to college. Additional opportunities to visit new classrooms/educational settings and meet new teachers in advance to allow sharing of information.

SENSORY AND/OR PHYSICAL

SKILL	GETTING ADVICE Classroom adjustments	GETTING HELP SEN support interventions	GETTING MORE HELP Personalised interventions
General	Overall setting approach. Use of curriculum/ screeners. Specific staff teaching/ support. Set-up of setting. Involvement with parents/ carers and young person. Link with assess-plan-do-review-learn. Staff training and awareness in all areas. Awareness of key documents such as SEN Code of Practice, Equality Act, Children and Families Bill.	Overall setting approach. Whole setting staff training. Use of curriculum/ screeners/ assessment. Targeted teaching/ support, including targeted group interventions. Understanding of effective differentiation. Involvement with parents / carers and young person. Link with assess-plan-do-review-learn. Use of strategies to promote social inclusion e.g. buddy system.	Overall setting approach. Use of curriculum/ screeners/ assessment. Request involvement from external services e.g. Occupational Therapy (OT), Learning Support Service (LSS), Educational Psychology Service (EPS) to create more personalised curriculum, including specialist advice and support, individual interventions. Staff with increasing knowledge and experience/ input from Inclusion Lead. Capacity building and training for all staff. A more individualised programme of support/ highly personalised curriculum including specific staff teaching / support, including targeted small group and individual interventions. Individualised set-up of setting and workstation area e.g. taking into account accessibility, safety and environmental stimulation.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
General			Parents/ carers and young person participating in setting up, delivery and reviewing interventions. Link with assess-plan-do-review-learn.
Visual Impairment	Concerns about a young person's vision should be raised with parents/ carers and a referral should be made to the local Orthoptist and Visual Impaired Team (Learning Support Service). Information to aid understanding of visual impairment should be shared with parents/ carers and staff and can be found at RNIB. Awareness of the young person's needs, SEND guidance, specialist support and resources can be found at RNIB. Staff to be aware that the young person may be experiencing visually related learning difficulties and provide support to enable them to plan appropriately. Gather the views of the young person, using person-centred approaches regarding their opinions and preferred strategies. Create a 'clutter-free' environment. Pay attention to layout of furniture, seating and adult position in the setting. Avoid standing in front of windows as your face can become difficult to see. It may be helpful to complete an environmental audit of the setting including indoor and outdoor areas.	Teaching practice which facilitates access to the curriculum, social/ emotional development and participation e.g. drawing upon information contained within specialist websites, such as RNIB. Setting must access specific VI related training provided by the Visual Impairment Service. Access to wider staff training e.g. RNIB On-going assessment, advice, support, monitoring and training from a Qualified Teacher of the Visually Impaired (QTVI), up to 6 hours annually, as well as attendance at review meetings. Staff should implement advice including specific interventions as suggested by the QTVI. Provide access to a quiet space for QTVI to work with the young person. Curriculum plan reflects levels of achievement and must include individually focused support plan. Young person involved in setting and monitoring their own targets.	QTVI liaison with Eye Hospital. QTVI to make referral to Low Vision Aid clinic. Opportunities will be provided for the young person/ parents/ carers to meet other young people with VI in the local area (e.g. Henshaws). VI Education Team to attend all review/ planning meetings. On-going assessment, teaching, advice, support and monitoring from a QTVI, to work with the young person, their family and with setting staff. Training and written advice for staff from the VI Team, including adjustments and modifications for assessment and exam arrangements. More information can be found at RNIB.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Visual Impairment	Assessment by Qualified Teacher of children with Visual Impairments (QTVI) and report distributed to key staff. Recommendations of the report implemented in the setting to enable full inclusion in the mainstream class. The setting should monitor pupil progress in this respect e.g. carrying out reading assessments in different fonts. Learning materials must be selected and prepared for their clarity. Make basic adaptations to activities and materials to facilitate access for a visually impaired young person e.g. oral descriptions of visual materials, saying the young person's name before asking a question. Awareness that the young person may need more time to complete the tasks and the pace of the work may need to be slower. Information about adapted resources is available at Sight Advice FAQ. Low level adjustments may need to be made to activities e.g. reducing length of visual tasks. Break up visually demanding tasks with other activities. Standard adjustments advised include: • Non cursive, bold size 14 font. • Increased letter spaces • Clear images in books • Use of high contrast colours e.g. cream background and black text (in print and on screen)	Teaching methods based on experiential and tactile learning with a strong verbal emphasis, which facilitate access to the curriculum and class participation. Setting staff to provide some modification of learning materials to facilitate access e.g. attention to speed of lesson delivery and speed of working of young person. Opportunities for individual and small group work to meet identified needs and to facilitate learning and inclusion, as appropriate. Opportunities for explanation, and exploration of resources before they are used in an activity e.g. through pre-teaching. Specific interventions may be necessary and advice should be followed from QTVI. Develop peer awareness. Opportunities for group interventions to develop social inclusion with peers e.g. Circle of Friends. Environmental adaptations e.g. pay attention to layout of furniture, seating and lighting in the setting. Accessibility of outside environment including edges clearly marked.	Additional support for the young person from a Teaching or Support Assistant in class, and around the setting, as indicated by assessment to: • Facilitate inclusive and independent learning. • Provide in-class support. • Prepare specialist/ tactile resources. • Follow up Mobility training. • Ensure safety. • Support during unstructured times e.g. lunchtime and extra-curricular activities. Teaching or Support Assistant to be allocated time by the setting to adapt resources/ attend training and conduct individual work. Regular planning sessions between the QTVI and Teaching or Support Assistant. Opportunities for tactile exploration of the environment and resources. Pre and post tutoring of activities. Presentation of learning materials in alternative formats, including Braille, tactile diagrams, audio / speech. Planning based on previous visual performance and/ or prognosis of possible changes. 30 hours (20 annual sessions) from a QTVI to provide all the teaching and support outlined above.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Visual Impairment	Teaching methods which facilitate access to the curriculum, social/ emotional development and class/ group participation. The curriculum includes examples of diversity. ICT to be used to increase access to the curriculum, where appropriate e.g. iPads for reading. Use of information relating to a range of resources and agencies, within the Local Authority and the wider community e.g. Victaparents and Look UK. Involvement of parents/ carers and provision of information relevant to them e.g. using resources available at RNIB. . Considerations for good transitions between stages of education (and preparing for leaving education), and how to plan and prepare for these e.g. opportunities to walk with an adult, repeating the process, practising any travel arrangements, moving towards more independence. Strategies such as talking the young person through the route, noting key points, textures or space to feel for, may help. Development of a transition plan for young people in Post 16 provision and preparing for adulthood, further information can be found at Council For Disabled Children.	Large print and differentiated materials, provided by the setting, as appropriate to meet assessed needs including: touch typing, coloured overlays and matt laminating pouches. Access to equipment, including the use of an iPad or laptop with highlighted keys and software, meet assessed needs. Further information about assistive technology can be found at Sight Advice FAQ or RNIB and Living Made Easy. Visits away from the setting are planned well in advance and takes into consideration the young person's needs.	Inclusion to VI curriculum activities across the District. Advice, assessment, teaching, support and programme of work from Mobility Officer regarding mobility and independence skills; frequency based on assessed need, block of work equivalent to weekly contact. The report written by a QTVI in conjunction with the Mobility Officer will be shared with all stakeholders and will include information as outlined in the Universal offer. Staff member to become a Vision Champion within the school by completing a training course offered by the Visual Impairment Service or companies such as Positive Eye. Training for staff on Cortical Visual Impairment (CVI) and implications for learning as necessary and resources. Day to day access to assistive technology and equipment e.g. Electronic Brailler/ note taker and/ or laptop / iPad with speech software, audio books etc. Staff to facilitate a pre-Braille learning programme as advised by the QTVI. Access to VI Service technician, as appropriate.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Hearing Impairment	Information for staff and parents/ carers can be found at NDCS and Action on Hearing Loss. Awareness of the young person's needs and how key skills are affected by hearing loss, particularly in communication, language acquisition and fine and gross motor skills e.g. some forms of hearing loss are associated with balance. Creation of a One Page Profile which is shared with all staff. Assessment by Qualified Teacher of the Deaf (QToD) and report distributed to key staff. Recommendations of the report implemented in the setting to enable full inclusion within the setting. The curriculum includes examples of diversity. Where appropriate the young person may receive a short-term intervention: • Model suggested strategies/ train staff at the setting. • Direct work from either a Qualified Teacher of the Deaf or Specialist Teaching or Support Assistant including Assessment and obtaining pupil voice. Gather the views of the young person, using person-centred approaches regarding their opinions and preferred strategies. The setting must monitor progress in this respect.	Teaching practice which facilitates access to the curriculum, social/ emotional development and class participation. Information and guidance can be found at NDCS and Council for Disabled Children. Involve the HI Team in completion of baseline assessments and development of an individual support plan. Settings must access specific deaf related training/ opportunities for modelling of suggested strategies by HI Team/ Qualified Teacher of the Deaf (QToD). Access to wider training for staff e.g. NDCS Teachers must implement advice as suggested by the Qualified Teacher of the Deaf (QToD) related to: • The modification to the presentation of assessments. • Targets. • Curriculum and teaching methods. Access to daily group teaching of key skills such as phonics/ key vocabulary and social skills. Provide access to a quiet room for Qualified Teacher of the Deaf / specialist TA/ audiologist session/ visit. Young person is involved in setting and monitoring their own targets. Specific interventions for language development, speaking and listening and phonics learning e.g. Lip reading,	Key person from the HI team will link with the setting, young person, parents/ carers and professionals. Opportunities for parents/ carers, young people and extended family to attend a local High Hopes parent support group High Hopes. Access to deaf adults and peers in the community. Support by a QToD through the referral process for cochlear implantation. Advice and guidance on suitable technology and apps e.g. NDCS Liaise with other, external agencies for advice and guidance and a multi-agency approach e.g. Audiology. Regular reviews of setting-based interventions, involving parents/carers and the QToD, to ensure progression and adaption if necessary. Direct teaching and/ or in class support from Qualified Teacher of the Deaf/ specialist TA INSET to whole staff regarding hearing loss, use of radio aid etc. Access to specialist health assessments, advice and equipment (e.g. Audiology for ear mould impressions and repairs). Access to a Communication Support Worker (CSW) with appropriate BSL/ communication skills when advised.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Hearing Impairment	Make basic adaptations to activities and materials to facilitate access for the young person. Pre-teaching key vocabulary, repeat instructions to check understanding and reinforce messages. Use of multisensory approaches to all teaching across all subjects such as the use of visual resources. Use appropriate language when asking direct questions and allow additional time to respond. Repeat contributions from other young people if needed. Signed, supported or augmentative language based on the young person's informed choice. Follow advice about how to support and include young people who are deaf or hearing impaired in post-16 settings. Seek advice from the HI Team on effects of hearing loss and setting strategies. Staff to receive training from the HI team, as required. Carry out an assessment of room acoustics and make reasonable adjustments by adapting the physical environment and reducing background noise. Pay attention to seating, position of the teacher, lighting and acoustics including background noise e.g. close windows and doors.	Auditory Verbal Therapy, Natural Aural Approach, Cued Speech, Sign Language, Total Communication Approach. Further information can be found at NDCS. Opportunities for explanation, clarification and reinforcement of lesson content and language. Attention given to seating, lighting and acoustics in setting and around the setting. Staff should be in the light when speaking. The young person should be seated away from busy areas and close to the source sound to enable clear sight of action delivery. Opportunities for individual and small group work in a quiet room. A key person who is trained in working with pupils with a hearing impairment and understands hearing equipment to: • Reinforce lesson content. • Deliver modified curriculum tasks. • Support language development. • Daily check of CYP hearing aids. Develop peer awareness. Opportunities for group interventions to develop social inclusion with peers e.g. Circle of Friends. Advice from other professionals e.g. Speech and Language Therapist, Cochlear Implant Programmes as appropriate.	Specific deaf related training opportunities for staff on request to the HI Team. Possible use of speech audiometry and other specialist tools to assess access to spoken language in class on request to LSS Hearing Impaired Team. Specialist language assessments, upon advice from the HI Team. Additional support from LSS HI Team if needs change on request from the setting.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Hearing Impairment	Use of soft furnishing and fabric backed boards to minimise echo/vibration. Review seating plans and make sure the young person can clearly see the teacher and other speakers. Staff awareness of areas of potential risk associated with childhood hearing impairment e.g. social and emotional impact, reduced opportunity for incidental learning. Involvement of parents/ carers and provision of information relevant to them. Use resources available at Council For Disabled Children. Development of a transition plan for young people in Post 16 provision and preparing for adulthood.	Use of equipment and technology, including: use of radio aids/ soundfield speaker systems as appropriate to meet assessed needs. Also seek advice about how to link equipment to Interactive White Boards, computers, iPads etc. Settings must use subtitles on all audio resources e.g. TV and DVDs. Access to transcripts where there are no subtitles. Visits away from the setting are planned well in advance and takes into consideration the young person's needs.	
Fine and Gross Motor	Potential barriers to access and participation are observed and assessed across a range of different contexts within the setting. Awareness of a young person's physical needs and how these may impact on development, socialisation and learning. Information regarding young people's strengths and needs and their preferences for support are recorded and shared with all staff working with the young person (for example, through the use of a Support Plan if appropriate).	Access to support from an additional key person in the setting to facilitate access to the curriculum, support the young person to manage their condition or move safely around the environment. This should be discussed with the young person. Provision of flexible support in the setting for personal needs as necessary and required whilst encouraging as much independence as possible.	Seek advice from appropriate health professionals should the young person have a diagnosis that affects their participation in activities. Request involvement from external services for example, Occupational Therapy and Physiotherapy Services. Staff have accessed appropriate training relevant to the young person's needs. Inclusion of the Occupational Therapist or Physiotherapist on any review and planning meetings for the young person. Ensure any specialist advice is shared with the young person, all staff and incorporated into the young person's plan.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	Create a 'clutter free' environment. Complete risk assessments and audits of the environment in relation to the young person's needs are regularly undertaken and extra consideration is given to any visits or trips. Ensure that there is sufficient availability of space for free movement within the classroom. Seating plans and the organisation should be considered to ensure sufficient working space. Positioning within the classroom should be considered to minimise distractions. Undertake and implement an accessibility plan for movement around the room and setting and give thought to whether an individualised fire evacuation plan is required. Resources and additional equipment should be provided for young people's needs such as sloping boards, scissors, pencil grips, chairs and adapted cutlery etc. This should be considered for all tasks. Reduce the amount of copying that the young person is asked to complete. Incorporate fine and gross motor skills practice, development and targets into daily aspects of the young person's curriculum. Consider activities which focus on spatial awareness, planning and body awareness. Consider any additional support for self-care tasks.	Consider free and unstructured time in relation to the young person's physical needs. Provide assistance and support for accessibility if this is required. Plan activities during unstructured times which are inclusive and promote the young person's independence. Consider the size and height of the chairs and tables and ensure that these are appropriate and encourage a correct posture to support fine motor function and writing. Should appropriate height tables and chairs not be possible for all activities consider support for the young person's feet. Provide space (such as a locker) for the young person to store and keep their equipment or bag in rather than them needing to carry this around with them during the day. Adjust the environment as necessary, for example, installing hand rails on stairs and grab rails or rails within the bathroom. Provide access to disabled toilets. Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT). All adults who are working closely with the young person have received relevant training for the young person's needs (for example, manual handling).	Allocated key person with time to adapt resources / attend training and conduct individual work. Inclusion Lead to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the young person. Incorporate moving and handling plans and care plans into planning, as advised by professionals. Ensure any plans are meeting need. Request a review should any aspects change. Ensure any specialist equipment continues to meet the young person's needs and contact relevant agencies regarding any repairs or alterations. Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning. Make advised adaptations to the setting environment e.g. changing plinths/ramps/hoists. Consider space needed to accommodate specialist equipment e.g. walker, standing frame. Ensure access to specialised seating and/or height adjustable tables. Carry out lessons on ground floor if there is no suitable access to classrooms on upper floors.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	Be mindful and take account of the potential fatigue that a young person may experience. Adjust the pace of sessions and ensure that there are opportunities for rest and for breaks as needed.	Consider access arrangements for assessments and exams, and apply for and implement them, as necessary.	Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible.
	Consider the location of rooms and timetabling where this is possible to facilitate ease of movement whilst continuing to take into consideration facilities and fatigue.	Consider further assessment of handwriting and motor skills such as the Detailed Assessment of Speed of Handwriting 17+ (DASH 17+).	
	Encourage the use of technology to support learning for example assistive technology and apps.	Consider alternatives to handwriting such as, voice recorders, iPad, laptop or netbook.	
	Support the development of sequencing skills for everyday tasks with a focus on increasing and supporting independence, for example, organisational skills, equipment organisation and tasks of daily living such as getting dressed in the morning.	Consider modifying activities that young people with perceptual difficulties may find challenging such as work sheets with lots of information, word searches or crosswords.	
	Encourage peer support across the learning environment.	Allow the young person to leave lessons early when travelling between rooms or buildings to avoid large groups in corridors and enable extra travel time.	
	Provision of accessible materials such as lined paper with spaces that are sufficiently wide enough to accommodate the young person's needs.	Additional time is provided to complete tasks.	
	There are mechanisms in place that support access to work, for example, attaching paper to the desk with masking tape when writing or completing tasks.	Teach strategies to improve self -organisation, including use of diaries, planners, and checklists of daily equipment needed.	
	Equipment in the classroom such as chairs and tables are at the appropriate height and position for the young person.	Deliver targeted motor skills development and provide extra time to complete this.	
		Ensure that the young person is able to access all facilities within the setting such as being able to reach hand basin taps, lockers etc.	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	Consider supporting of feet using a step or box. Withdrawals from class are kept to a minimum. Provide access to handwriting and hand strengthening activities for example, elastic bands, typing skills, Theraputty, tweezer and chopsticks games, jigsaws, and threading. Consider appropriate settings for educational trips as well as transport to and from (e.g. use of a vehicle with tail-lift, specialist seats etc). Use of whole setting resources and interventions and information from organisations such as: • Motor Skills United • Typing programmes. • Youth Sports Trust. • Active Tameside. • Yoga.	Resources and additional equipment should be provided for young people's needs such as sloping boards, scissors, pencil grips, chairs and adapted cutlery etc. This should be considered for all tasks. All staff understand referral processes for services such as Occupational Therapy. Share good practice across settings. Provide opportunities for small group and one to one work to develop individual skills.	
Sensory	In discussion with the young person and parents, talk about the young person's sensory preferences and dislikes in order to build a picture of the young person's sensory needs. Look at how the young person responds to your environment and make changes as appropriate e.g. lighting, noises, smells, tactile adjustments.	Develop more in-depth understanding of sensory needs and behaviour amongst all staff. If appropriate, complete initial sensory processing audit and environmental audit checklists.	Carry out more detailed sensory assessments/audits in collaboration with outside agencies and implement appropriate modifications. From the sensory assessment checklist(s) devise a bespoke sensory diet and implement. Inclusion Lead and outside agencies to support a key person in planning differentiated activities and strategies to support the young person.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Sensory	Ensure a one page profile is in place and shared with all teaching and non-teaching staff. Ensure staff are aware why these adaptations are needed, and that the young person does not receive consequences for engaging in sensory regulating behaviours or avoiding certain activities. Introduce new activities or play equipment in a multi-sensory way to the young person e.g. by showing, listening, saying, looking, writing, drawing. Make use of resources in the setting such as: • Movement breaks • Fiddle/fidget toys • Ear defenders • Wobble cushions • Chewelry • Putty • Therabands Considerations for good transitions between stages of education, and how to plan and prepare for these e.g. allowing the YP to have extra visits to new settings and ensure transfer of information. General sensory awareness and sensory strategies training to develop understanding of sensory diet and behaviour. Ensure staff understand that sensory needs are typical for young people with Autism and also those that have experienced Developmental Trauma.	Build in timetabled access to activities which meet the young person's sensory needs into the day, for example: timetabled movement breaks and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted and advised by professionals such as Occupational Therapists e.g. a room or space with low level noise and lighting. Consider using a workstation and/or set up a low stimulation workstation for focused tasks, a privacy board on group table or personal table with few distractions but informative visual information and support. Consider whether it would be appropriate to allow the young person to leave lessons early when travelling between rooms or buildings to avoid large groups in corridors and enable extra travel time. Incorporate adaptations for sensory feedback, e.g. Include specific activities to provide sensory feedback for the young person e.g. lifting and tidying heavy equipment away, putting on a backpack, using a weighted blanket. If young people are unwilling to touch specific objects offer alternatives such as tools, cling film over tables etc. Plan individual and small group activities focusing on sensory activities such as those involving resistance e.g. Pushing heavy play equipment, leaning into a wall, using resistance bands and peer massage. Implement strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service. Consideration of adapted unstructured time provision e.g. access to ICT suite, library.	Continue to liaise with any Health Professionals, as appropriate. Ongoing monitoring and reviewing of specific strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service. Seek more advanced sensory training and parent/carer training to further develop understanding of sensory behaviours and to develop a plan for the individual young person.

