

Sensory Impairment and/or Physical and Medical Needs (0-25 years)

For young people with sensory impairment or physical and/or medical needs, please liaise with a specialist teacher from the Low Incidence Needs Team to assist with Threshold identification for:

- **Vision Impairment**
- **Hearing Impairment**
- **Multi-Sensory Impairment**
- **Physical and/or Medical needs**

For more information on sensory impairment or physical and/or medical needs, see the relevant sections in the Primary/Secondary sections of the Threshold document.

The following provision **may be** available, dependent upon the setting the young person is accessing.

Sensory and/or Physical and Medical Needs - Vision Impairment

Threshold Descriptors Overview

Threshold 1

(Eligibility Criteria E)

The young person meets criteria for vision impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).

- The young person does not require any active involvement or further assessments from LINT-VI. The young person remains on caseload and LINT-VI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.
- The young person's LINT-VI Low Vision Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related CFVI Areas.
- The young person either does not require or requires minimal LINT-VI liaison with multi-agencies.
- The young person's learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching VI Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching VI Friendly strategies.
- The young person has a knowledgeable and empowered family around them due to information shared by LINT-VI.
- The young person has knowledgeable and empowered educators around them due to information shared by LINT-VI.
- All key persons involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-VI which has been cascaded to relevant staff after their initial or last LINT-VI specialist assessment and passed to relevant staff year by year i.e. from one class teacher to the next.

Threshold 2

(Eligibility Criteria D)

The young person meets criteria for vision impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).

- The young person does not require any active intervention based on the specialist curriculum from LINT-VI following assessment and provision of strategies. The young person remains on caseload and LINT-VI provides an annual assessment including a monitoring visit with updated strategies (as appropriate).
- The young person's LINT-VI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related CFVI Areas.
- The young person requires minimal LINT-VI liaison with multi-agencies as they need the LINT-VI annual assessment shared as appropriate.
- The young person's learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching VI Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching VI Friendly strategies.
- The young person has a knowledgeable and empowered family around them due to information shared by LINT-VI.
- The young person has knowledgeable and empowered educators around them due to information shared by LINT-VI.
- All key persons involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-VI which have been cascaded to relevant staff on a yearly basis in line with transitions.

Threshold 3

(Eligibility Criteria C)

The young person meets criteria for vision impairment with assessed need identifying a young person with one approach required to access information around them (i.e., modified and enlarged print or symbols).

- The young person remains on caseload and LINT-VI provides a short-term block from one Area of the CFVI (up to 6 visits).
- The young person may need a low level of intervention to successfully transition between different settings.
- The Low Vision Aid assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related CFVI Areas.
- The young person requires minimal or short-term LINT-VI liaison with multi-agencies.
- The young person requires LINT-VI to provide time-limited advice and guidance in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching VI Friendly strategies.
- The young person requires LINT-VI to provide time-limited advice and guidance in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching VI Friendly strategies.
- The young person's family require additional time-limited advice and guidance to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require additional time-limited advice and guidance to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require timely LINT-VI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during the autumn term when the young person has transitioned.

Threshold 4

(Eligibility Criteria B)

The young person meets criteria for vision impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e. large and modified print and tactile).

- The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and provided on at least a termly basis.
- The young person requires block/s of intervention based on at least 2 Areas of the CFVI in addition to Facilitating an Inclusive World (Area/s to be determined by QTVI) which are expected to take up to a year to embed across setting and home.
- The young person's Low Vision Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e., CCTV, iPad, hand-held magnifiers.
- The young person may need a medium level of intervention to successfully transition between different settings.
- The young person requires a low/medium level of LINT-VI liaison with multi-agencies.
- The young person requires LINT-VI to provide advice, guidance and direct support over the year as required in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching VI Friendly strategies.
- The young person requires LINT-VI to provide advice, guidance and direct support in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person's family requires frequent communication (minimal of half-termly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (minimal of half-termly) to ensure that the young person has knowledgeable and empowered educators around them.
- All key persons involved with the young person require at least termly LINT-VI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 5

(Eligibility Criteria A)

The young person meets criteria for vision impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e., print and tactile).

- The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.
- The young person requires specialist teaching in at least 4 areas from the CFVI.
- The young person's Low Vision Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e. CCTV, iPad, hand-held magnifiers.
- The young person may need a high level of intervention to successfully transition between different settings.
- The young person requires a medium/high level of LINT-VI liaison with multi-agencies.
- The young person requires LINT-VI to provide advice, guidance and direct support (minimum of 10 hours per week) in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching VI strategies.
- The young person's family requires frequent communication (minimal of fortnightly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (at least twice a week) to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require at least half-termly LINT-VI monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 6

(Eligibility Criteria A*)

The young person meets criteria for vision impairment with assessed need identifying a young person with auditory/tactile approaches as their primary access to information around them.

- The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-VI liaison meetings which occur either weekly or fortnightly.
- The young person requires long-term intervention based on at least 6 Areas of the CFVI in addition to Facilitating an Inclusive World (Areas to be determined by QTVI) which are expected to take at least a year to embed across setting and home following assessment and provision of strategies.
- The young person receives training and assessment in the areas of Independent Living Skills and Orientation and Mobility from the LINT Paediatric Habilitation Specialist.
- The young person will need a high level of intervention to successfully transition between different settings.
- The young person requires a high level of LINT-VI liaison with multi-agencies.
- The young person requires LINT-VI to provide advice, guidance and full-time support in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching VI strategies.
- The young person's family requires frequent communication (minimal of weekly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (daily as applicable) to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies with LINT-VI liaison meetings occurring either weekly or fortnightly.

Threshold 1 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed needs identifying a young person with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for VI equivalent is E (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 1 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person does not require any active involvement or further assessments from LINT-VI. The young person remains on caseload and LINT-VI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.</p>	<p>Assessment</p> <p>Initial/last Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> • Auxiliary Aids such as hand-held magnifiers if previously put into place are applied. • The young person understands their vision impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> • The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by vision impairment and provide support to enable staff to plan appropriately. • Settings take on CAF Lead Practitioner role where appropriate. 	<ul style="list-style-type: none"> • Adherence to Reasonable Adjustments i.e., exemption from learning a cursive script. • All staff and supply staff, visiting speakers, sport, drama groups etc. to be informed of needs at the planning stage of activities. • Tutor verbalising work on the board and all written information within the learning environment. • Consideration of seating position – young person positioned in optimal location in relation to interactive white board/learning facilitator/ point of learning and not facing a window. • Provision of a range of multi-sensory tasks, ensuring that teaching styles are matched to the young person's style of learning and support alternative ways of accessing and recording work. • Cue and reinforce young person's listening and attention. • Implement visual fatigue rest breaks within the setting day. • Attention to speed of lesson delivery and speed of working. • Differentiated questioning and explicit language used to explain whole class responses. • Setting staff give careful consideration to the accessibility of learning materials in terms of readability, density of text, size and choice of font (use a simple font such as Comic Sans or Sassoon), layout, overlays, coloured paper, appropriate use of illustrations, clutter-free diagrams, all modified resources onto A4 paper only/or use of LVAs. • Tutors to ensure presentations delivered on interactive white boards have a high contrast between the text and background. Any text displayed is in a clear font such as Arial or Comic Sans. 	<ul style="list-style-type: none"> • Appropriate resources made available from within setting. • Some in-class support provided by setting – especially in lessons where health and safety require consideration. • Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post- teaching for consolidation and generalisation of skills. • Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. • Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. 	<ul style="list-style-type: none"> • Provision of auxiliary aids (low vision aids) by LINT following LINT-VI Low Vision Aid Assessment. • Key person/s to take responsibility for acting upon personalised educational advice supplied by specialist Qualified Teacher of Vision Impairment (QTVI) around individual young person's needs (adaptations and curriculum delivery to facilitate access). • A designated member of setting staff to monitor and manage the use of specialist equipment e.g., CCTV, iPad, magnifiers. • Provision of consumables by setting e.g., specialist paper, matt laminates, appropriate black fibre tipped pens/ dark leaded pencils, use of a sloping desk or board. • Provision of additional quiet workspace for 1:1 and small group work • Appropriate levels of support on trips.