PREPARING FOR ADULTHOOD

SKILL	GETTING ADVICE — Classroom adjustments	GETTING HELP — SEN support interventions	GETTING MORE HELP — Personalised interventions
General	• There is a proactive approach to identifying needs and monitoring that appropriate action is taken across the Preparing for Adulthood outcomes. • Use of the Preparing for Adulthood Self Evaluation tool for post-16 providers and for schools. • All young people are supported to think about their aspirations for the future. Teaching staff and support staff have access to and use good quality information, advice and support which raises aspirations and enables young people and their families to make decisions about their future and their support. • The setting utilises the SEN Code of Practice (2015), Equalities Act (2010) and local guidance to identify students who may require additional and different provision. • Use the Plan-Do-Review process to monitor the young person's progress, alongside any external agency advice, whilst collating evidence of the impact of the strategies being used (refer to 'Best Practice Walkthrough' document). • Obtain and record young people's views using tools and resources (including picture sort and visual activities), the Blob Tree and observations. • Information about young people's needs is shared with staff who are working with them. • Use of effective assessment and monitoring tools to identify all young people's learning levels and track progress. • Implement support as above for individual needs related to the SEN Code of Practice (2015) and supplement with support identified below for the Preparing for Adulthood outcomes. **Where a young person has an EHCP:** • Refer to described outcomes and provision and implement. • Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. • Regularly update with strategies as they are tried. • Complete Annual Review of EHC Plan. • Continue to request and act upon advice from external agencies, as necessary. • Carry out and review assessments, as advised by external agencies.		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Employment	Access to courses that provide a clear focus on preparing young people with SEND for the world of work and offer pathways to employment. Ensure that young people know the range of routes into employment and education (e.g. through supported internships, volunteering, work shadowing, apprenticeships, part time work and entrepreneurship). Consider completing strengths based personal and vocational profiles with young people. Consideration is given to the young people's outcomes and aspirations. Explore with young people their aspirations, what they want to be able to do when they leave post-16 education or training and the support that they need to achieve this. Provide support focused on how to find a job and learn how to do a job (guided by trained job coaches). Help young people to understand any welfare benefits that might be available to them. For young people moving on to university, awareness should be raised of the Disabled Students Allowance. Encourage and support student advocacy, e.g. encouraging students to be able to articulate their needs and abilities. Links are made with supportive employment organisations.	Use of tools such as the Vocational Profile Workbook to accompany profiles that young people may complete For young people aged 18 and over, consideration should be given to the learning and application of life skills and support for working towards employment and possible higher education. Where it is recognised that the young person is likely to have care needs upon leaving the setting, the SEND Lead should inform the young person and parent /carer, of the adult social care transition assessment and support them in accessing assessment. Access to small group or one to one tutoring, mentoring or coaching focused on work place skills and behaviours such as organisational skills, writing and interview skills and CV building Monitoring and support to ensure competence to travel independently. Access to small group support and programmes focused on developing literacy skills for life, such as completing forms and job applications. Person centered career guidance to support the young person with opportunity awareness, decision making and developing career ideas. Meaningful work experience with support provided for the young person and employers.	Access to mentoring and coaching during work placements. Supervision of work placements. Personalised travel training. Increasingly individualised / adapted personalised programme of support. All routes into employment and education are explored with the young person including traineeships, Supported Internships, Study Programmes, Apprenticeships and Higher Education Support the young person to apply for schemes such as Access to Work funding to support employment Intensive key-working approaches to ensure that the young person has a trusted adult to offer support/withdrawal. Access to Supported Internships Referral or multi-agency meetings for assessment and advice to identify persistent and complex needs (e.g. access advice from external services such as Advisory Teachers, Speech and Language Therapy, Educational Psychology Service, Healthy Young Minds, Healthy Minds, Occupational Therapy Service and Physiotherapy Service. Use of resources such as Transition Help for Communities.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Employment	All young people have access to impartial and quality careers advice. Use of supportive documents such as The SEND Gatsby Benchmark Toolkit.	Work experience placements in mental health informed workplaces with a high level of awareness of mental health needs that has translated into support and practice. Use of resources and supportive documents such as Closing the Employment Gap for Young People: a toolkit for those supporting 16-25 years old experiencing common mental health problems to gain and stay in work.	
Independent Living	Ensure information is available and accessible about welfare benefits, housing benefits and funding streams available to support people to live independently. Whole-setting approaches focused on encouraging and supporting independence. Differentiated opportunities that enable young people to participate in community activities. This should include accessing advice from specialist health professionals. Young people may seek support from online support services such as The Mix. It provides advice on a range of issues including mental health, housing, money and work. Young people can talk to The Mix for free on the phone, by email or by webchat. Access to the Home Truths app.	Signposting and support to access additional online learning to develop skills, for example: • Skill Share Specific tailored group and individual sessions in response to need. For example, these might aim to support young people in exploring housing options and develop independence skills. Small group work focused on developing independent life skills such as managing bills, managing potential income including Personal Independence Payment. Provide support to understand the different types and options of living arrangements. Access to modified and alternative equipment that may be necessary to develop independent living skills. Use of publications such as My Own Place and No Place Like Home and The Reach Standards	Provide specialist interventions that support participating in society, including understanding mobility and transport support, and how to find out about social and community activities, and opportunities for engagement in local decision-making. This also includes support in developing and maintaining friendships and relationships. This could be offered through individualised learning pathways or group work. Increasingly individualised / adapted personalised programme of support. Provide Support to transition to Adult Social Care and other adult services as appropriate. Support an understanding of Personal Budgets for young people with Education Health and Care Plans. Independent travel training.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Independent Living	Consideration is given to the young people's outcomes and aspirations. Explore with young people their aspirations, what they want to be able to do when they leave post-16 education or training and the support that they need to achieve this.	Young people should be made aware of their right to request advocacy support to help them with planning, meetings and decision making.	Provide support to access information and advice on welfare benefits, including Disability Living Allowance / Personal Independence Payments; The Mental Capacity Act in relation to holding contracts for rented and owned accommodation; assistive technology and telecare; funding sources; support options. Use of resources such as Transition Help for Communities. Referral or multi-agency meetings for assessment and advice to identify persistent and complex needs (e.g. access advice from external services such as Advisory Teachers, Speech and Language Therapy, Educational Psychology Service, Healthy Young Minds, Healthy Minds, Occupational Therapy Service and Physiotherapy Service.
Good Health	Provide healthy lifestyle education, from internal and external services and staff. Young people are supported to understand the importance of physical activity and to make healthy choices in relation to their physical health. Young people are supported to understand the importance of their mental health and to make healthy choices in relation to their mental health. The use of a whole setting PSHE curriculum based on good health that includes physical, mental and sexual health including information focused on alcohol and drug education.	Close liaison with the young person, family members and other professionals already involved to identify signs and behaviours which may indicate changes in emotional and physical wellbeing. Small group intervention / tutorials focused on emotional well-being and mental health, physical health, sexual health and relationships and drug and alcohol education. Use of resources such as the Be Healthy Curriculum. Specific support to manage and attend health appointments through a process of gradual exposure.	Referral or multi-agency meetings for assessment and advice to identify persistent and complex needs such as: • Healthy Young Minds • Adult Mental Health Services. • Healthy Minds. • 42nd Street. • Educational Psychology Service. • Occupational Therapy Service. • Physiotherapy Service. Increasingly individualised / adapted personalised programme of support.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Good Health	Ensure that young people develop the skills in managing their own health, including advice and support to access dental, GP and other health related appointments. Signposting and resources are displayed and provided that make young people aware of information and their rights in relation to their health, For example, Get Your Rights and The Association of Young People's Health. Consideration is given to the young people's outcomes and aspirations. Explore with young people their aspirations, what they want to be able to do when they leave post-16 education or training and the support that they need to achieve this. Young people may seek support from online support services such as The Mix. It provides advice on a range of issues including mental health, housing, money and work. Young people can talk to The Mix for free on the phone, by email or by webchat.	Access to evidence based interventions and psychoeducation focused on sleep. Young people with a registered learning disability should be supported in understanding what a GP can help with and to access an annual health check.	Use of the Moving on Well resource. A resource aimed at improving transition practice for young people with complex health needs and disabilities. Assist the young person to make themselves known to their GP before the transition to adult services. Enable young people to start taking responsibility for managing their own health as appropriate (Mental Capacity Act). Use of resources such as Transition Help for Communities.
Friends, Relationships and Community	Personal, social, health and economic (PSHE) education sessions/days, covering a range of topics focused on community participation, relationships and friendships. Resources such as DisRespect NoBody. Curriculums / programmes of work that focus on relationships, including sexual health and relationships (choices, safety and good health).	Provide support in developing and maintaining friendships and relationships. This could be offered through individualised learning pathways or group work (e.g. shared interest groups). Provide support for young people to engage in interest related clubs. Delivery of small group sessions in line with identified needs focused on friends, relationships and community. Use mentors already in the young person's network to work with young people e.g. tutors.	Assist the young person in setting up and maintaining a circle of friends/support network. Use of mentors/key adults/coaches, with whom the young person can develop a trusting relationship, who is able to offer regular check-ins and personalised support. Increasingly individualised / adapted personalised programme of support. Signpost to specialist advocacy support and service user-led organisations.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Good Health	Curriculums / programmes of work that focus on promoting an understanding of responsible use of social media and other online activity such as gaming. Encouragement and support for young people in accessing a range of extracurricular activities. Support for accessing community volunteering opportunities. Young people are supported to know where they can go for help and how to use the emergency services. Consideration is given to the young people's outcomes and aspirations. Explore with young people their aspirations, what they want to be able to do when they leave post-16 education or training and the support that they need to achieve this. Support young people to identify activities that they may wish to access (these can be found through the Local Offer).	Encourage young people to share their developing skills and experiences, acting as peer mentors and buddies to other young people. Targeted activities offered by external agencies e.g. the Youth Support Service Consultation with external agencies and the young person with regards to risk-taking behaviours within the community. Provide support for communication and interaction needs as identified within the Communication and Interaction section of this document. Interventions such as: Talking About Community, social skills Materials that can be used to teach young people social skills in everyday settings. Independence through Communication, social skills A pack of activities, ideas and sessions for learners who need visual structure and may be non-readers or speakers.	Assist the young person in setting up and maintaining a circle of friends/support network. Use of mentors/key adults/coaches, with whom the young person can develop a trusting relationship, who is able to offer regular check-ins and personalised support. Increasingly individualised / adapted personalised programme of support. Signpost to specialist advocacy support and service user-led organisations. Support the young person to access short breaks if in line with their wishes. Consider how personal budgets might be used to promote community participation, in line with the young person's wishes and goals. For example, to access social activities. Referral or multi-agency meetings for assessment and advice to identify persistent and complex needs such as: • Healthy Young Minds • Adult Mental Health Services. • Healthy Minds. • 42nd Street. • Educational Psychology Service. • Occupational Therapy Service. • Physiotherapy Service.