Threshold 1 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO (with parental permission). • The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • Educators, parent/ carer and/or other key professionals can request updated advice if needed or visual functioning changes. 	<ul style="list-style-type: none"> • Tutors to ensure young people can access work displayed on interactive white boards in the method identified by the QTVI e.g., handouts, e-mailing presentations to be accessed on iPad or laptop or by use of mirroring software. • Tutors to use dark coloured white board pens and avoid light colours or pens which are running out. • Provide a consistent routine. • Provide additional transition visits for young person into a new environment. • Encourage social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully including the young person in the wider setting life and at busier times of the day i.e. in a café. • Say the young person's name first to gain their attention. • Describe events that are going on around them if required e.g. spontaneous laughter caused by an event at the other side of the room. • Verbal description alongside facial expressions or body language. • Provide opportunities to take responsibility for helpful tasks in a range of settings. • Ensuring any AAC are accessible e.g. symbols aren't laminated on shiny laminate. • Provide a 'can do' environment where the young person can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the young person and develop their self-advocacy skills. • Ensure balance between intervention and independence is understood by all professionals. 	<ul style="list-style-type: none"> • Exam access arrangements may allow 25% additional time. 	<ul style="list-style-type: none"> • Setting will ensure the young person has all the curriculum materials and equipment required to hand and that the materials are organised and contained consistently and securely. • Provision of additional workspace/storage for specialist equipment. • Identification of a key member of staff for the young person to support emotional and mental wellbeing. • Access to SEND-Support-and-Guidance-Document-2021.pdf (gateshead-localoffer.org) • Access to 3701-JH-Accessibility-STRATEGY-2021-24.pdf (gateshead-localoffer.org). • Known to Vision and Hearing Support (adult-based Gateshead service) if appropriate.

Threshold 2 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for VI equivalent is D (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 2 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person does not require any active intervention based on the CFVI from LINT-VI following assessment and provision of strategies. The young person remains on caseload and LINT-VI provides an annual assessment with updated strategies (as appropriate).</p>	<p>Assessment</p> <p>Annual Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> LINT-VI provides an annual assessment including up to 3 visits with updated strategies (as appropriate i.e., troubleshooting for specialist equipment may generate additional visits). LINT-VI provides an Annual Assessment Report or letter, Specialist Strategies and links shared within Report to visual conditions. Auxiliary aids e.g., hand-held magnifiers are suitably removing barriers to access. The young person understands their vision impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> The setting identifies a key member of staff to work in partnership with LINT-VI to monitor and manage the use of auxiliary aids (low vision aids) throughout the year. Setting will facilitate monitoring and assessment visit from LINT-VI. The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by vision impairment and provide support to enable staff to plan appropriately. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within setting. Some in-class support provided by setting – especially in lessons where health and safety require consideration. Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post- teaching for consolidation and generalisation of skills. Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. Exam access arrangements may allow 25% additional time. 	<p>As Threshold 1</p>

Threshold 2 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Settings take on CAF Lead Practitioner role where appropriate. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO (with parental permission). • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. 			

Threshold 3 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed need identifying a young person with one approach required to access information around them (i.e., modified and enlarged print or symbols).</p> <p>Eligibility Criteria for VI equivalent is C (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 3 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-VI provides an annual assessment with updated strategies as appropriate.</p> <p>Areas 2-11: The young person requires active intervention based on a short-term block from the CFVI provided by LINT-VI following assessment and provision of strategies. Intervention will be reviewed on a termly basis.</p>	<p>Assessment</p> <p>Annual Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires a short-term block from one Area of the CFVI (up to 6 visits) provided by LINT-VI. LINT-VI provides an Annual Assessment Report, Specialist Strategies and links shared within Report to visual conditions. The Low Vision Aid assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related CFVI Areas. <p>Planning</p> <ul style="list-style-type: none"> Educators have a minimum of termly liaison with QTVI to support the young person and themselves in understanding the impact of vision loss and promote independent use of auxiliary aids. Setting identifies a key member of staff to work in partnership with LINT-VI to monitor and manage the use of auxiliary aids (low vision aids) throughout the year. Settings take on CAF Lead Practitioner role where appropriate. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. Risk assessments supplemented by LINT. Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO (with parental permission). 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Clear routines supported by cues, e.g., objects of reference, auditory timetables. Some additional group and individual work to meet identified needs and to facilitate learning and inclusion as appropriate access to curriculum. Groups and layout of tables will need to be adjusted to ensure access to all auxiliary aids whilst ensuring the young person can still sit next to/near their peers. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions. QTVI supports educators in developing the young person's personal understanding of their vision impairment and developing their confidence and independence into adulthood. Educators support LINT-VI in practising and consolidating skills taught discreetly within specialist curriculum as well as delivering visual training as appropriate which is embedded within the day. Exam access arrangements may allow 25% additional time. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Training offered re the needs of the young person to raise awareness of different types of vision impairment and strategies to reduce barriers to learning and ensures all relevant staff attend.

Threshold 3 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Educators identify times within the day to deliver training programmes as appropriate. • Communication between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their families. • Communication between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing vision impairment and preparing for interviews. 			

Threshold 4 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e., large and modified print and tactile).</p> <p>Eligibility Criteria for VI equivalent is B (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 4 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and provided on at least a termly basis.</p>	<p>Assessment</p> <p>Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires block/s of intervention based on at least 2 Areas of the CFVI in addition to Facilitating an Inclusive World (Area/s to be determined by QTVI) which are expected to take up to a year to embed across setting and home. LINT-VI provides an Annual Assessment Report, Specialist Strategies links shared within Report to visual conditions. The Low Vision Aid Assessment has identified there is a requirement for specialist intervention based on use of auxiliary aids via related CFVI Areas. Advice, guidance and direct support over the year is required in line with the young person's specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching VI Friendly strategies. Timely LINT monitoring is required to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. An environmental assessment may be necessary to assess accessibility of setting environment. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Auditory or tactile approaches to learning and teaching may supplement the visual stimuli used. The young person working with tactile learning resources that will need additional differentiation to take into account pace of learning. Setting provides materials in advance of lesson so that materials can be presented in an appropriate format e.g., modified print. Language needs to become clearer, concise and meaningful. Auditory clutter and less busy learning environments are needed to facilitate learning. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions and rest breaks. QTVI supports educators in developing pupil's personal understanding of their vision impairment and developing their confidence and independence into adulthood. Educators supports LINT-VI in practising and consolidating skills taught discreetly within specialist curriculum as well as delivering visual training as appropriate which is embedded within the day. Setting supports the provision of special examination arrangements and allows pupils time to develop the discreet skills associated with their use. Weekly teaching from QTVI to teach specialist curriculum that enables access and progress within setting curriculum. Advice on sourcing large print or tactile materials and production of accessible materials (transcription). 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Peer awareness training. Bespoke training offered around creating Vision Friendly Classroom with CPD offer extended to whole setting as appropriate. LINT-VI signpost and/or facilitate educators and parents/carers to external training opportunities. CPD training offered to SENDCOs to ensure collaboration and understanding of how LINT-VI and settings can support the young person to progress and develop efficient ways of working. Charities working in collaboration with the family and LINT-VI i.e., RSBC.

Threshold 4 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Area 2-11: The young person requires active intervention based on block/s of intervention from the CFVI provided by LINT-VI following assessment and provision of strategies.</p>	<p>Planning</p> <ul style="list-style-type: none"> • Setting manages SEND support and engages in joint planning with LINT-VI, family, the young person and other agencies. Common targets are distributed to all educators and reviewed regularly. • Setting takes on CAF Lead Practitioner role where appropriate. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTVI prior to meetings in line with LA SEND timescales. • Communication between LINT-VI and settings is frequent (minimal of half-termly) to ensure that there are knowledgeable and empowered educators around the young person. • Outcomes from EHCP (if appropriate) reflect the CFVI 'above and additional to' interventions for the young person to learn to access. • Setting provides time within the week for direct specialist teaching from LINT-VI. • Educators identify times within the day to deliver training programmes as appropriate. • Policies reflect reasonable adjustments. 	<ul style="list-style-type: none"> • Suitable peers and adults scaffolding the young person's environment e.g., facilitate interaction with others. • Suitable peers and adults facilitate interaction in less structured environments e.g., in a café. • Direct teaching of emotional literacy; how emotions appear (applying multi-sensory approach) across a range of people/ occasions. • Sharing experiences and having discussions on how other people are feeling. 	<ul style="list-style-type: none"> • Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> - complete tasks made slower by the vision impairment - reinforce work and prepare the young person for an activity/ learning experience (pre- and post- teaching) - provide additional hands-on experience of materials or presentations - provide additional experiences of the environment to support gaps in learning including real-life experience • Advice to access leisure and sports clubs outside setting. • Settings support involvement of other agencies e.g., Guide Dogs. • Assess and deliver discreet teaching relevant to the young person which will be generalised and used within the day. • CFVI is running alongside setting curriculum with up to at least 3 areas to be embedded within setting and home environment. • Exam access arrangements may allow up to 50% additional time. • QTVI works with setting to facilitate interaction and communication with other young people with a VI within or external of setting. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> • Peer awareness training. • Bespoke training offered around creating Vision Friendly Classroom with CPD offer extended to whole setting as appropriate. • LINT-VI signpost and/or facilitate educators and parents/carers to external training opportunities. • CPD training offered to SENDCOs to ensure collaboration and understanding of how LINT-VI and settings can support the young person to progress and develop efficient ways of working. • Charities working in collaboration with the family and LINT-VI i.e., RSBC.

Threshold 4 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Area 2-11: The young person requires active intervention based on block/s of intervention from the CFVI provided by LINT-VI following assessment and provision of strategies.</p>	<ul style="list-style-type: none"> • Educators facilitate working between themselves, the family, LINT-VI and SaLT to identify appropriate use of communication methods e.g. AAC. • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • Co-ordination between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their family. • Co-ordination between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing vision impairment and preparing for interviews. 			

Threshold 5 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e., print and tactile).</p> <p>Eligibility Criteria for VI equivalent is A (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 5 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.</p> <p>Area 2-11: The young person requires active and ongoing intervention based on the CFVI from LINT-VI following assessment and provision of strategies.</p>	<p>Assessment</p> <p>Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires specialist teaching at least 4 areas from the CFVI. The young person is known to LINT's Habilitation Specialist and has been assessed using LINT's Habilitation Eligibility Criteria. LINT-VI provides an Annual Assessment Report, Specialist Strategies and links shared within Report to visual conditions. A Low Vision Aid assessment has identified there is a requirement for specialist intervention based on use of auxiliary aids via related CFVI Areas. A high level of intervention may be needed for the young person to successfully transition into adult services. Advice, guidance and direct support is required in line with the young person's specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching VI Friendly strategies. Timely LINT monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Setting supports the provision of different types of learning experience i.e., individual, small group, pre- and post-lesson tutoring etc. to ensure curriculum access and discreet skills teaching can take place. Teaching methods based on experiential and tactile learning with a strong verbal emphasis, and which facilitate access to the curriculum and participation. Marking and recording of work reflects unique access needs of the young person e.g., use of Penfriend stickers. Communication between the young person and others in a variety of forms which can be high tech is used e.g., on-body signing. Use of support techniques to experiment with autonomy and curiosity to develop problem-solving skills, e.g., a hand-under-hand technique, co-active exploration or sequencing. 	<ul style="list-style-type: none"> IF VI is primary need, Specialist Sensory Teaching Assistant (SSTA) provides intervention across the week to facilitate access, inclusion and independent learning opportunities. SSTA provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. SSTA provides critical role in enabling access to learning and works in conjunction with educators for adaptation and sourcing of learning materials (transcription). SSTA/QTVI/SSLM identified as key individual to support the young person's emotional and mental wellbeing. Timetable adjustments to accommodate specialist interventions and rest breaks. QTVI supports educators in developing pupil's personal understanding of their vision impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-VI to ensure that specialist skills are practised and consolidated within the day. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to setting offered around creating a Vision Friendly setting with CPD offer extended to whole setting as appropriate. Setting have regular liaison with QTVI to support the young person and themselves in understanding the impact of vision loss, promote independent use of specialist equipment through training, Advice is given to providers of 'out of setting' clubs.

Threshold 5 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • An environmental assessment may be necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> • Setting manages SEND support and engages in joint planning with LINT-VI, family, the young person and other agencies. QTVI ensures that specialist planning based on CFVI is shared with all key educators including parents/carers and other agencies as appropriate. • Setting takes on CAF Lead Practitioner role where appropriate. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTVI prior to meetings in line with LA SEND timescales. • Communication between LINT-VI and setting is frequent (at least twice a week) to ensure that there are knowledgeable and empowered educators around the young person. • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • All outcomes from EHCP (if appropriate) reflect the CFVI 'above and additional to' interventions for the young person to learn to access. • Setting provides time within the week for direct specialist teaching from LINT-VI. • Opportunities in place for regular reviews of planning in line with LA. • Assessment and monitoring will be collaborative between setting and LINT-VI. • Setting engages in joint planning/target setting. 			

Threshold 5 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Good communication needed on lesson planning and assessment between educators and QTVI to ensure access to learning in a way that does not disadvantage the young person. • Educators work with LINT-VI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-VI to identify when the young person accesses their specialist interventions with adaptations to the curriculum required. • Policies reflect reasonable adjustments and are written in collaboration with QTVI. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the pupil to be disseminated to all staff by the SENDCO. • Educators facilitate working between themselves, the family, LINT-VI and SaLT to identify appropriate use of communication methods e.g. AAC. • Co-ordination between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their family. • Co-ordination between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing vision impairment and preparing for interviews. 			

Threshold 6 - Sensory Impairment: Vision

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for vision impairment with assessed need identifying a young person with auditory/tactile approaches as their primary access to information around them.</p> <p>Eligibility Criteria for VI equivalent is A* (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 6 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-VI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-VI liaison meetings which occur either weekly or fortnightly.</p>	<p>Assessment</p> <p>Functional Vision Assessment (the frequency of which Functional Vision Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires long-term intervention based on at least 6 Areas of CFVI in addition to Area 1 (Area/s to be determined by QTVI) which are expected to take at least a year to embed across setting and home. LINT-VI provides an Annual Assessment Report, Specialist Strategies links shared within Report to visual conditions. Direct intervention and ongoing assessment based on Habilitation Areas of the CFVI (Areas 5 and 6) provided by LINT's Habilitation Specialist. Very high level of intervention may be needed for the young person to successfully transition between different settings. Advice, guidance and direct support is required in line with the young person's specialist intervention to ensure that all learning, assessment and activities are accessible in addition to appropriate Quality First Teaching VI Friendly strategies. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Presentation of learning materials in alternative formats, including Braille/Moon/tactile diagrams, audio/speech. Tactile methods of communication relevant for the young person is presented within and beyond the class environment e.g. Braille labels and signage. A high level of scaffolding is required throughout the day in order enable the pupil to engage and socialise with their peers. A high level of scaffolding is required throughout the day in order enable the young person to engage and socialise with th 	<ul style="list-style-type: none"> LINT SSTA provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. SSTA provides critical role in enabling access to learning and is primarily responsible for the adaptation and sourcing of learning materials (transcription). SSTA/QTVI/SSLM identified as key individual identified to support the young person's emotional and mental wellbeing. LINT-VI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the young person is seamless between the setting's curriculum and the CFVI. QTVI supports educators in developing pupil's personal understanding of their vision impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-VI to ensure that specialist skills are practised and consolidated within the day. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to setting around creating a Vision Friendly setting with CPD offer extended to whole setting as appropriate.