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Good Health			Involvement of external professionals, in order to further personalise interventions. Work with other professionals to develop risk assessments to access activities, if appropriate. Use The Inclusion Web tool with young people. Use of resources such as Transition Help for Communities.

Glossary

Social Emotional and Mental Health

Name	Description	Cost
The Adult Resilience Program	The Adult Resilience Program has been developed specifically for 16-18+ year olds. Adult Resilience is a programme that aims to provide positive coping skills and build resilience for those who are age 16 and over. It is endorsed by the World Health Organisation. The structure of the FRIENDS Adult Resilience Programme is a 5 session course. Each session takes between 2-2.5 hour depending on the activities chosen by the facilitator.	£150 per participant
.b Mindfulness	.b is a mindfulness curriculum for 11-18 year olds in schools. Each .b lesson (between 40 minutes and 1 hour) is designed for use in the classroom to teach a distinct mindfulness skill. '.b' stands for 'stop' and 'be', capturing an important life-skill: being able to step back from the busy-ness of habitual activity and the relentless chatter of the mind. This offers greater space and clarity to make choices that support well-being in many ways. Mindfulness trains us to direct our attention to whatever is happening in the present moment: our breathing, other physical sensations, thoughts, emotions, or even everyday activities like walking and eating. This awareness means we can respond more skilfully to whatever the present-moment throws at us.	On request from .b Mindfulness website
Beating the Blues	Beating the Blues is an online Cognitive Behavioural Therapy (CBT) program for individuals with mild to moderate depression and anxiety. The online CBT course enables users to work through modules to learn about and apply the principles of CBT at a time and place to suit them.	Free
Blob Tree	Blob Trees are a visual stimulus, which consists of many blob figures on or around a tree. The tree represents a setting, such as a school or group, and the blobs represent different emotions and feelings. The tools can be used in a variety of settings and is especially useful in the classroom. Teachers can easily start a discussion by asking students which blob they relate to, especially since there is no right or wrong interpretation of the blobs. The tools give students an opportunity to share their issues and what they're feeling. It has been scientifically shown to be effective as a means of expressing feelings and emotions with young people and adults. The Blob Tree can be easily used in the classroom by both teachers and students as no professional training is necessary. However, Blob Tree does offer blob training sessions either online or in person so that teachers can become experts on the communication tools and use them to their highest potential.	Minimum: £3 for a single stimulus Maximum: £30 for a pack of stimuli
Bounce Forward	Formerly known as How to Thrive, bounce forward is the UK implementation of the Penn Resiliency Programme. They are a UK-based organisation who specialise in training schools to help young people become more resilient individuals using The Penn Resiliency Programme which is an intervention involving 18 hours of sessions based on the idea that beliefs about events activate and mediate our emotions and behaviours in situations. The programme teaches cognitive behaviours and social problem-solving skills. It encourages young people to challenge negative beliefs and use evidence to more accurately appraise situations and the behaviour of others. It also supports the development of effective coping mechanisms for individuals to use. This intervention is based at young people aged 5 to 16 years.	Costs vary depending on length and content of training and details can be found on the website

Name	Description	Cost
Boxall Profile	The Boxall Profile is an online resource for the assessment of young people's social, emotional and behavioural development in all educational settings. The Boxall Profile is a two-part assessment tool designed to track the progress of cognitive development and behavioural traits of young people through their education. The two-part checklist, which is completed by staff, is quick and identifies the levels of skills the young people possess to access learning.	Minimum: Tokens for individual users (1 token = 1 assessment and 1 learning plan) aimed at users looking to assess a small number of young people in their setting. 20 tokens for £30.00+ VAT Maximum: Yearly subscription for organisations Up to 300 learners £325.00+ VAT 301-600 learners £500.00+VAT 601-2000 learners £900.00+VAT
Circle of Friends	Circle of Friends is an approach to enhancing the inclusion, in a mainstream setting, of any young person who is experiencing difficulties in school because of disability, personal crisis or because of their challenging behaviour towards others. Circle of Friends works by mobilising the young person's peers to provide support and engage in problem solving with the person in difficulty. This intervention is aimed at young people aged 5 to 18 years.	Creating Circle of Friends Book £17.99 Contact Tameside EPS, for further information on their training package and intervention delivery
DEAL: Developing Emotional Awareness and Listening	DEAL is a free resource for teachers and other educational professionals designed to help develop resilience in young people. DEAL includes lesson plans, activities, hand-outs, DEAL digital resources, teachers' notes and staff training materials can all be accessed and downloaded at any time from Samaritans website.	Free
Elklan	Elklan have a range of courses to suit you whether you are an early years worker, teacher or assistant working with young people with Speech, Language and Communication Needs (SLCN). Their courses will enable you to develop the speech and language skills of ALL young people but especially those with speech and language difficulties. Delivered by local tutors throughout the UK they give practical advice and strategies that are also suitable for young people with English as an additional language and other special educational needs.	Price can vary according to provider. If supplied by Elklan the current fee is £395 plus VAT to include the accreditation fee and the book. The current fee for eLearning courses is £350 plus VAT
ELSA Support Intervention Package	ELSA offer a range of downloadable and printable resources to support social and emotional learning, through both 1:1 and group work.	£1 - £30, depending on the resource
Emotion Coaching	Emotion Coaching is a whole school approach, which focuses on using emotional validation strategies when a child is upset, angry or distressed. Through empathetic engagement the child's emotional state is verbally acknowledged and validated, promoting a sense of security and feeling 'felt'. This activates changes in the child's neurological system and allows the child to calm down, physiologically and psychologically.	Contact Tameside EPS, for further information on their training package and intervention delivery

Name	Description	Cost
Emotionally Friendly Settings	Emotionally friendly settings is a flexible whole-setting approach to improving children and young people's emotional health and well-being. The programme will support you to effectively identify and respond to a broad range of emotional needs of children and young people, raising their well-being to enable them to succeed and thrive.	£500 - £995 Contact emotionallyfriendly settings@salford.gov.uk for further information on their training package and intervention delivery
Emotional Literacy Assessment	A standardised assessment measuring young people's (aged 7 to 16 years) emotional literacy and providing ideas for intervention. The assessment is designed to discover where young people's strengths and weaknesses are in the area of emotional literacy, in order to provide a better understanding of these competences and, where necessary, to highlight areas for intervention. The assessments take the form of three checklists: Young person, teacher and parent. The checklists can be carried out either on photocopiable paper forms, or onscreen using the supplied CD. The assessment also provides information about techniques to develop and support young people, with specific activities to support each of the five subscales.	£157.45
FRIENDS Programme	FRIENDS is a cognitive behavioural intervention that develops young people's emotional resilience and prevents or intervenes early in the course of anxiety and depression. It does so by developing social and emotional skills to effectively cope with challenging situations. FRIENDS has been delivered to an estimated 800,000 children and adolescents worldwide and has been noted as one of the most robustly supported programmes for internalising disorders. The intervention is aimed at children and young people aged 4 - 16 years.	Online training: £150 per participant / £1,500 group training (up to 50 individuals)
HeartMath	HeartMath, which can be implemented by educators, clinicians or parents, usually consists of six to 12 sessions, although more sessions can be conducted as needed. Participants learn coherence-building techniques for emotional self-regulation, which teach them to focus on the physical area of the heart through deep, rhythmic breathing while thinking of positive feelings. This process is supported by emWave technology and using an ear or finger sensor connected to a computer running the emWave software, participants can view the different coherence levels produced by their heart rhythms (an indicator of physiological activity) in response to stressful and non-stressful thoughts. This visualisation allows them to monitor their pulse rates during different activities and learn how to self-regulate their emotions and maintain the breathing and heart rhythm pattern that is associated with non-stressful thoughts. The software also includes three age-appropriate games of varying length, which help participants to practise coherence-building techniques.	Site licences starts at £1500 per organisation
Lego Therapy	Lego-based therapy (LeGoff et al 2014) is an evidence-based approach that aims to develop social communication skills in autistic young people, such as sharing, turn-taking, following rules, using names and problem-solving. In practice, young people work in groups of three with each participant having a distinct role to build a Lego model collaboratively. A comprehensive guide to setting up LEGO Therapy groups is available to promote social skills in young people with autism spectrum disorders and related conditions through group LEGO building.	£10 - £30 for each Lego set Workbook: £14.99 Contact Tameside EPS, for further information on their training package and intervention delivery
Lions Quest Skills	Lions Quest programs use a social and emotional learning curriculum to teach character education, drug and bullying prevention, and service-learning through downloadable lesson plans.	A cost for the Skills for Action programme can be provided on request