Threshold 6 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Area 2-11: The young person requires active, ongoing and a significant level of intervention based on the CFVI from LINT-VI following assessment and provision of strategies.</p>	<ul style="list-style-type: none"> Timely LINT monitoring with tailored training packages (offered across Health, Education and Social Care as appropriate) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during the autumn term when a pupil has transitioned. An environmental assessment is often necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> Setting and QTVI work very closely to identify, assess and meet EHCP outcomes. QTVI ensures that specialist planning based on CFVI is shared with all key educators including parents/carers and other agencies as appropriate. The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTVI prior to meetings in line with LA SEND timescales. Communication between LINT-VI and settings is frequent (daily as appropriate) to ensure that there are knowledgeable and empowered educators around the young person. All outcomes from EHCP reflect the CFVI 'above and additional to' interventions for the young person to learn to access. Setting works closely with QTVI to create a bespoke education offer to meet unique needs based on setting curriculum and CFVI. 		<ul style="list-style-type: none"> Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> complete tasks made slower by the vision impairment the young person for a class activity/learning experience (pre- and post- teaching) provide additional hands-on experience of materials or presentations provide additional experiences of the environment to support gaps in learning including real-life experience Advice to access leisure and sports clubs outside setting. Setting works closely with LINT-VI to facilitate the involvement of other specialist agencies e.g., Guide Dogs. Regular consultation with QTVI about delivery of curriculum to ensure the young person can fully access all curriculum areas. Bespoke differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. 	

Threshold 6 - Sensory Impairment: Vision *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Assessment and monitoring will be bespoke between setting and LINT-VI across the curriculum. • Educators and LINT-VI precisely plan to provide seamless lessons offering access to an appropriate curriculum embedded with the CFVI. • Policies reflect reasonable adjustments and are written in collaboration with QTVI. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Risk assessments supplemented by LINT. • Educators facilitate working between themselves, the family, LINT-VI and SaLT to identify appropriate use of communication methods e.g. AAC. • Co-ordination between setting, LINT-VI and adult services (including Vision & Hearing Support if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their family. • Precise planning between educators, the young person, their family, LINT-VI and adult services (including Vision & Hearing Support if appropriate) required to enable successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing vision impairment and preparing for interviews. 		<ul style="list-style-type: none"> • CFVI is seamless within the young person's curriculum offer, embedded within setting and home environment. • Habilitation training and regular assessment in the areas of Independent Living Skills and Orientation and Mobility to ensure age-related levels of independence are maintained in Independent Living Skills and Orientation and Mobility. • Close liaison with QTVI to receive advice and support on access arrangements will be required for internal and external examinations. LINT-VI must administer these. • LINT-VI responsible for all specialist skills training, full levels of support, modelling and coaching. • Exam access arrangements may allow up to 100% additional time. • QTVI works with setting to facilitate interaction and communication with other young people with a VI within or external of setting. 	

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Young person is able to successfully access work-based environments in relation to apprenticeships, supported internships and traineeships in order to progress with future career choices.</p> <p>Young person is able to successfully access further education provision in order to progress with future career choices.</p> <p>Young person is able to maintain their low vision aids, making applications to manufacturers to purchase their own aids if required.</p> <p>Young person is able to confidently ask for help when there are barriers to accessing educational resources.</p> <p>Young person is able to search for and apply for jobs, including knowing how to disclose their vision impairment, prepare for interviews and access work experience placements.</p> <p>Young person is able to understand the basic principles of wages, National Insurance, pension contributions, tax and employment rights as well as the principle of 'reasonable adjustments'.</p> <p>Young person is able to begin to understand the purpose and criteria for funding such as Access to Work.</p> <p>Young person is able to request support to obtain and manage specialist equipment and/or support for job applications and funding.</p> <p>Young person is able to begin to identify their personal skills, strengths, and interests regarding employment.</p>	<p>Young person is able to apply life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances and know how to seek support from both familiar and unfamiliar people if they require assistance with their VI needs.</p> <p>Young person is able to engage with self-care routines to maintain low vision aids as appropriate.</p> <p>Young person is able to demonstrate awareness of risk within the home context and will manage this appropriately in order to remain safe. Young person is able to plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.</p> <p>Young person is able to use their mobility aid/cane/wheelchair with proficiency, to support safe travel in familiar and unfamiliar environments.</p> <p>Young person is able to use a wide range of pre-cane and sighted guide techniques to travel safely through familiar and unfamiliar environments.</p> <p>Young person is able to explain and demonstrate how to provide sighted-guide assistance.</p> <p>Young person is able to adapt their mobility and orientation skills to navigate a variety of familiar and unfamiliar environments.</p>	<p>Young person is able to access and knows how to get involved in community, leisure and social activities by finding out what is available to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access social venues including restaurants, cafes, bars, clubs, theatres, and cinemas as independently as possible.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>Young person is able to demonstrate confident skills and knowledge involved in accessing key community services such as banks, libraries, and doctors' surgery.</p> <p>Young person is able to begin to take personal responsibility for themselves including recognising their rights and responsibilities, entitlement and benefits.</p> <p>Young person is able to begin to directly engage between health professionals, social services personnel and local specialist adult sensory impairment services.</p> <p>Young person is able to confidently express their own needs and make clear requests of members of the public and professionals (bus driver, shop assistant etc.).</p>	<p>Young person is able to transfer to adult services and attend regular Ophthalmology/Optomestrist appointments, taking responsibility for making these themselves.</p> <p>Young person is able to participate in health-related appointments as independently as possible.</p> <p>Young person is able to access specialist support, such as mentoring or counselling as appropriate from appropriate 3rd sector.</p> <p>Young person is able to demonstrate an acceptance of vision impairment, establishing their own identity in relation vision impairment and disability.</p> <p>Young person is able to confidently self-advocate in a wide range of situations.</p>

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Young person is able to successfully access work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices.</p> <p>Young person is able to successfully access further/higher education provision in order to progress with future career choices.</p> <p>Young person is able to confidently liaise with specialist VI 3rd sector providers in order to highlight their access needs.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options.</p> <p>Young person is able to access job centre provision to support pathways into employment post education.</p> <p>Young person is able to take personal responsibility for themselves including recognising their rights and responsibilities, entitlement and benefits.</p>	<p>Young person is able to access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing.</p> <p>Young person is able to confidently use their mobility aid/cane/wheelchair with proficiency, to support safe travel in familiar and unfamiliar environments.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to analyse risk (travel, road safety, personal safety) in the context of community participation in order to remain safe i.e., utilise taxis.</p> <p>Young person is able to maintain wider relationships: house sharing, romantic relationships, preparing for parenthood, housing.</p> <p>Young person is able to directly engage between health professionals, social services personnel and local specialist adult sensory impairment services.</p>	<p>Young person is able to transfer to adult services and attend regular Ophthalmology/ Optometrist appointments, taking responsibility for making their own appointments.</p> <p>Young person is able to identify, organise and access specialist support, such as mentoring or counselling as appropriate from appropriate 3rd sector.</p>

Provision: Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Post 16 Thresholds Guidance: Vision Impairment.

Sensory and/or Physical and Medical Needs - Hearing Impairment

Threshold Descriptors Overview

<p>Threshold 1</p> <p>(Eligibility Criteria E)</p> <p>The young person meets criteria for hearing impairment with assessed needs being met through Quality First Teaching strategies and any previous strategies/aids are in place.</p>	<ul style="list-style-type: none"> • The young person does not require any active involvement or further assessments from LINT-HI. The young person remains on caseload and LINT-HI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns. • The young person’s LINT-HI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related specialist curriculum Areas. • The young person either does not require or requires minimal LINT-HI liaison with multi-agencies. • The young person’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching Deaf Friendly strategies. • The young person’s social environment is accessible with appropriate Quality First Teaching Deaf Friendly strategies. • The young person has a knowledgeable and empowered family around them due to information shared by LINT-HI. • The young person has knowledgeable and empowered educators around them due to information shared by LINT-HI. • All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-HI which has been cascaded to relevant staff after their initial or last LINT-HI specialist assessment and passed to relevant staff year by year i.e. from one class teacher to the next.
<p>Threshold 2</p> <p>(Eligibility Criteria D)</p> <p>The young person meets criteria for hearing impairment with assessed need being met through Quality First Teaching strategies. They may require a low level of modification to the presentation of materials. Environmental considerations may also need to be considered.</p>	<ul style="list-style-type: none"> • The young person does not require any active intervention based on the specialist curriculum from LINT-HI following assessment and provision of strategies. The young person remains on caseload and LINT-HI provides an annual assessment including a monitoring visit with updated strategies (as appropriate). • The young person’s LINT-HI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related specialist curriculum Areas. • The young person requires minimal LINT-HI liaison with multi-agencies as they need the LINT-HI annual assessment shared as appropriate. • The young person’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching Deaf Friendly strategies. • The young person’s social environment is accessible with appropriate Quality First Teaching Deaf Friendly strategies. • The young person has a knowledgeable and empowered family around them due to information shared by LINT-HI. • The young person has knowledgeable and empowered educators around them due to information shared by LINT-HI. • All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-HI which have been cascaded to relevant staff on a yearly basis in line with transitions.