Name	Description	Cost
Mental Health First Aid Training	Mental Health First Aid training for staff will support their understanding of fostering positive peer relationships.	£125 per person for half day online training
Mood Gym	Mood Gym is an online self-help program designed to help users prevent and manage symptoms of depression and anxiety. It is like an interactive, online self-help book which teaches skills based on cognitive behavioural therapy. Mood Gym is designed to be used by young people who would like to prevent mental health problems or manage problems which are troubling but not incapacitating.	£23 for individual access for 12 months. Organisational subscriptions are also available
Multidimensional Students Life Satisfaction Scale (MSLSS)	The MSLSS was designed to provide a multidimensional profile of young people's life satisfaction judgments. It is suitable for children and young people aged between 8-18 years.	Free for research use
Pyramid Club	Pyramid Club is a targeted intervention that supports young people who are shy, anxious and withdrawn and therefore find it difficult to make friends and build relationships. Each club accommodates eight to 12 young people and runs as ten weekly sessions of one and a half hours, delivered by trained club leaders.	Training is £200 per setting (for up to three staff) for a two half day training session and materials Tameside Educational Psychology Service for further details.
Pupils Attitudes to Self and School (PASS)	PASS is an all-age attitudinal survey that provides a measurement of a young person's attitudes towards themselves as learners and their attitudes towards school. The survey takes about 20 minutes to complete as young people read and comment on 50 statements. The PASS can be used with young people aged 4 - 18 years.	Primary setup £150.00 per school Secondary setup £250.00 per school Individual survey £1.00 per young person Contact details: To buy PASS and discuss requirements, call 0330 123 5375
Schools and Students Health Education Unit (SHEU) surveys	SHEU provides a range of questionnaires that are suitable for children and adolescents. The administrator has the option to choose from a range of topics about lifestyle and wellbeing. There are surveys for different groups such as young people, parents/carers and staff and governors. The questionnaires can be adapted for special educational needs or English as an additional language status. Contact details: sheu@sheu.org.uk	Prices vary. Please contact the organisation for further details
Seasons for Growth	Seasons for Growth is an evidence-based programme that enables young people to understand and cope with the feelings that arise from change and loss. The programme, which is designed on four developmental levels, takes place within a small group learning setting and combines psychology and education with peer support to explore the nature of grief using a range of activities.	To attend a scheduled 2 day training event = £295 which includes a manual. In some authorities the cost of training may be subsidised Please contact the trainer for further information. In-house training could be provided for a cluster of settings - up to 12 participants = £2,780, 13 – 20 participants = £4,020 - £4,300 Contact email: seasonsadmin@ notredamecentre.org.uk

Name	Description	Cost
Self Image Profile (SIP)	The Self Image Profile (SIP) allows you to quickly assess self image and self esteem in young people.	£119.49
Smart Moves®	Smart Moves® is a programme of evidence-based short sessions to give young people small learn-able skills (Smart Moves) that increase resilience.	Free
Socially Speaking	Socially Speaking will help you to introduce and practise skills young people need to develop and maintain relationships and to lead independent lives outside the school context. It is a social skills programme that lasts a whole school year and is divided into three units: let's communicate, let's be friends, and let's practise. It is suitable for 7–11 years and older young people with SEN.	£20
Social Skills Improvement System (SSiS)	The Social Skills Improvement System (SSIS) Rating Scales enable targeted assessment of individuals and small groups to help evaluate social skills, problem behaviours, and academic competence. Three different forms are available to be completed by a teacher, parent and young person. The scales are suitable for ages 3 to 18 years.	SSIS Rating Scales Manual £136.49 SSIS forms available in bundles of 25 hard copies or computer entry forms Price of bundles varies from £65.99 - £78.59 depending upon type of form and age-range e.g. 25 hard copies teacher forms for ages 3 – 18 costs £65.99
S.S. Grin	S.S. GRIN (Social Skills Group Intervention) is a targeted intervention. Designed in a small group format, it addresses bullying, victimisation and social-emotional competence. Specific social-emotional skills are taught through dynamic instruction and practice. With fully scripted lesson plans, group leaders are guided in how to use modelling, positive reinforcement and cognitive re-framing to support the specific skills of each session. The S.S. GRIN programmes are appropriate for school, after-school, community and clinic settings. The techniques used during the programme include lectures, role plays, brainstorming, games and many other hands-on activities like collaborative drawing. The programmes have been tested and proven effective as a weekly intervention, but they can be adapted to meet the specific needs of a setting. This intervention is aimed at 5 to 16-year olds.	£85 per site per version (any staff member can access the materials)
Starving the Anger Gremlin: A Cognitive Behavioural Therapy Workbook on Anger Management for Young People (Gremlin and Thief CBT Workbooks)	This workbook supports young people to control their anger effectively. Made up of engaging and fun activities, it helps them to understand why they get angry and how their anger affects themselves and others and teaches them how to manage angry thoughts and behaviours. The programme is based on effective cognitive behavioural therapy principles, can be worked through by a young person on their own or with a practitioner or parent, and is suitable for young people aged 10+.	£13.00
Starving the Anxiety Gremlin: A Cognitive Behavioural Therapy Workbook on Anxiety Management for Young People (Gremlin and Thief CBT Workbooks)	Starving the Anxiety Gremlin is a resource to help young people understand different types of anxiety and how to manage them, including panic attacks, phobias, social anxiety, generalised anxiety and obsessive-compulsive disorder. Based on cognitive behavioural principles that link thoughts, feelings and behaviours, the techniques described help young people to understand why they get anxious and how they can 'starve' their anxiety gremlin in order to manage their anxiety. This workbook uses fun activities and real-life stories and can be used by young people aged 10+ on their own or with a parent or practitioner.	£12.00

Name	Description	Cost
Starving the Depression Gremlin: A Cognitive Behavioural Therapy Workbook on Managing Depression for Young People (Gremlin and Thief CBT Workbooks)	This workbook helps young people aged 10+ to understand their feelings by explaining what depression is, how it develops and the impact it can have on the lives of young people. Based on the principles of cognitive behavioural therapy, this workbook aims to empower the reader to change how they think and act in order to manage their depression. Starving the Depression Gremlin can help support and inform wider therapeutic work with young people with depression, and it can be used independently or with a parent or practitioner.	£14.00
The Strengths and Difficulties Questionnaire (SDQ)	A brief behavioural screening measure for early detection of strengths and emotional problems in young people. It covers five key areas of emotional development: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, pro-social behaviour. A full can profile to be gathered as it includes views from parents and staff as well as the young person.	Free
Think Good, Feel Good (2nd Edition)	This is a workbook that provides a range of flexible and highly appealing materials that can be used to structure and facilitate work with young people. In addition to covering the core elements used in CBT programmes, it incorporates ideas from the third wave CBT therapies of mindfulness, compassion focused therapy and acceptance and commitment therapy. It also includes a practical series of exercises and worksheets that introduce specific concepts and techniques. This is a workbook written by an experienced professional with all clinically tested material. It includes a wide range of downloadable materials. A companion guide is also available.	Workbook £32.99. The book contains many practical materials which can be photocopied or freely downloaded from the online website www.wiley.com/thinkgoodfeelgood Companion Guide £27.99
Why Try? Resilience for Youth	The WhyTry program was created to provide simple, hands-on solutions for dropout prevention, violence prevention, truancy reduction, and increased academic success. The Resilience for Youth curriculum uses a multi-sensory learning approach to teach the skills of resilience.	On request
Zones of Regulation	Zones of Regulation is an intervention that supports the development of self-regulation and emotional control.	Free resources on website Contact Tameside EPS, for further information on their training package and intervention delivery

Name	Description	Cost
The Alloway Working Memory Assessment	Alloway Working Memory Assessment is a fully automated online assessment for working memory. It is designed for use with individuals up to the age of 69 years old. It provides a practical and convenient way for psychologists, clinicians and educational professionals to assess verbal (auditory) and visuospatial short term memory and working memory.	Please see website for further details
Cogmed	Cogmed Working Memory Training is an evidence-based program for helping children, adolescents, and adults sustainably improve their attention skills and working memory. The effect of Cogmed has been demonstrated in controlled trials and is delivered through web-based training under the supervision of a qualified Cogmed coach. It can be used with small groups or an entire class.	Minimum: £150 for five accounts and one Coach Maximum: £960 for sixty accounts and six coaches
Claro	Claro software provides a range of assistive technology for people experiencing difficulties with print and reading.	Please see website for further details
Comprehensive Test of Phonological Processing (CTOPP) Second Edition	The Comprehensive Test of Phonological Processing assesses phonological awareness, phonological memory and rapid naming. The CTOPP 2 was developed to aid in the identification of individuals from nursery through to college who may benefit from activities to enhance their phonological skills.	Complete Kit (including examiner's manual, examiner record booklets, Picture Book and 2 CDs) £437.39 (inc VAT)
Detailed Assessment of Speed of Handwriting (DASH) 17+	The Detailed Assessment of Speed of Handwriting is an assessment of handwriting speed for young people over the age of 17.	Dash 17+ Complete Kit: £146.45 (inc VAT)
DocsPlus	DocsPlus provides assistive software and technology.	Please see website for further details
Dragon	Speech Recognition Software.	Please see website for further details
Empower 3000	Empower 3000 is an online program which is designed to accelerate literacy growth for all children and young people from Year 2 to 12. The program provides high-interest current news event articles at the young person's reading level.	On request
The Engagement Profile and Scale	The Engagement Profile and scale is a classroom tool for young people with complex learning difficulties and disabilities. It supports focus on the young person's engagement as a learner and personalised learning pathways can be created. It prompts student-centred reflection on how to increase the learner's engagement leading to deep learning.	
Immersive Reader	Immersive Reader provides free assistive technology for reading.	Free
Inspiration	Inspiration software provides visual thinking tools for creating concept maps, mind maps, graphic organisers, diagrams and presentations.	£49 (ex VAT) for a single licence Volume and site licencing potions are available on request
Ravens Assessment	Raven's is a cognitive assessment which measures an individual's cognitive skills. The progressive matrices provide an assessment of non-verbal ability and the vocabulary scales provide scores in the verbal domain. This resource can be used with children aged 4-11years and young people 7-18 years.	£330.49

Name	Description	Cost
The Wide Range Achievement Test	The Wide Range Achievement Test measures basic academic skills of reading, sentence comprehension, spelling and maths computation. It can be used as an initial evaluation, re-evaluation or progress measure for any student.	Complete Kit £440.99 (inc VAT)

Communication and Interaction

Name	Description	Cost
Black Sheep	Black Sheep Resources for teachers and speech and language therapists working with young people with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN).	Talking About Community, social skills £28.35 Independence through Communication, social skills £80.00
Boardmaker	Boardmaker provides a wide range of symbol-based communication and visual supports which can be used around the environment, for displays and to create visual timetables.	Tiered pricing depending on number of installations/ packages Inclusive Solutions offer a 1 year subscription for multiple users to Boardmaker Online for £585 Boardmaker V6 is available for £203 and allows for two installations
Circle of Friends	Circle of Friends is an approach to enhancing the inclusion, in a mainstream setting, of any pupil or young person who is experiencing difficulties in school because of disability, personal crisis or because of their challenging behaviour towards others. Circle of Friends works by mobilising the young person's peers to provide support and engage in problem solving with the person in difficulty. This intervention is aimed at children and young people aged 5 to 18 years.	Creating Circle of Friends Book £17.99 Contact Tameside EPS, for further information on their training package and intervention delivery
Communication Trust	The Communication Trust offer a range of information and tools to enable practitioners to improve their practice, many of which are free to download. Their resources include the communication development pyramid. Staff can be trained in the pyramid and to understand how to adapt their communication cues so that they can 'step up' or 'step down' with a young person as necessary.	Free
Elklan	Elklan have a range of courses to suit you whether you are an early years worker, teacher or assistant working with young people with Speech, Language and Communication Need (SLCN). Their courses will enable you to develop the speech and language skills of ALL young people but especially those with speech and language difficulties. Delivered by local tutors throughout the UK they give practical advice and strategies that are also suitable for young people with English as an additional language and other special educational needs.	Price can vary according to provider If supplied by Elklan the current fee is £395 plus VAT to include the accreditation fee and the book. The current fee for eLearning courses is £350 plus VAT