Threshold 3

(Eligibility Criteria C)

The young person meets criteria for hearing impairment with assessed needs that are met through Quality First Teaching strategies with some modifications needed to presentation of materials and use of resources as directed by LINT-HI.

- The young person remains on caseload and LINT-HI provides a short-term block from one Area of the specialist curriculum (up to 6 visits).
- The young person may need a low level of intervention to successfully transition between different settings.
- The LINT-HI Auxiliary Aid assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related specialist curriculum Areas i.e., hearing aids, cochlear implant, BAHA etc.
- The young person requires minimal or short-term LINT-HI liaison with multi-agencies.
- The young person requires LINT-HI to provide time-limited advice and guidance in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person requires LINT-HI to provide time-limited advice and guidance in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person's family require additional time-limited advice and guidance to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require additional time-limited advice and guidance to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require timely LINT-HI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during the autumn term when the young person has transitioned.

Threshold 4

(Eligibility Criteria B)

The young person meets criteria for hearing impairment with assessed need identifying significant adaptations are required. The young person will require formal ongoing intervention from LINT to be as independent as possible.

- The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and provided on at least a termly basis.
- The young person requires block/s of intervention based on at least 2 Areas of the HI specialist curriculum in addition to Facilitating an Inclusive World (Area/s to be determined by QToD) which are expected to take up to a year to embed across setting and home.
- The young person's LINT-HI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e., hearing aids, cochlear implant, BAHA and may have an assistive listening device.
- The young person may need a medium level of intervention to successfully transition between different settings.
- The young person requires a low/medium level of LINT-HI liaison with multi-agencies.
- The young person requires LINT-HI to provide advice, guidance and direct support over the year as required in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person requires LINT-HI to provide advice, guidance and direct support in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person's family requires frequent communication (minimal of half-termly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (minimal of half-termly) to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require at least termly LINT-HI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 5

(Eligibility Criteria A)

The young person meets criteria for hearing impairment with assessed need identifying a young person who requires access to a specialist curriculum with multi-sensory resources to teach curriculum subjects.

- The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.
- The young person requires specialist teaching in at least 4 areas from the HI specialist curriculum. At least one of these will include Communication.
- The young person's LINT-HI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e., hearing aids, cochlear implant, BAHA via related specialist curriculum Areas.
- The young person may need a high level of intervention to successfully transition between different settings.
- The young person requires a medium/high level of LINT-HI liaison with multi-agencies.
- The young person requires LINT-HI to provide advice, guidance and direct support (minimum of 10 hours per week) in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person's family requires frequent communication (minimal of fortnightly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (at least twice a week) to ensure that the young person has knowledgeable and empowered educators around them.
- All key persons involved with the young person require at least half-termly LINT-HI monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 6

(Eligibility Criteria A*)

The young person meets criteria for hearing impairment with assessed need identifying a young person as having a significant difficulty accessing the spoken word and requiring British Sign Language (BSL), Sign Supported English (SSE) or Augmentative and Alternative Communication (AAC) as their primary access to information around them.

- The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-HI liaison meetings which occur either weekly or fortnightly.
- The young person requires long-term intervention based on at least 6 Areas of the specialist curriculum in addition to Facilitating an Inclusive World (Areas to be determined by QToD) which are expected to take at least a year to embed across setting and home following assessment and provision of strategies.
- The young person has been assessed by and/or is known to a Speech & Language Therapist for Deaf Children and Young People.
- The young person will need a high level of intervention to successfully transition between different settings.
- The young person requires a high level of LINT-HI liaison with multi-agencies.
- The young person requires LINT-HI to provide advice, guidance and full-time support in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies.
- The young person's family requires frequent communication (minimal of weekly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (daily as applicable) to ensure that the young person has knowledgeable and empowered educators around them.
- All key persons involved with the young person require tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies with LINT-HI liaison meetings occurring either weekly or fortnightly.

Threshold 1 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed needs being met through Quality First Teaching strategies and any previous strategies/aids are embedded in day-to-day practice.</p> <p>Eligibility Criteria for HI equivalent is E (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 1 require the following from the specialist HI curriculum:</p> <p>Facilitating an Inclusive World: The young person does not require any active involvement or further assessments from LINT-HI. The young person remains on caseload and LINT-HI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.</p>	<p>Assessment</p> <p>Initial/last LINT-HI assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> • Auxiliary Aids such as listening equipment if previously put into place are used and daily listening checks are completed for any audiological equipment. • The young person understands their hearing impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> • The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by hearing impairment and provide support to enable teachers to plan appropriately. • Settings take on CAF Lead practitioner role. 	<ul style="list-style-type: none"> • All staff and supply staff, visiting speakers, sport, drama groups etc. to be informed of needs at the planning stage of activities. • Procedures in place for audiological aids as well as implementing the wearing and cleaning of them. • Consideration of seating position – young person positioned in optimal location in relation to interactive white board/learning facilitator/ point of learning and not facing a window to facilitate access to lip patterns if required. • Cue and reinforce the young person's listening and attention. • Implement sensory rest breaks within the setting day. • Attention to speed of lesson delivery and speed of working. • Differentiated questioning and explicit language used to explain whole class responses. • Provide a consistent routine. 	<ul style="list-style-type: none"> • Appropriate resources made available from within setting. • Some in-class support provided by setting – especially in lessons where health and safety require consideration. • Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post- teaching for consolidation and generalisation of skills. • Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. • Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. 	<ul style="list-style-type: none"> • Provision of auxiliary aids including technology by LINT i.e., audiological equipment following LINT-HI Auxiliary Aid assessment. • Key person/s to take responsibility for acting upon personalised educational advice supplied by specialist Qualified Teacher of the Deaf (QToD) around individual young person's needs (adaptations and curriculum delivery to facilitate access). • A designated member of setting staff to monitor and manage the use of auxiliary aids i.e., hearing aids. • Provision of consumables by setting, e.g., cleaning kits, whiteboards etc. • Provision of additional quiet workspace for 1:1, small group work. • Appropriate levels of support on trips. • Setting will ensure the young person has all the curriculum materials and equipment required to hand and that the materials are organised and contained consistently and securely.

Threshold 1 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO (with parental permission). • The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. • Educators, parent/ carer and/or other key professionals can request updated advice if needed if hearing functioning changes. 	<ul style="list-style-type: none"> • Speaker stays still when talking. • Support for inclusion with extra-curricular activities, homework and newsletters. • Encourage social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully including the young person in the wider setting. • Say the young person's name first to gain their attention. • Use facial expressions and/or body language to emphasise key language. • Provide opportunities to take responsibility for helpful tasks. • Provide of a 'can do' environment where the young person can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the young person and develop their self-advocacy skills. • Ensure balance between intervention and independence is understood by all professionals. 		<ul style="list-style-type: none"> • Provision of additional workspace/ storage for specialist equipment. • Identification of a key member of staff for the young person to support emotional and mental wellbeing. • Access to SEND-Support-and-Guidance-Document-2021.pdf (gateshead-localoffer.org). • Access to 3701-JH-Accessibility-STRATEGY-2021-24.pdf