Name	Description	Cost
Lego Therapy	Lego-based therapy (LeGoff et al 2014) is an evidence-based approach that aims to develop social communication skills in autistic young people, such as sharing, turn-taking, following rules, using names and problem-solving. In practice, young people work in groups of three with each participant having a distinct role to build a Lego model collaboratively. A comprehensive guide to setting up LEGO Therapy groups is available to promote social skills in woung people with autism spectrum disorders and related conditions through group LEGO building.	Creating Circle of Friends Book £17.99 Contact Tameside EPS, for further information on their training package and intervention delivery
Makaton	Makaton is a language programme that uses symbols and signs alongside speech.	Products range from £7 - £40 Full collection available for £325
Narrative Intervention Program	Narrative Intervention Program is a program to improve the story telling skills of young adults.	£95
PECS	PECS [Picture Exchange Communication System] - an alternative / augmentative communication system in which simple picture cards are used to communicate simple needs initially, working towards more complex sentence structures.	£65 for training manual. Additional products £5 - £50
Proloquo2Go	Proloquo2Go. Children, teens and adults who can't speak can use this Augmentative and Alternative Communication (AAC) app for iOS as a daily communication tool and to build language skills. From the first time someone opens the app, a few taps are all it takes to start talking to the world.	£250
Sliding in Technique	The 'Sliding in Technique' is a process that can be used to support a young person to talk in front of new people, where the new person 'slides in' very gradually.	Free
Social Thinking	Social Thinking gives strategies to teach essential life skills such as socio-emotional learning and self-regulation across all environments.	$60 plus P&P from US
Social Use of Language Program (SULP)	The SULP [Social Use of Language Program] is a framework for personal, emotional and social development from a communication and thinking skills perspective, providing multisensory activity sequences with interactive stories.	Free video links on website
TALC 2	The TALC 2 (Test of Abstract Language Comprehension) ELKLAN resource was designed to help speech and language therapists, education staff and the wider workforce to assess and develop the verbal reasoning skills of young people aged 11 and over.	£45 plus P&P
Talkabout (inc. Talkabout for Teens and Talkabout for Adults)	Talkabout is a complete programme for developing self-esteem, social and friendship skills.	£10 - £40 per book
Talk for Writing	Talk for Writing is a teaching framework that enables young people to imitate the language they need for a particular topic orally, before reading and analysing it, and then writing their own version.	One day training with a school or small cluster (from 9am to 3.30pm) costs £1250 plus expenses for up to 50 delegates. If numbers exceed 50, then there is an additional fee of £50 per person. A day's consultancy from 9am to 3.30pm costs £850 plus expenses Resources £5 - £30 per book

Name	Description	Cost
TEACCH	The TEACCH approach aims to respond to the needs of autistic people using the best available approaches and methods known so far, for educating and teaching autonomy. It is not a single method and can be used alongside other approaches.	Free guidance on website
The Vocabulary Enrichment Programme	The Vocabulary Enrichment Programme was created by a specialist speech and language therapist, it focuses on enhancing the understanding and expression of vocabulary and word meanings in young people aged 8 to 18.	£85.42
Widgit	Widgit provides a wide range of symbols that can be used to signpost around the learning environment, for displays and to create visual timetables.	Widgit Essentials Bundle has tiered pricing depending on number of installations. £289 – 1 installation Up to £1449 for 30 installations
Zones of Regulation	Zones of Regulation is an intervention that supports the development of self-regulation and emotional control.	Free resources on website Contact Tameside EPS, for further information on their training package and intervention delivery

Sensory and/or Physical

Name	Description	Cost
Circle of Friends	Circle of Friends is an approach to enhancing the inclusion, in a mainstream setting, of any pupil or young person who is experiencing difficulties in school because of disability, personal crisis or because of their challenging behaviour towards others. Circle of Friends works by mobilising the young person's peers to provide support and engage in problem solving with the person in difficulty. This intervention is aimed at pupils aged 5 to 18 years.	Creating Circle of Friends Book £17.99 Contact Tameside EPS, for further information on their training package and intervention delivery
Detailed Assessment of Speed of Handwriting 17+	The Detailed Assessment of Speed of Handwriting is an assessment of handwriting speed for young people over the age of 17.	Complete kit: £146.45 (inc VAT)
Kaz-Type	Inclusive touch typing software with a multi-sensory typing programme designed for schools and further education to support typing skills.	Please see website for further details
Motor Skills United	Motor Skills United was developed by Stockport Children's Occupational Therapy Service and consists of 70 large and small room activities to support the development of fine and gross motor skills targeting 7 core areas of motor development.	£54.94 (inc VAT)

Preparation for Adulthood

Name	Description	Cost
Barclay's Life Skills	Barclays Life Skills is a free to use platform with a variety of interactive tools to support young people and their parents develop their skills for work. Register on the website for access to a range of tools such as: • The Wheel of Strength • CV Builder • Virtual work experience • Interview preparation • Tips and strategies for building confidence • Tips, strategies and activities to support understanding of finances.	Free
Be Healthy Curriculum	The Be Healthy Curriculum is a youth led approach that allows young people the freedom to explore health and identity. It includes 10 group activities to get young people thinking and talking about health and wellbeing. Activities are split into two sections, one for groups of young people who have just started working together and the other for young people in established groups.	£20.00
Black Sheep	Black Sheep Resources for teachers and speech and language therapists working with young people with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN).	Talking About Community, social skills £28.35 Independence through Communication, social skills £80.00
Closing the Employment Gap	This resource provides a toolkit for those supporting 16-25 years olds experiencing common mental health problems to gain and stay in work.	Free
Finding Your Future Series	Together the DFN Foundation and National SEND Employment Forum have created a series of This videos to support young people with SEND to think about employment within the UK.	Free
The Inclusion Web	The Inclusion Web is a visual tool to support discussion and conversation across nine different life domains and the people and places that are important to young adults.	Free
Learn Direct Employability Course	This employability course supports with the following: • Searching for and applying for jobs • Writing a CV • Letter writing • Interview techniques	Free
The SEND Gatsby Benchmark Toolkit	The SEND Gatsby Benchmark Toolkit provides practical information and guidance for schools and colleges. The toolkit illustrates what good looks like across the 8 Gatsby benchmarks identified in 2014 by the Gatsby Charitable Foundation in the report "Good Career Guidance".	Free
Vocational Profile Workbook	This workbook was developed in association with Bath and North East Somerset Council to support young people into employment. This tool helps young people identify the types of jobs available, offers example CVs, covering letters and invitations to interview.	Free

Tameside
Metropolitan Borough

Getting Risk Support Post 16

GETTING RISK SUPPORT

Managing risk alongside a graduated response to skill development

Introduction

It is commonly understood that young people with Special Educational Needs and Disabilities (SEND) may display risky behaviours and/or be more vulnerable to risk than the wider population. It is important that alongside their skill development, as outlined through the graduated response tool, we keep young people safe in their settings and the wider community.

This document has been produced as an addendum to the SEND Thrive tool, which covers the Getting Advice, Getting Help and Getting More Help parts of the Thrive model. It relates to the fourth part – Getting Risk Support – which covers aspects of SEND that typically present settings with challenges, such as responding to self-harm or harmful sexual behaviour, for example. It is intended as an initial guidance and signposting document, rather than an all-encompassing document with detailed guidance of how to respond to each need. It is intended that this document will provide settings with some initial guidance for recognising, exploring and managing risk in relation to SEND. There are many other sources of information that will give a more in-depth understanding of managing risk, many of which we have provided links to. Due to the complex nature of the needs described within this document, it will be necessary for you to conduct further research into how best to respond, but we hope that this guidance will be helpful in getting you started.

A common thread that runs through each section of this document is the importance of working closely with others in relation to risk. It is important that professionals do not work in silo around matters relating to safeguarding and always involve the Designated Safeguarding Lead within their setting. Not only does a team approach benefit the young person, as there is increased opportunity for effective support, it also contributes positively to staff wellbeing, as staff working within teams around risk are more likely to feel well supported. It is essential that there are clear structures in place within all settings in relation to safeguarding young people and transparent plans for managing any safeguarding concerns that are regularly reviewed alongside national and local guidance.

For any safeguarding concern or concern relating to risk, Multi Agency Request for Service or adult social care service (as appropriate to the age of the young person) can be contacted for initial advice, support and signposting.

Distressed Behaviour

What do we mean by 'distressed behaviour'?

We can view all behaviour as a form of communication and young people will at times communicate their distress through their behaviour, as a way of getting their needs met. One way they may do that is through displaying physically aggressive behaviour. Physically aggressive behaviour is defined as behaviour causing or threatening physical harm towards others. It includes hitting, kicking, biting and using weapons. It can also include breaking possessions.

There are two types of physically aggressive behaviour: 'proactive' and 'reactive'. Proactive physically aggressive behaviour refers to goal-directed behaviour in which the young person is generally unprovoked by others. Reactive physically aggressive behaviour occurs when a young person is feeling angry and is provoked by others (Kaye & Eardley, 2011). Physically aggressive behaviour does not include general behaviour that challenges or verbal comments.

Why might some young people display physically aggressive behaviour?

Proactive physically aggressive behaviour: Understanding behaviour as communication

Understanding why a young person is displaying physically aggressive behaviour can enable you to provide them with effective support and reduce the risk of the behaviour reoccurring. Functions of behaviour include expressing emotion/ emotional regulation; gaining social interaction with adults or peers; obtaining things or events; avoidance of people, situations, events, activities etc.; and trying to gain control or feel secure. It is possible that the young person may have an unmet need relating to SEND or trauma that may be underpinning the behaviour. Completing an analysis of the possible functions of a young person's behaviour can be a helpful way of understanding their behaviour, in order to provide them with alternative methods to get their needs met. ABC (Antecedent, Behaviour, Consequence) Charts are a commonly used method of doing this.

Reactive physically aggressive behaviour: Understanding the 'fight or flight' response

Flight/ flight is the body's automatic and unconscious response to a perceived physical or psychological threat/ danger within the environment. When this happens, the emotional part of the brain takes over and so we are unable to make reasoned or informed decisions. Some young people may therefore display physically aggressive behaviour as a result of their body's fight/ flight response. Some young people who have experienced trauma are more likely to enter the fight/ flight response and may appear to become emotionally heightened more quickly in in response to certain situations. The arousal curve (overleaf) is commonly used to depict the fight/ flight response and it can be helpful to create a plan for how you may support young people at each stage of the curve (see table on page 94).

Further information about the flight/ flight response is available here:

https://www.nwbh.nhs.uk/healthandwellbeing/Pages/Fight-or-Flight.aspx

A note on Staff Wellbeing

Working with young people who display physically aggressive behaviour can have an emotional and physical impact upon staff who support them. It is important to consider the wellbeing of these staff and how they can be supported in setting.

Tameside
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Trigger Escalation Crisis Post-crisis
Phase Phase Phase Depression
Phase

(Possible additional assaults)

Recovery Phase

Baseline
Behaviour
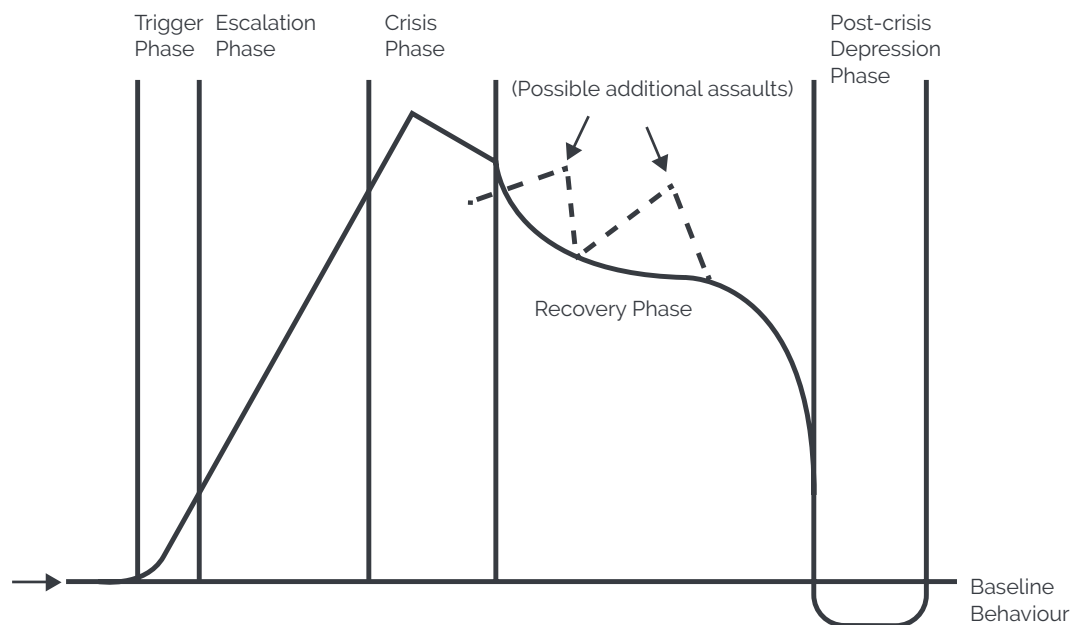
The Arousal Curve
(see page 94 for further exploration of behaviours that may be
seen and strategies that may be used at each stage

Creating a calm classroom environment

Developing a calm environment may reduce
the likelihood of young people displaying
physically aggressive behaviour and help
promote feelings of safety. Things that can
help to achieve this include:

- using behaviour management techniques
  that help young people to understand and
  manage their emotions, such as **Emotion
  Coaching**;
- creating predictable classroom routines (e.g.
  through use of **visual timetables**);
- using **softer lighting**/ natural light and
  reducing brightly coloured displays;
- regularly engaging in **mindfulness** or **yoga**;
  and
- creating **calming corners** within the
  classroom.

De-escalation and proactive support:

Some young people identified as being
more likely to display physically aggressive
behaviour may benefit from direct **teaching of
emotional regulation skills**; the identification
of a specific **key adult** with whom they
can build a trusting relationship; the use of
social stories in relation to the behaviour;
and the development of an **agreed planned
response** developed with the young person,
emphasising prevention and de-escalation,
e.g. **The Incredible 5 Point Scale**.

**Physically aggressive behaviour and 'positive
handling techniques'**

There may be occasions where, despite using
prevention and de-escalation strategies, young
people continue to move up the arousal curve
and display physically aggressive behaviour.
When this happens, adults may be required
(in extreme circumstances) to use positive
handling techniques. These should only be
used when absolutely necessary (i.e. where
safety is compromised) and for as short a time
as possible. It is important that staff are trained
in how to do this safely. Common approaches
used within settings include Team-Teach. It is
best practice to agree any positive handling
techniques with young people's parents/
carers. If it has been necessary to use positive
handling, this needs to be clearly recorded and
parents/ carers should be informed. It is best
practice to ensure that staff are fully debriefed
after any incidents. It is also important that
reparative work is undertaken following any
incidents, to reengage the young person and
repair any relationships potentially affected by
the incident. Please note that in cases where
young people have experienced previous
trauma, behaviours can be exacerbated by the
use of restraint.

For further information see: 'Use of Reasonable
Force: Advice for Head Teachers, Staff and
Governing Bodies' (Department for Education,
2013).

Stage	Characterised by....	Strategies
The Trigger Stage	A precipitating event, such as a perceived personal attack, threat to self-esteem or property – something happens. Feelings such as fear, anxiety or frustration leading to changes in behaviour, which may be subtle at first. The beginnings of physiological arousal.	At this point, if the young person wants to avoid getting to crisis stage, they can apply the gauge/ relaxation method to bring them down, e.g. a discussion of what particular triggers are. Pre-planned self-talk, visualisation or relaxation strategy. Previous trigger-identification. Distraction (change task/ activity or pre-planned alternative, e.g. favourite book). Relocation. Awareness of feelings about peer and adult physical proximity.
The Escalation Stage	The body preparing itself for fight or flight, e.g. tension in the muscles, rapid breathing. Reasoning and rational behaviour reduces. Energy level rises: pacing, talking more quickly/ loudly. Ability to listen reducing. Becoming focused on a particular issue. Others' behaviour becoming over-interpreted and perceived as threatening.	Some of those strategies used at the trigger stage may still be helpful together with: Individually tailored and well-practised interventions which are aimed at physical calming. Moving to a pre-agreed place to calm down, i.e. remove from the immediate environment. Adult needs to avoid using language which will escalate things more quickly, such as "pull yourself together!" Action by the adult to reduce non-verbal signals which may be perceived as aggressive; adult should sit down, 'soften' eye contact, and speak more quietly.
The Crisis Stage	A high state of physiological arousal. Control over aggressive impulses lessens. Violent behaviour, e.g. kicking, lashing out. Inability to make rational judgements. High egocentric frame of mind. Difficulty in responding to external stimuli. Confusion, combined with absolute focus.	The strategies open to use at this stage are few. The focus is on management of the situation. High rationality, low emotion. Assertive; aware of volume, tone, eye contact and proximity. Give plenty of space. Remove potentially dangerous things. Remove other young people, if necessary. Send for help.
The Plateau/ Recovery Stage	The end of the immediate crisis. Slow subsiding of anger. The real possibility of re-escalation. Over sensitivity to triggers and others' behaviour. Vulnerability and confusion. Guilt feelings may be starting to emerge.	Awareness that the aroused state can last up to 90 minutes and that it can easily be ignited in this period, with little/ no build up. Need to protect from repeating/ fresh triggers. Provide a space and time which feels safe. Calm tone and body language from adult. No inquests at this point.
Post-Crisis/ Depression Stage	The need to rest and recover. The beginnings of a return to rationality. The likelihood of unhappiness about what has happened. Guilt leading to negative feelings about self. Further threat to self-esteem.	Help the young person to distinguish between feelings about self and feelings about behaviour. Look for ways to help young person start to put things right. Discuss how things can be done differently next time. Encourage young person to believe you want to help them make it better.

The brain is divided into three areas: the reptilian brain, the limbic system and the neocortex.

The **reptilian brain** constitutes the most primitive brain region. It is responsible for the flight-or-fight response when there is a perceived threat to our survival and for many basic biological functions.

Emotions are concerned with the pull and push of the "here and now".

Rationality, problem solving, is concerned with the longer-term view considering alternatives, foreseeing and evaluating the pros and cons of acting in a certain way.
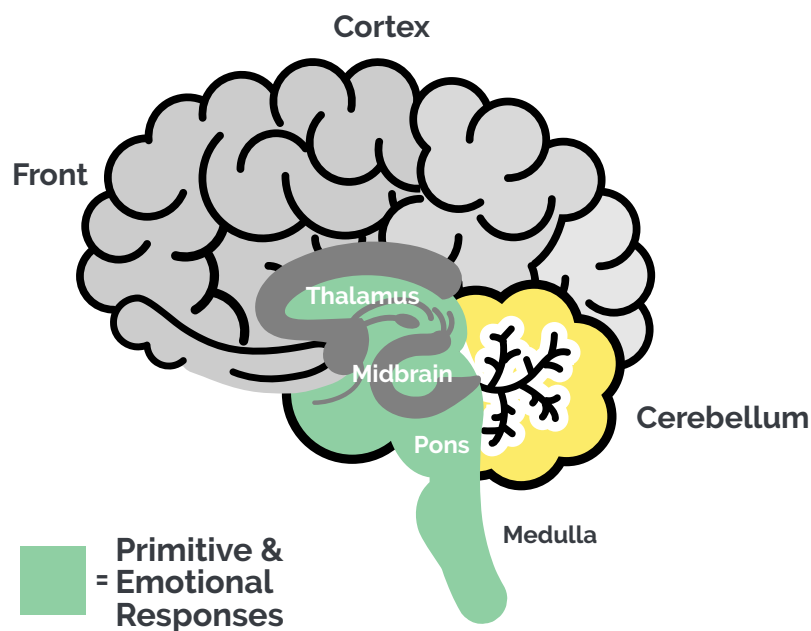
Managing Self Harm

What is self-harm?

Self-harm is when someone hurts themself as a way of dealing with very difficult feelings, painful memories or overwhelming situations and experiences. It can be the thing people turn to when they feel they have no other option.

Self-harm is any behaviour, such as self-cutting, swallowing objects, taking an overdose or running in front of cars, where the intent is to deliberately cause self-harm.

There are lots of different forms of self-harm. Some people use the same one all the time, whereas other people hurt themselves in different ways at different times.

Self-harm is not:

- a form of manipulation;
- attention seeking;
- done for pleasure;
- a group activity; or
- only carried out by those who are interested in 'Goth' sub-culture.

Warning signs

There may be a change in behaviour of the young person which is associated with self-harm or other serious emotional difficulties, for example:

- changes in eating/ sleeping habits;
- increased isolation from friends/ family;
- changes in activity and mood, e.g. more or less irritable or aggressive than usual;
- lowering of academic grades;
- abusing drugs or alcohol; and/or
- expressing feelings of failure, uselessness or loss of hope.

There may be no warning signs, and often people who self-harm go to great lengths to conceal their injuries so it can be hard to know for sure if a person does self-harm.

If you notice any change in a young person that concerns you, it is important to start a conversation with that young person. **If you do not feel able to do this, ask an appropriate staff member and follow your setting's safeguarding procedures**.

When assessing self-harm, it is important to consider how intentional the behaviour is, the lethality of the action and whether it is a one-off act or is something that a young person does frequently over a period of time.

What to do when a young person discloses that they self-harm

Whether someone tells you directly or you suspect that someone is hurting themselves, it can be difficult to know what to say and how best to approach the situation. You might feel shocked, helpless, responsible or any number of difficult emotions.

There are things you can do to make a difference to someone who self-harms. How you relate to them is one of the key things that can help them feel supported. Here are some things to keep in mind:

• Try to be non-judgemental to avoid reinforcing the guilt/ shame cycle associated with self-harm.
• Let the person know that you are there for them.
• Relate to them as a whole person, not just their self-harm. Remind them of their positive qualities and things they do well.
• Try to show empathy. Acknowledge that for them the self-harm may feel like an effective coping strategy for managing difficult emotions.
• Let them be in control of their decisions. Ask them what has helped them to deal with their difficult feelings in the past and which other adults should be part of their support team.
• Offer to help them find support.
• Encourage the young person to express their emotions, especially amongst young people who find it difficult to attach words to their emotions and where distress can be misunderstood as 'anger'.
• Encourage daily alternatives to managing emotions, such as physical activity and mindfulness, to help prevent a build-up of negative emotions.
• Support young people to practise coping strategies when in a state of calmness so they can be implemented more effectively when

Disclosures and confidentiality

The NSPCC states: "… strict reporting requirements have to be balanced out against young people's wishes and their wellbeing, which produces challenging moral, ethical and legal issues that will need to be fully debated. In any case, if a young person is prepared to disclose, their courage to do so needs to be acknowledged and their views on the pace of events, and on how things should be handled, should be respected."

It can be very challenging to decide whether to break a young person's confidentiality and disclose self-harm to their parents, or to other important adults in a young person's network. However, a young person who is hurting him or herself is often struggling to manage intense distress without enough support and/ or is struggling to communicate this. Very often, a reluctant young person can be persuaded to tell (or let you tell) their parents what has been happening.

It is important for young people to be aware of your policy for confidentiality and know what to expect if they disclose their self-harm to a teacher or member of staff. Confidentiality will, no doubt, be a key concern for students, and they need to know that it will not be possible for their support member of staff to offer complete confidentiality.

Self-harm and suicide

It is common to feel scared about the possibility of someone seriously hurting themselves or even taking their own life. While it is understandable to have these fears, it is useful to remember that self-harm doesn't necessarily mean that someone wants to end their life. There are, however, a small number of people who do go on to take their own lives, either intentionally or accidentally. It's therefore important to have an honest conversation about staying safe – for example, being aware when things are getting too much and knowing when to seek help.

How should settings respond to self-harm?

In your policy, there should be a protocol of how to deal with self-harm in your setting. The protocol should include:

- how and when a student's parents are informed;
- which staff are informed; and
- how to support staff dealing with incidents of self-harm.

There needs to be a designated member of staff to manage and co-ordinate the setting's response to self-harm.

The setting should also have a protocol of what to do if an adult finds a young person self-harming in setting.

See 99 and 100 for example flow charts of how to support young people.

What can settings do to prevent self-harm?

- What can settings do to prevent self-harm?
- Devise a setting policy, including a clear confidentiality policy
- Educate setting staff
- Develop a support plan
- Educate students to be 'good friends' by reporting peers' distress
- Address emotional well-being, promoting coping strategies and self-harm as part of the PHSE curriculum
- Have crisis telephone numbers available and easily accessible to young people
- Be mindful of contagion (when self-harm becomes a common occurrence amongst a group of young people)
- Supportive environment in the setting which is focused on building self-esteem and encouraging healthy peer relationships

IMPORTANT: Talking about self-harm does NOT lead to an increase in the behaviour or engage young people in self-harm

Remember

- Anyone from any walk of life or any age can self-harm.
- Self-harm affects people from all family backgrounds, religions, cultures and demographic groups.
- Self-harm affects both males and females.
- People who self-harm often keep the problem to themselves for a very long time which means opening up to anyone about it can be difficult.
- Empathy is an effective tool for responding to self-harm; we don't have to agree with how a young person manages their distress or 'fix' their problems, but we do need to have an empathic response.
- If the young person continues to self-harm, it's not because you have 'failed' to keep them safe or not been supportive enough.

Further guidance and support:

Further support and advice can be accessed via Healthy Young Minds. Ring 0161 716 3600 for consultation regarding self-harm Monday – Friday, 9am – 5pm. See also https://www.tameside.gov.uk/mentalhealth/16-24

Young Person Support:
https://www.mind.org.uk/information-support/types-of-mental-health-problems/self-harm/about-self-harm/
https://www.selfinjurysupport.org.uk/

Apps for teenagers who are self-harming include Calm Harm, MoodGYM and Self-heal.

Flow Chart: Managing Self-harm in Schools in a Crisis Situation

Staff member witness or is informed of pupil self-harm by pupil themselves or a friend

Staff member suspects a pupil has self-harmed and is in need of immediate medical attention

Contact emergency services if injury is life-threatening or if pupil is suicidal.

If the child/young person is taken to hospital, emergency protocols for treatment and care will be implemented and a CAMHS referral will be activayed by hospital.

On pupil's return to school, refer to process for managing recent/historical self-harm.