Threshold 2 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed need being met through Quality First Teaching strategies. They may require a low level of modification to the presentation of materials. Environmental considerations may also need to be considered.</p> <p>Eligibility Criteria for HI equivalent is D (subject to additional funding per young person for those attending college provision).</p> <p>The young person within Threshold 2 requires the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person does not require any active intervention LINT-HI following assessment and provision of strategies. The young person remains on caseload and LINT-HI provides an annual assessment with updated strategies (as appropriate).</p>	<p>Assessment</p> <p>Annual LINT-HI assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> LINT-HI provides an annual assessment including up to 3 visits with updated strategies (as appropriate i.e., troubleshooting for specialist equipment may generate additional visits). LINT-HI provides an Annual Assessment Report or letter, Specialist Strategies, and links shared within Report to auditory conditions. Auxiliary aids are suitably removing barriers to access. The young person understands their hearing impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> The setting identifies a key member of staff to work in partnership with LINT-HI to monitor and manage the use of auxiliary aids throughout the year. Setting will facilitate monitoring and assessment visit from LINT-HI. The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by a hearing impairment and provide support to enable teachers to plan appropriately. Settings take on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-HI Assessment Report. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within setting. Some in-class support provided by setting – especially in lessons where health and safety require consideration. Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post- teaching for consolidation and generalisation of skills. Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. Exam access arrangements may allow 	<p>As Threshold 1</p>

Threshold 3 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed need that is met through Quality First Teaching strategies with some modifications needed to presentation of materials and use of resources as directed by LINT-HI.</p> <p>Eligibility Criteria for HI equivalent is C (subject to additional funding per young person for those attending college provision).</p> <p>The young person within Threshold 3 requires the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-HI provides an annual assessment with updated strategies as appropriate.</p> <p>Specialist Teaching Areas: The young person requires active intervention based on a short-term block from the specialist provided by LINT-HI following assessment and provision of strategies. Intervention will be reviewed on a termly basis.</p>	<p>Assessment</p> <p>Annual LINT-HI assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires a short-term block from one Area of the specialist HI curriculum (up to 6 visits) provided by LINT-HI. LINT-HI provides an Annual Assessment Report, Specialist Strategies, and links shared within Report to auditory conditions. The LINT-HI Auxiliary Aid Assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related specialist curriculum area/s. <p>Planning</p> <ul style="list-style-type: none"> Educators have minimum of termly liaison with QToD to support the young person and themselves in understanding the impact of the hearing impairment and promote independent use of auxiliary aids. Setting identifies a key member of staff to work in partnership with LINT-HI to monitor and manage the use of auxiliary aids (i.e., radio aids) throughout the year if required by the young person. Settings take on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). Educators identify times within the day to deliver training programmes as appropriate. Communication between setting, LINT-HI and adult services is required to provide successful Careers Advice and Guidance for young people and their families. Communication between setting, LINT-HI and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing hearing impairment and preparing for interviews. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Clear routines supported by visual cues, e.g., pictures/symbols. Some additional group and individual work to meet identified needs and to facilitate learning and inclusion as appropriate. Ensure the learning environment is responsive. New vocabulary in introduced in context and is meaningful i.e., from the young person's perspective. Use natural rhythm, intonation, stress and lip movements. Groups and layout of tables will need to be adjusted to ensure access to all auxiliary aids whilst ensuring the young person can still sit next to/near their peers. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions. QToD supports educators in developing CYP's personal understanding of their hearing impairment and developing their confidence and independence. Educators support LINT-HI in practising and consolidating skills taught discreetly within specialist curriculum as well as delivering visual and/or communication training as appropriate which is embedded within the day. Exam access arrangements may allow 25% additional time. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Training offered re the needs of the young person to raise awareness of HI impairment and strategies to reduce barriers to learning and ensures all relevant staff attend.

Threshold 4 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed need identifying significant adaptations are required. The young person will require formal ongoing intervention from LINT-HI to be as independent as possible.</p> <p>Eligibility Criteria for HI equivalent is B (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 4 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and provided on at least a termly basis.</p>	<p>Assessment</p> <p>LINT-HI Assessment (the frequency of which is determined by the CYP's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires block/s of intervention based on at least 2 Areas of the HI specialist curriculum in addition to Facilitating an Inclusive World (Area/s to be determined by QToD) which are expected to take up to a year to embed across setting and home. LINT-HI provides an Annual Assessment Report, Specialist Strategies, and links shared within Report to auditory conditions. The LINT-HI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention based on the use of aids via related specialist curriculum Areas i.e., hearing aids, cochlear implant, BAHA and may have an assistive listening device. Advice, guidance and direct support over the year is required in line with the young person's specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Visual, tactile, olfactory and gustatory approaches to learning and teaching may supplement the auditory stimuli used. Young people relying on signing will need additional differentiation to take into account pace of learning. Setting provides materials in advance of lesson so that materials can be supplemented. Language needs to become clearer, concise and meaningful. Auditory clutter and less busy learning environments are now key to facilitate learning. Link learning opportunities to support the generalisation of concepts. Suitable peers and adults to scaffold the young person's environment e.g., facilitate interaction with others. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions and sensory breaks. QToD supports educators in developing the young person's personal understanding of their hearing impairment and developing their confidence and independence into adulthood. Educators support LINT-HI in practising and consolidating skills taught discreetly within specialist curriculum as appropriate which is embedded within the day. Setting supports the provision of special examination arrangements and allows the young person time to develop the discreet skills associated with their use. Teaching from QToD to teach specialist curriculum that enables access and progress within mainstream curriculum. Advice on sourcing accessible materials. Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> complete tasks made slower by the hearing impairment reinforce work and prepare the young person for a class activity/learning experience (pre- and post-teaching) provide additional hands-on experience of materials or presentations provide additional experiences of the environment to support gaps in learning including real-life experience 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Peer awareness training. Bespoke training offered around creating a Deaf Friendly Classroom with CPD offer extended to whole setting as appropriate. LINT-HI signpost and/or facilitate educators and parents/carers to external training opportunities. CPD training offered to SENCOs to ensure collaboration and understanding of how LINT-HI and settings can support young people to progress and develop efficient ways of working. Charities working in collaboration with the family and LINT-HI i.e. NDCS.

Threshold 4 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Specialist Teaching Areas: The young person requires active intervention based on block/s of intervention from the specialist curriculum provided by LINT-HI following assessment and provision of strategies.</p>	<ul style="list-style-type: none"> Timely LINT monitoring is required to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. An environmental assessment may be necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> Setting manages SEND support and engages in joint planning with LINT-HI, family, the young person and other agencies. Common targets are distributed to all educators and reviewed regularly. Settings take on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO. The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QToD prior to meetings in line with LA SEND timescales. 			

Threshold 4 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Communication between LINT-HI and settings is frequent (minimal of half-termly) ensure that there are knowledgeable and empowered educators around the young person. • Outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. • Setting provides time within the week for direct specialist teaching from LINT-HI. • Educators identify times within the day to deliver training programmes as appropriate. • Policies reflect reasonable adjustments. • Educators facilitate working between themselves, the family, LINT-HI and SaLT to identify appropriate use of communication methods e.g., BSL, SSE, AAC. • Co-ordination between setting, LINT-HI and adult services is required to provide successful Careers Advice and Guidance for the young person and their families. • Co-ordination between setting, LINT-HI and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing hearing impairment and preparing for interviews. 			

Threshold 5 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed need identifying a young person who requires access to a specialist curriculum with multi-sensory resources to teach curriculum subjects.</p> <p>Eligibility Criteria for HI equivalent is A (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 5 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.</p>	<p>Assessment</p> <p>Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires specialist teaching in at least 4 areas from the HI specialist curriculum. At least one of these will include Communication. LINT-HI provides an Annual Assessment Report, Specialist Strategies, and links shared within Report to auditory conditions. The young person is known to and has been assessed by and/or known to a Speech & Language Therapist for Deaf Children and Young People. The LINT-HI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention based on use of aids i.e., hearing aids, cochlear implant, BAHA, assistive listening device via related specialist curriculum Areas. A high level of intervention may be needed for the young person to successfully transition into adult services. Advice, guidance and direct support is required in line with the young person's specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies. Timely LINT monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. An environmental assessment may be necessary to assess accessibility of setting environment. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Setting supports the provision of different types of learning experience i.e., individual, small group, pre- and post- lesson tutoring etc. to ensure curriculum access and discreet skills teaching can take place. Teaching methods based on experiential learning with a strong visual emphasis, and which facilitate access to the curriculum and class participation. Recording of work reflects unique access needs. Consistent, well-cued routines. Materials are presented slowly and clearly to the young person, in familiar, quiet environments. 	<ul style="list-style-type: none"> IF HI is primary need, LINT Specialist Sensory Teaching Assistant (SSTA) provides intervention across the week to facilitate access, inclusion and independent learning opportunities. SSTA provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. SSTA provides critical role in enabling access to learning and works in conjunction with educators for adaptations. SSTA/QToD/SSLM identified as key individual to support the young person's emotional and mental wellbeing. Timetable adjustments to accommodate specialist interventions and sensory breaks QToD supports educators in developing the young person's personal understanding of their hearing impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-HI to ensure that specialist skills are practised and consolidated within the day. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level to setting offered around creating a Deaf Friendly setting with CPD offer extended to whole setting as appropriate. Setting have regular liaison with QToD to support the young person and themselves in understanding the impact of hearing loss, promote independent use of specialist equipment through training, Advice is given to providers of 'out of setting' clubs.

Threshold 5 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Specialist Teaching Areas: The young person requires active and ongoing intervention based on the specialist curriculum from LINT-HI following assessment and provision of strategies.</p>	<p>Planning</p> <ul style="list-style-type: none"> Setting manages SEND support and engages in joint planning with LINT-HI, family, the young person and other agencies. QToD ensures that specialist planning based on the HI specialist curriculum is shared with all key educators including parents/carers and other agencies as appropriate. The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QToD prior to meetings in line with LA SEND timescales. Communication between LINT-HI and settings is frequent (at least twice a week) to ensure that there are knowledgeable and empowered educators around the young person. Settings take on CAF Lead practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO. All outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. Setting provides time within the week for direct specialist teaching from LINT-HI. Opportunities in place for regular reviews of planning in line with LA. Assessment and monitoring will be collaborative between setting and LINT-HI. Setting engages in joint planning/target setting. 	<ul style="list-style-type: none"> Embrace communication between the young person and others in a variety of forms e.g., BSL. Use support techniques to experiment with autonomy and curiosity to develop problem-solving skills, e.g., co-active exploration. The young person may require a Total Communication Approach. 	<ul style="list-style-type: none"> Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> complete tasks made slower by the hearing impairment reinforce work and prepare young people for a class activity/learning experience (pre- and post- teaching) provide additional hands-on experience of materials or presentations provide additional experiences of the environment to support gaps in learning including real-life experience Advice to access leisure and sports clubs outside setting. Settings work closely with LINT-HI to facilitate the involvement of other specialist agencies e.g., NDCS. Regular consultation with QToD about delivery of curriculum to ensure the young person can fully access all curriculum areas. Personalised differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. Specialist curriculum is merging within the young person's curriculum offer within setting with up to at least 5 areas to be embedded within setting and home environment. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level to setting offered around creating a Deaf Friendly setting with CPD offer extended to whole setting as appropriate. Setting have regular liaison with QToD to support the young person and themselves in understanding the impact of hearing loss, promote independent use of specialist equipment through training, Advice is given to providers of 'out of setting' clubs.

Threshold 5 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Good communication needed on lesson planning and assessment between educators and QToD to ensure access to learning in a way that does not disadvantage the young person. • Educators work with LINT-HI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-HI to identify when the young person accesses their specialist interventions with adaptations to the setting's curriculum required. • Policies reflect reasonable adjustments and are written in collaboration with QToD. • Educators facilitate working between themselves, the family, LINT-HI and SaLT to identify appropriate use of communication methods e.g., BSL/SSE/AAC. • Co-ordination between setting, LINT-HI and adult services is required to provide successful Careers Advice and Guidance for the young person and their families. • Co-ordination between setting, LINT-HI and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing hearing impairment and preparing for interviews. 		<ul style="list-style-type: none"> • QToD may liaise with and/or refer to a Speech & Language Therapist for Deaf Children and Young People to ensure age-related levels of language are maintained. • Close liaison with QToD to receive advice and support on access arrangements will be required for internal and external examinations/ assessments. LINT-HI may help with the administration of these. • LINT-HI responsible for all specialist skills training, higher levels of support, modelling and coaching. • Exam access arrangements may allow at least 50% additional time. • QToD works with setting to facilitate interaction and communication with other young people with a HI within or external of setting. 	

Threshold 6 - Sensory Impairment: Hearing

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets criteria for hearing impairment with assessed need identifying a young person as having a significant difficulty accessing the spoken word and requiring British Sign Language (BSL), Sign Supported English (SSE) or Augmentative and Alternative Communication (AAC) are their primary access to information around them.</p> <p>Eligibility Criteria for HI equivalent is A* (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 6 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-HI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-HI liaison meetings which occur either weekly or fortnightly.</p>	<p>Assessment</p> <p>LINT-HI Assessment (the frequency of which is determined by the CYP's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The CYP requires long-term intervention based on at least 6 Areas of the specialist curriculum in addition to Facilitating an Inclusive World (Areas to be determined by QToD) which are expected to take at least a year to embed across setting and home. LINT-HI provides an Annual Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-HI Poster 'Helping Pupils with a Hearing Impairment in Your Class' and links shared within Report to conditions. Direct intervention and ongoing assessment based on Communication. The CYP has been assessed by and/or is known to a Speech & Language Therapist for Deaf Children and Young People. Very high level of intervention may be needed for the CYP to successfully transition between different settings. Advice, guidance and direct support (minimum of 25 hours per week) is required in line with the CYP's specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching Deaf Friendly strategies. Timely LINT-HI monitoring with tailored training packages (offered across Health, Education and Social Care as appropriate) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during transition. An environmental assessment is often necessary to assess accessibility of the setting environment. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Access to learning is only possible with the use of sign e.g., BSL/SSE. A high level of scaffolding is required throughout the day in order enable the young person to engage and socialise with their peers and adults. 	<ul style="list-style-type: none"> SSTA provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. SSTA provides critical role in enabling access to learning via effective communication. SSTA/QToD/SSLM identified as key individual to support the young person's emotional and mental wellbeing. LINT-HI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the young person is seamless between the setting's curriculum and the specialist curriculum. QToD supports educators in developing the young person's personal understanding of their hearing impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-HI to ensure that specialist skills are practised and consolidated within the day. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to the setting around creating a Deaf Friendly setting with CPD offer extended to whole setting as appropriate.

Threshold 6 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Specialist Teaching Areas: The young person requires active, ongoing and a significant level of intervention based on the specialist curriculum from LINT-HI following assessment and provision of strategies.</p>	<p>Planning</p> <ul style="list-style-type: none"> • Setting and QToD work very closely to identify, assess and meet EHCP outcomes. QToD ensures that specialist planning is shared with all key educators including parents/carers and other agencies as appropriate. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QToD prior to meetings in line with LA SEND timescales. • Communication between LINT-HI and settings is frequent (daily as appropriate) to ensure that there are knowledgeable and empowered educators around the young person. • Settings take on CAF Lead Practitioner role • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • All outcomes from EHCP reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. • Setting works closely with QToD to create a bespoke education offer to meet unique needs based on setting curriculum and LINT specialist curriculum. • Assessment and monitoring will be bespoke between setting and LINT-HI across the curriculum. • Educators and LINT-HI precisely plan to provide seamless lessons offering access to an appropriate curriculum embedded with the specialist curriculum. 		<ul style="list-style-type: none"> • Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> - complete tasks made slower by the hearing impairment - reinforce work and prepare the young person for a class activity/learning experience (pre- and post- teaching) - provide additional hands-on experience of materials or presentations - provide additional experiences of the environment to support gaps in learning including real-life experience • Advice to access leisure and sports clubs outside setting. • Settings work closely with LINT-HI to facilitate the involvement of other specialist agencies e.g., NDCS. • Regular consultation with QToD about delivery of curriculum to ensure the young person can fully access all curriculum areas. Bespoke differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. 	