- Locate pupil
- Call for help from colleague/Emergency Services/GP
- Administer First Aid
- Keep calm and give reassurance - to the individual pupil and to those who might be effected by witnessing self-harm (staff-and pupils)

- Log injury and inform DSPCP (Designed Senior Person for Child Protection)
- Assess risk
- Explain confidentiality

- Discuss with DSPCP (or designated senior colleague)
- Inform parents/carers unless clear reason not to
- Follow safeguarding procedures if necessary

Taken from wiltshirepathways. org Model guidance: schools responding to incidents of self-harm

- Where pupil is not taken to hospital, refer to CAMHS where appropriate
- *Refer process for managing recent/historical self-harm*

Flow Chart: managing self-harm in schools (not in need of urgent medical treatment & return to school)

Pupil shows signs and signs and symtoms

| Staff member suspect recent or previous pupil self-harm (not in need of treatment) | Self-disclosure or peer disclosure of recent or previous pupil self-harm to staff member (not in need of treatment) | Self-disclosure or peer diclosure of thoughts of self-harm to staff member | Pupil returns to school following crisis (pupil self-harm) |

- Staff member logs and passes to DSPCP immediately
- DSPCP assess risk with the information available and makes a decision about the relevant course of action which may include identifying the most appropriate member od staff to meet with the pupil

Low / Medium risk

High risk / crisis
- Refer to crisis situation process
- Refer to CAMHS where appropriate

- Staff member meets with pupil and discusses supportive strategies / sets action with the pupil where appropriate
- Explain confidentiality
- Inform parents/carers unless clear reason not to
- Folow safeguarding procesures if neccessary
- Invlolve parents/carers and other professionals (e.g. school nurse/GP) as necessary/appropriate
- Encourage and help pupil and family to access sevices
- Refer to school counsellor or other counsellor if appropriate
- Contact CAMHS for advice or referral if appropriate
- Consult with colleagues if necessary

- Debrief with DSPCP/senior colleagues and set a professional action plan if necessary
- Consult with relevant health/social care practitioners if necessary
- Ensure all information necessary is kept recorded and up-to-date in the log and/or on the pupil's file

- Review with pupil
- Onwards support plan

Suicidal Thoughts

Suicidal thoughts in young people

Many people may have thoughts about suicide at some point in their life, without actually wanting to go through with completing suicide. Whilst thinking about suicide is relatively common, very few young people will actually attempt to take their own lives. Suicidal thoughts can stem from a range of underlying difficulties and can range from fleeting thoughts to more considered plans. Young people with suicidal thoughts may feel unable to talk to family or friends but may seek out someone they trust in setting to share their thoughts about wanting to end their life.

Young people who are having thoughts of suicide may or may not also be behaving in a way that puts their life in danger (suicide behaviours) and are potentially at risk of acting on these thoughts. Those who are already engaging in suicide behaviours are clearly at greater risk of harm or death.

Approximately one in ten (11%) teaching professionals said, on average, a student shares suicidal thoughts with them at least once a term.

However, only half (53%) said they would feel confident they could support a student who had shared suicidal thoughts with them (Papyrus, 2017).

Warning signs

Look out for young people who:

- have experienced a stressful event associated with a feeling of loss, including bereavement;
- show significant changes in behaviour which suggest they are asking for help, for example self-harm or giving away their possessions;
- use language associated with suicide, such as "I wish I wasn't here" or "It doesn't matter anymore";
- show physical indicators such as sleep disturbance and weight loss; and/or
- have overwhelming feelings of anger, hopelessness, loneliness or worthlessness.

Papyrus, a national charity for the prevention of young suicide, refers to the above indicators as 'invitations' which young people may use to ask for help. They advise that there is no definitive guide on how to know if somebody is thinking about suicide, however the above indicators are worth looking out for.

Often young people might refer to 'not wanting to be around anymore' or state 'I wish I was dead' as a way to express their distress. When young people make statements such as these, they should be explored further with them to accurately identify what they are trying to communicate rather than making your own interpretations.

Research has shown that asking a young person about their suicidal thoughts does not increase the likelihood that they will think about suicide more or act on their thoughts.

What can settings do to respond to risk in relation to suicide?

Research indicates that the best way to protect life is to promote positive mental health. This can be done at the whole setting level and through individual support for young people.

Whole setting level

De-stigmatisation

A whole setting approach to destigmatise talking about suicide and mental health is crucial. This may include taking opportunities through PSHE and other aspects of the curriculum to talk openly and honestly about suicide, without glorifying the act or public figures that have died through suicide.

Develop a setting policy

Papyrus recommends that settings have a policy statement which is known by the whole community and which shows a strong commitment to suicide prevention. A model policy and further guidance about this can be found in the Papyrus guide: Building Suicide Safer Schools and Colleges

Improve connectedness

Connectedness is the extent to which a young person is able to connect with other individuals; to their family members; to community organisations (i.e. settings); and to their cultural traditions and history. Below are some ways to support connectedness:

- Support relationships between the young person and positive adults in their lives.
- Help build positive attachments between the young person, their family and setting.
- Provide a range of activities that help the young person increase and strengthen their social networks, e.g. access to extracurricular activities and community clubs/ organisations.

Build Resilience

Research has shown that using a preventative approach focused on building resilience can help to reduce the risk of suicide. Whole setting approaches such as Emotionally Friendly Settings can help to promote the emotional wellbeing of the whole setting community, including staff (contact the Educational Psychology Service for further information).

ACE – achievement, closeness, enjoyment

To support and maintain positive emotional wellbeing, it is recommended that people aim to include a regular balance of activities in their life which give them feelings of:

- achievement, e.g. completing homework, learning a new skill;
- closeness, e.g. meeting up with a friend, phoning a family member; and
- enjoyment, e.g. playing computer games, watching TV, playing music.

It is helpful to communicate this idea to all young people and work with them to help them think about the kinds of activities they do in their lives and how these relate to ACE. It can be helpful to keep a log of activities under these headings so that they can see whether they have a good balance or would benefit from seeking new activities in a particular area. This could be done as a whole class or group PSHE activity as well as a more targeted activity for young people where you have concerns.

Individual level

It is important for people experiencing thoughts of suicide to first be encouraged to **meet their basic needs** of looking after themselves, such as eating, sleeping and keeping hydrated, as these can be difficult for someone in this situation. To ensure thoughts of suicide and low mood do not worsen because these basic needs are not being met, encourage the young person to do these first, and then think about some of the following **distraction techniques**:

- Physical activities, e.g. yoga, swimming, gym, scream/shout to loud music.
- Creative activities, e.g. painting, mindfulness colouring, blog, make a playlist of music that makes them feel good.
- Productive activities, e.g. cook/ bake, rearrange their room, write a to-do list.
- Relaxing activities, e.g. bath with candles, use their Hope box (see below), cuddle up in a blanket.

Distraction techniques allow us to focus on something else and can sometimes quieten intrusive thoughts enough to access support. *It is important to explain that distraction techniques are useful when people are feeling overwhelmed, but generally it is better to acknowledge and feel our emotions at other times*.

You can help a young person to create, decorate and fill a Hope box with things that can make them feel better when they are having suicidal thoughts. It is important that the box is personalised in whichever way the young person wishes. The Hope box can be filled with a variety of self-soothing items, based on the five senses. Here are some ideas of things
to include:

- *See* – images of loved ones, images that make you feel calm.
- *Hear* – relaxing sounds, favourite songs, audio books.
- *Smell* – scented candles, aromatherapy oils, scented lotion, favourite perfume.
- *Taste* – chocolate, sweets, hot chocolate.
- *Touch* – stress ball, soft fabrics, play dough, hand lotion, rubber bands to flick, fidget toys.

Creating a support plan

Helping a young person to make a support plan can contain the overwhelming feelings and plan some practical steps to help keep them safe. By creating a support plan and encouraging the young person to put it somewhere where they can find it easily, you are helping them with steps to follow to enable them to feel supported and stay safe when things become overwhelming. This will help them to get through the moment, prevent them from acting on thoughts of suicide and then allow them to access long-term support. This plan should be personal to the young person and as detailed as possible. It should be reviewed with the young person regularly and changed when they think of new things to add, or things to remove which they no longer find helpful. With the young person's permission, it can be shared with key people in their life. An example of a support plan can be viewed on page 107. It is important when working with young people around suicidality to be mindful of key dates and anniversaries that might be important for them and to be extra vigilant around their wellbeing around these times. It is advised that support plans are created alongside outside agencies.

Following discussion, if you feel that a young person is having suicidal thoughts, they would benefit from further support from mental health professionals such as NHS Mental Health Services or other third sector organisations such as 42nd Street. You should also follow safeguarding procedures. Use the prompts on the following page to guide your assessment of risk.

If you have concerns that the young person is at immediate risk to self or others, please refer to local A&E for risk assessment.

Risk assessment prompts

Prior to embarking on a conversation with a young person about their suicidal thoughts, ask yourself whether you feel confident and competent enough to have the conversation. If the answer is no, it may be that a colleague needs to step in to help you to navigate this difficult conversation, for your own and the young person's wellbeing. There are training courses you can access to help you increase your confidence in having these conversations.

At the beginning of the conversation, it is important to re-visit and re-iterate confidentially (see 'Managing Self-harm' section for further information.)

During the conversation, ask questions such as the following to try to assess the risk of the young person acting on any suicidal thoughts. Be patient and give them time to talk so that it does not feel like an interrogation.

- Are they saying that they have a desire to end their life?
- How often do they feel like this? Is it constant, frequent, occasional or rare?
- Are they talking about wanting to end their life now?
- Have they thought about how they intend to attempt suicide?
- Have they made definite plans? If so, have they already started preparing (e.g. writing a note, gathering medication)? The greater the evidence of planning for a suicide attempt, the greater the risk of the young person acting on their thoughts.
- Have they made any attempts in the past? Was there something that helped to keep them safe?
- Are there any protective factors which can help to keep the young person safe? Protective factors are very varied and specific to the individual, but could include family, friends, pets, a sense of responsibility or religious/ spiritual beliefs.
- Do they have any plans for the future? How far into the future? For example, are they thinking about a holiday planned for next year, an event in a few months (e.g. a birthday or festival) or is there no evidence that they plan to be around for future events?

Generally speaking, higher risk correlates with greater frequency of suicidal thoughts, greater evidence of planning and preparation for suicide, less evidence of future plans, and less access to support and protective factors. If they have already taken steps to end their life, follow the responding to a suicide attempt flowchart on the next page.

Resources and signposting to further information:

This section has been informed by the Emotionally Friendly Settings manual and the Papyrus guide.

Further support and advice can be accessed via Healthy Young Minds. Ring 0161 716 3600 for consultation regarding suicidal ideation Monday – Friday, 9am – 5pm. See also https://www.tameside.gov.uk/mentalhealth/16-24

Response flowchart

Suicide attempt at school

Is it a medical emergency?

YES
- Keep the student safe
- Call an ambulance on 999
- Follow emergency management procedures
- Remove harmful items
- Remove and support any other affected students
- Liaise with parents/carers

NO
- Remove harmful items
- Liaise with parents/carers
- Support student and any other affected students
- Refer student for a **Suicide Risk Assessment** as soon as possible

Is the student hospitalised?

YES
- Liaise with parents/carers
- Seek consent to liaise with mental health services involved
- Advocate for referral to appropriate mental health support
- Request support to complete a **Return to School Student Support Plan**
- Access any discharge information or Crisis Plans/safety plans
- Document decisions, actions and outcomes

NO
- Liaise with parents/carers
- Seek consent to liaise with mental health services involved
- Advocate for referral to appropriate mental health support

If limited information available develop a **Return to School Student Support Plan**

Key components of school response

Suicide Risk Assessment

- Develop and implement **Safety Plan** to guide school response and management
- Consider referral to appropriate mental health service
- Document decisions, actions and outcomes

1 Regularly monitor student

2 Review **Return to School Student Support Plan/Safety Plan** making changes as required

3 Consider the impact on students of exposure to the suicide attempt

4 Consider **Staff self-care and wellbeing**

Suicide attempt outside school

Did the student receive medical care or mental health support?

YES
- Liaise with parents/carers
- Seek consent to liaise with mental health services involved
- Liaise with any mental health service involved
- Request information about assessment and any **Safety Plans** put in place
- Document decisions, actions and outcomes

NO
- Liaise with parents/carers
- Arrange for **Suicide risk Assessment** to be completed

If limited information available develop a **Safety Plan**

Tameside
Metropolitan Borough

Example of support plan

SUPPORT PLAN
Coping strategies What strategies have you or could you use that might help keep you safe?
One small step... What is one small step you could take that does not feel too big?
Support network Who can support you in helping you to make sure this plan happens (friends/family/staff/others)?
Review When?   How?

Inappropriate or Harmful Sexual Behaviour

Sexual behaviour in young people

Expressing sexuality through behaviour is a healthy part of development. Professor Simon Hackett, an expert in the field of sexual behaviour in young people, has said that sexual behaviours sit on a continuum, from healthy, 'normal' behaviours, through to 'inappropriate', through to 'problematic', through to 'abusive', through to 'violent' (Hackett, 2010). It is important to be aware of which behaviours are part of healthy development and which are a cause for concern. Healthy sexual behaviour will typically occur between young people of similar age; be on a voluntary basis; be balanced by curiosity about other aspects of life; and may on occasion result in embarrassment but would not usually leave young people with deep feelings of anger, shame or anxiety.

What is harmful sexual behaviour?

Harmful sexual behaviour, or HSB, can be defined as "sexual behaviours expressed by children and young people under the age of 18 years old that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child, young person or adult" (derived from Hackett, 2014).

HSB may also be referred to as sexually harmful behaviour or sexualised behaviour. The term 'harmful' refers to the behaviour and not the person. It is harmful both to the individuals who display it, as well as those it is directed towards (NSPCC website).

HSB can take place online and may involve viewing pornography or sexting (Hollis & Belton, 2017).

Why might some young people engage in HSB?

There are many reasons why a young person may display HSB. It is common for young people who display HSB to have experienced trauma. This does not necessarily mean that they have been sexually abused, although this will be the case for some.

We can view all behaviour as a form of communication. In the case of HSB, this may be a communication of an unmet need, be that social, emotional, sensory, or some other need, which the young person may be attempting to have met in an inappropriate, or in some cases harmful, way. Consideration should be given to the potential drivers of the behaviour, not solely the behaviour itself.

Why is it important for schools be aware of HSB?

Educational settings play a key role in the early identification and prevention of HSB (NSPCC website). Setting staff are well equipped to contribute significantly to holistic assessments of the young person displaying HSB, given their knowledge of and relationship with them. Within the context of a multi-agency network, setting staff can support the message to young people that this behaviour is not OK whilst reminding them that support is available and helping to coordinate such support. Most young people who demonstrate HSB don't go on to become adult offenders, particularly with the right interventions and support (Hackett, Branigan & Holmes, 2019). Successful achievement of educational outcomes can prevent further sexual abusive behaviours and can promote positive life outcomes in young people who have displayed HSB (Hackett & Masson, 2011).

A note on language

It is important to be mindful of the terminology we use when referring to those who display HSB. The NSPCC advise avoiding the use of the term 'perpetrator' and to instead refer to "young people who display HSB". This is because some of the language we use can be stigmatising.

> "Educational establishments are often fundamental in the management of risk and continued facilitation of meaningful daily routine for children and young people who have displayed HSB, or who are under investigation. They are an integral part of partnership working and need to be included in information sharing and coordination of safety plans and supervision to maintain appropriate educational placements"
>
> (Hackett, Branigan & Holmes, 2019)

Things to look out for

The following guidance is taken from the Brook Sexual Behaviours Traffic Light Tool (Brook, 2012). Brook define sexual behaviours in the following ways:

- **Green** behaviours reflect safe, healthy sexual development. These would be equivalent to 'normal' behaviour on Hackett's (2010) continuum model. They are displayed between young people of a similar age or developmental level and are reflective of natural curiosity, experimentation, consensual activities and positive choices. **Green** behaviours are not considered harmful.
- **Amber** behaviours have the potential to be outside of safe and healthy behaviour. These would be equivalent to 'inappropriate' or 'problematic' behaviour on Hackett's (2010) continuum model. They may be of potential concern due to age/ developmental differences of participants, activity type, frequency, duration or context in which they occur. **Amber** behaviours have the potential to be considered harmful.
- **Red** behaviours are outside of safe and healthy behaviour. These would be equivalent to 'abusive' or 'violent' behaviour on Hackett's (2010) continuum model. They may be excessive, secretive, compulsive, degrading or threatening. They may involve significant age, developmental or power differences. They may be of concern due to the activity type, frequency, duration or context in which they occur. **Red** behaviours are considered harmful sexual behaviour.

For examples of **Green**, **Amber** and **Red** behaviours broken down by age/ stage, please refer to the information on the Brook Website.

It is essential when using this tool practitioners bear in mind that a young person's chronological age and their developmental stage may not be equivalent

Universal support for young people

All young people have the right to robust relationships and sex education which equips them with the information and skills they need to form healthy and positive sexual relationships; to feel confident about making the right choices; and to keep their traffic lights green. Examples of resources to teach young people about safe and healthy relationships can be found on the NSPCC Website.

It is important that settings foster a culture of safety, collaboration and respect so that young people feel able to approach the right people should they have any concerns. Young people need to know that it is OK to speak out; that they will be taken seriously; and that, where needed, the right help and support will be provided swiftly and sensitively. They and their parents/ carers need to be able to easily access help and support when they need it and need to know where they can go to obtain further advice.

Universal support for professionals working with young people

Settings need to foster a culture of safeguarding with young people at the centre. All settings with a responsibility for educating young people should have clear policies in place and a Designated Safeguarding Lead. Policies should cover HSB specifically. All staff working within such organisations should be made aware of relevant policies and procedures and their responsibilities in relation to these, so that they can act swiftly and appropriately if they observe or hear of young people engaging in sexualised behaviour, just as they would for any other disclosure that might raise concerns around risk. It is important that staff who have the opportunity to respond early are educated in the identification of normal, problematic and harmful behaviours and know how to respond appropriately.

What can you do when a young person displays sexual behaviours?

It can be difficult to determine what is healthy sexual behaviour and what is not, which is why involving your Designated Safeguarding Lead to explore the behaviour further is advised. Specialist services can also support you in understanding the nature and extent of the risk. However, not all sexual behaviour will require a referral to a specialist service. According to Brook, all sexual behaviours require some form of attention and response, but the level of intervention will vary depending upon the type of behaviour:

- **Green** behaviours provide opportunities for adults to give positive feedback and additional information. This may come in the form of group or 1:1 discussion and signposting to reinforce healthy relationships, for example discussions regarding consent or signposting to sexual health services.
- **Amber** behaviours signal the need to gather further information to assess the appropriate action.
- **Red** behaviours indicate a need for immediate intervention and action.

The NSPCC advise that, once identified, HSB should be viewed within a child protection context and Children's Services (or Adult Social Care, depending upon the age of the young person) should be contacted to provide assessment and recommendations if more specialist help is required. Please note that where referrals to Children's Services are indicated, the NSPCC advocates separate referrals for all young people affected (i.e. separate referrals for the person(s) displaying HSB and the person(s) to whom the behaviour is directed), as their needs are different and need to be considered separately. In cases of serious sexual assault, the Department for Education advise that information be passed on to the Police alongside Children's Services.

Responding to HSB

Statutory government guidance in relation to HSB can be found in the document Keeping Children Safe in Education (Department for Education [DfE], 2019) and in Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE, 2018). In addition to the statutory guidance, the NSPCC, in collaboration with Professor Hackett, have produced detailed guidance on responding to HSB in young people (Hackett, Branigan & Holmes, 2019). This should be read alongside the guidance from the National Institute for Health and Care Excellence (NICE, 2016).

Young people who display HSB are a varied and complex group with diverse needs that cannot be addressed by a 'one size fits all' approach. It will, therefore, be important for settings to refer to the guidance provided by the DfE, NICE and the NSPCC when developing their response to young people who display HSB. General principles of this guidance include:

- pre-planning supported by effective training and policies to facilitate calm, considered and appropriate responses following reports of HSB;
- early identification and accurate data collection throughout the process;
- use of a multi-agency approach between the setting, parents/ carers, external agencies and young people;
- consideration of ongoing risk and how to mitigate this, balanced with consideration of young people's access to education and ongoing skill development;
- assessment that considers the wider context, including family, social and developmental factors, and that aims to identify any unmet needs;
- proportionate response to the young person displaying HSB to the level of risk and need they present. Interventions should be evidence-based, holistic, strengths-based, proportionate, resilience-focused, and tiered—it should distinguish young people whose needs can be met through parental monitoring, from those who need psycho-educative support, and from those who would benefit from more specialist intervention services and placements;
- consideration of support to young people to whom the HSB has been directed; and
- consideration of support for parents/ carers.

Where agencies work in isolation to respond to HSB they to duplicate work, miss out vital communication...Working to address HSB is not the exclusive province of any one agency (Hackett, Branigan & Holmes, 2019)

Risk assessment prompts

Most young people with inappropriate or harmful sexual behaviour can be managed safely in settings with appropriate levels of support and clear risk management plans (Hackett, Branigan & Holmes, 2019). If you are concerned that a young person may be displaying inappropriate or harmful sexual behaviour, please refer to the prompts below to ensure you are involving the right people and services to assess and manage the risk appropriately:

- Have you considered the sexual behaviour within the context of the young person's developmental age or stage?
- Have you notified the Designated Safeguarding Lead within your organisation to support you with your thinking?
- If a young person is displaying **Green** behaviours (according to the Brook tool), this should be viewed as an opportunity to provide positive reinforcement as well as further information and support. Referrals to other services may be appropriate, depending on the individual case.
- If you are unsure of the level of the behaviour or if you feel it is definitely not a green behaviour:
- It is important to ensure that you have the right support to help you to manage your own feelings and responses to complex situations you may be faced with within your work. Pulling together a team of supporting adults to help assess the potential risks linked to sexual behaviours is an important early step when responding to potential HSB.
- If it is agreed that a young person is displaying **Amber** or **Red** behaviours, has a referral been made to Children's Services (or Adult Social Care, depending upon the age of the young person) for further advice and support within the context of a multi-agency team?
- Consider the immediate safety of young people and staff. It is important to be guided by relevant national legislation and guidance; organisational policies, procedures and guidance; human rights; the identified risks or needs of the young person; and the potential or real risks to others.
- Where HSB is indicated, are you using a multi-agency approach to inform a holistic assessment of and support for both the person displaying the HSB and the person to whom the HSB was directed?
- **It is essential to follow the procedures relevant to your local area**. The Greater Manchester guidance on HSB can be viewed in the Greater Manchester Safeguarding Children Procedures Manual. Please refer to this link for further information on how to respond to inappropriate or harmful sexual behaviour within Tameside.
- Contact your local **Safeguarding Children's Partnership** to enquire about relevant training.

Extremism

Terrorism and extremism

Terrorism and extremism are sometimes used interchangeably. Both pose a threat to students, but they have very distinct definitions.

In the UK we define terrorism as a violent action that:

- endangers a person's life;
- involves serious violence against a person;
- causes serious damage to property;
- creates a serious risk to the public's health and safety; and/or
- interferes with or seriously disrupts an electronic system.

Terrorism Act

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty, and respect and tolerance for different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

The Counter Extremism

Radicalisation

This refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. A radicaliser is an individual who encourages others to develop or adopt beliefs and views supportive of terrorism and forms of extremism leading to terrorism.

What is Prevent?

Prevent is about safeguarding people and communities from the threat of terrorism. Prevent is one of the four elements of CONTEST, the Government's counter-terrorism strategy. It aims to stop people becoming terrorists or supporting terrorism.

Need to know legislation

Since July 2015, settings have a legal responsibility to "have due regard to the need to prevent people from being drawn into terrorism". As a setting leader, it's your responsibility to put in place robust procedures to protect your students, and to review and evaluate these procedures to ensure they are effective.

educate against. hate

What steps should I take to ensure my setting complies with Prevent?

As a setting leader you should familiarise yourself with key documents including the Prevent duty guidance and Keeping young children safe in education.

Key activities include carrying out a risk assessment, building on existing local partnerships, training staff and ensuring appropriate IT policies and practices are in place.

You should:

· assess the risk of young people being drawn into terrorism;
· ensure your setting understands the relevant risks to students;
· get practical information regarding the risks in your area;
· follow your Local Safeguarding Children Board policies;
· seek advice and support from the local authority, police, civil society organisations and families and parents;
· ensure your safeguarding lead undertakes Prevent awareness training;
· train other staff to identify young people at risk;
· ensure your setting has suitable online safety controls;
· equip your students to stay safe online; and
· integrate internet safety into the ICT curriculum.

What are the warning signs of radicalisation?

There is no single route to radicalisation. It can happen over a long period of time or sometimes it is triggered by a specific incident or news item and can happen quickly. The behaviours listed here are intended as a guide to help you identify possible radicalisation.

Online behaviour:

• Accessing extremist online content
• Sympathetic to extremist ideologies and groups
• Joining or trying to join an extremist organisation
• Changing online identity

Outward appearance:

• Not listening to other points of view
• Abusive towards people who are different
• Embracing conspiracy theories
• Feeling persecuted
• Changing friends and appearance
• Converting to a new religion
• Being secretive of movements
• Increasingly argumentative
• Distancing themselves from old friends
• No longer doing things they used to enjoy

Which young people are vulnerable to radicalisation?

Young people from all backgrounds can become radicalised, but it's important to keep the risk in perspective. External factors such as community tension, global events, or having friends or family who have joined extremist groups all play a part. Any of these issues make young people more susceptible to believing that extremists' claims are the answer to their problems.

The following is a guide only, so use your professional judgment to assess students' vulnerability.

· Struggling with a sense of identity
· Becoming distanced from their cultural or religious background
· Questioning their place in society
· Family issues
· Experiencing a traumatic event
· Experiencing racism or discrimination
· Low self-esteem

What is the risk of radicalisation to young people with Special Educational Needs and Disabilities (SEND)?

Although the risk is low, it is important to consider how young people with SEND may be at risk of being targeted by individuals aiming to radicalise young people. Educate against Hate reports that some young people with SEND might be vulnerable to radicalisation, if they have 'difficulty in interacting socially, lacking empathy or not understanding the consequences of their actions.'

Young people who experience communication difficulties can struggle to tell a trusted adult that they are worried about extreme content someone has shown them.

What should my staff be teaching in class?

- Settings should be a safe space where students can discuss social and political issues, including extremism and terrorism.
- Building young people's resilience will put them in a stronger position to reject extremist views.
- Teachers should build resilience to extremist narratives by giving students the skills and knowledge to explore issues critically, to weigh evidence, debate and make reasoned arguments. This can include:
  - age-appropriate conversations about extremism and radicalisation promoting fundamental British values of democracy, rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs; and
  - discussing issues of identity, difference and tolerance.

What is Channel?

Channel is a multi-agency, voluntary programme which safeguards people identified as being vulnerable to radicalisation. A referral can come from anyone who is concerned about a person they think is at risk. It is not a criminal sanction and will not affect a person's criminal record.

Many types of support are available as part of the Channel programme, addressing educational, vocational, mental health and other vulnerabilities.

How to Report Concerns about Individuals at Risk

If you are worried about someone being radicalised to be involved in, or to support, violence or terrorism you can contact the Children's Multi Agency Safeguarding HUB on 0161 342 4101.

Further information and resources

http://educateagainsthate.com/
https://www.pshe-association.org.uk/curriculum-and-resources/resources/addressing-extremism-and-radicalisation-lesson
http://www.preventforschools.org/
www.gov.uk/government/case-studies/the-channel-programme
http://counterextremism.lgfl.org.uk/default.html
www.gov.uk/government/news/guidance-on-promoting-british-values-in-schools