Threshold 6 - Sensory Impairment: Hearing *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Policies reflect reasonable adjustments and are written in collaboration with QToD. • Educators facilitate working between themselves, the family, LINT-HI and Specialist SaLT to identify appropriate use of communication methods e.g., BSL/SSE/AAC. • Co-ordination between setting, LINT-HI and adult services is required to provide successful Careers Advice and Guidance for the young person and their families. • Precise planning between educators, the young person, their family, LINT-HI and adult services is required to enable successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing the hearing impairment and preparing for interviews. 		<ul style="list-style-type: none"> • The specialist curriculum is seamless within the young person's curriculum offer, embedded within the setting and home. • QToD has liaised with and/or referred to a Speech & Language Therapist for Deaf Children and Young People to ensure age-related levels of language are maintained. • Close liaison with QToD to receive advice and support on access arrangements will be required for internal and external examinations/assessments. LINT-HI must administer these. • LINT-HI responsible for all specialist skills training, full levels of support, modelling and coaching. • Exam access arrangements may allow up to 100% additional time. • QToD works with setting to facilitate interaction and communication with other young people with a HI within or external of setting. 	

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Young person is able to access and function within work-based environments in relation to apprenticeships, supported internships and traineeships in order to progress with future career choices.</p> <p>Young person is able to access and function within further education provision in order to progress with future career choices.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options. They may require support with specific language choices to be explicitly explained and taught to them.</p> <p>N.B. For some young people with a profound/severe hearing loss, they will require signed support.</p>	<p>Young person is able to demonstrate the life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances and know how to seek support from both familiar and unfamiliar people if they require assistance with their hearing needs.</p> <p>Young person is able to engage with self-care routines to maintain hearing equipment and assistive listening devices as appropriate.</p> <p>Young person will have an awareness of risk within the home context and will manage this appropriately in order to remain safe. PIP and assistive listening devices such as pager/flashing fire alarms may need to be sourced to support independent living.</p> <p>Young person is able to plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person will be able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person will show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>N.B. for some learners with a profound/severe hearing loss, they will require signed support.</p>	<p>Young person is able to transfer to adult services and attend regular audiology/ ENT/SaLT to with independence and take responsibility for making their own appointments.</p> <p>Young person is able to keep equipment in good condition and applications will be made to manufacturers to purchase their own assistive listening devices if required.</p>

PfA Outcomes and Provision

Employability/Education	Independence	Community Participation	Health
<p>Young person is able to access and function within work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices.</p> <p>Young person is able to access and function within further/ higher education provision in order to progress with future career choices.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options. Young person may require support with specific language choices to be explicitly explained and taught to them.</p> <p>Young person is able to access job centre provision to support pathways into employment post education.</p> <p>N.B. for some young people with a profound/severe hearing loss, they will require signed support.</p>	<p>Young person is able to access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing. PIP and assistive listening devices such as pager/flashing fire alarms may need to be sourced to support independent living.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>N.B. for some young people with a profound/severe hearing loss, they will require signed support.</p>	<p>Young person is able to transfer to adult services and attend regular audiology/ENT/SaLT to with independence and take responsibility for making their own appointments.</p> <p>Young person is able to keep equipment in good condition and applications will be made to manufacturers to purchase their own assistive listening devices if required.</p>

Provision: Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Post 16 Thresholds Guidance: Hearing Impairment.

Sensory and/or Physical and Medical Needs

Multi-Sensory Impairment

Threshold Descriptors Overview

Threshold 1

(Eligibility Criteria E)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).

- The young person does not require any active involvement or further assessments from LINT-MSI. The young person remains on caseload and LINT-MSI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.
- The young person's LINT-MSI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related specialist curriculum Areas.
- The young person either does not require or requires minimal LINT-MSI liaison with multi-agencies.
- The young person's learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching MSI Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching MSI Friendly strategies.
- The young person has a knowledgeable and empowered family around them due to information shared by LINT-MSI.
- The young person has knowledgeable and empowered educators around them due to information shared by LINT-MSI.
- All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-MSI which have been cascaded to relevant staff after their initial or last LINT-MSI specialist assessment and passed to relevant staff year by year i.e. from one class teacher to the next.

Threshold 2

(Eligibility Criteria D)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e. print or symbols).

- The young person does not require any active intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies. The young person remains on caseload and LINT-MSI provides an annual assessment including a monitoring visit with updated strategies (as appropriate).
- The young person's LINT MSI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the young person does not require access to related specialist curriculum Areas.
- The young person requires minimal LINT-MSI liaison with multi-agencies after receiving the LINT-MSI Annual Assessment and strategies.
- The young person's learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching MSI Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching MSI Friendly strategies.
- The young person has a knowledgeable and empowered family around them due to information shared by LINT-MSI.
- The young person has knowledgeable and empowered educators around them due to information shared by LINT-MSI.
- All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person based on information shared to date by LINT-MSI which have been cascaded to relevant staff on a yearly basis in line with transitions.

Threshold 3

(Eligibility Criteria C)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e., modified and enlarged print or symbols).

- The young person remains on caseload and LINT-MSI provides a short-term block from one Area of the MSI specialist curriculum (up to 6 visits).
- The young person may need a low level of intervention to successfully transition between different settings.
- The young person's LINT MSI Auxiliary Aid Assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related specialist curriculum Areas i.e. hearing aids, mini mic, CCTV, iPad, hand-held magnifier etc.
- The young person requires minimal or short-term LINT-MSI liaison with multi-agencies.
- The young person requires LINT-MSI to provide time-limited advice and guidance in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching MSI Friendly strategies.
- The young person requires LINT-MSI to provide time-limited advice and guidance in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching MSI Friendly strategies.
- The young person's family require additional time-limited advice and guidance to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require additional time-limited advice and guidance to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require timely LINT-MSI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during the autumn term when the young person has transitioned.

Threshold 4

(Eligibility Criteria B)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (e.g., print and tactile).

- The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and provided on at least a termly basis.
- The young person requires block/s of intervention based on at least 2 Areas of the MSI specialist curriculum in addition to Facilitating an Inclusive World (Area/s to be determined by QTMSI) which are expected to take up to a year to embed across setting and home.
- The young person's LINT MSI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e., hearing aids, mini mic, CCTV, iPad, hand-held magnifiers etc.
- The young person may need a medium level of intervention to successfully transition between different settings.
- The young person requires a low/medium level of LINT-MSI liaison with multi-agencies.
- The young person requires LINT-MSI to provide advice, guidance and direct support over the year as required in line with their specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching MSI strategies.
- The young person requires LINT-MSI to provide advice, guidance and direct support in line with their specialist intervention to ensure that their social environment is accessible in addition to appropriate Quality First Teaching MSI Friendly strategies.
- The young person's family requires frequent communication (minimal of half-termly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (minimal of half-termly) to ensure that the young person has knowledgeable and empowered educators around them.
- All key person/s involved with the young person require at least termly LINT-MSI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 5

(Eligibility Criteria A)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (e.g. print and tactile).

- The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.
- The young person requires specialist teaching in at least 4 areas from the MSI specialist curriculum.
- The young person's LINT MSI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention in the use of aids related to specialist curriculum Areas i.e., hearing aids, mini mic, CCTV, iPad, hand-held magnifiers.
- The young person may need a high level of intervention to successfully transition between different settings.
- The young person requires a medium/high level of LINT-MSI liaison with multi-agencies.
- The young person requires LINT-MSI to provide advice, guidance and direct support (minimum of 10 hours per week) in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching MSI strategies.
- The young person's family requires frequent communication (minimal of fortnightly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (at least twice a week) to ensure that the young person has knowledgeable and empowered educators around them.
- All key persons involved with the young person require at least half-termly LINT-MSI monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 6

(Eligibility Criteria A*)

The young person meets criteria for multi-sensory impairment with assessed need identifying a young person with auditory/tactile/signing approaches as their primary access to information around them.

- The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-MSI liaison meetings which occur either weekly or fortnightly.
- The young person requires long-term intervention based on at least 6 Areas of the MSI specialist curriculum in addition to Facilitating an Inclusive World (Areas to be determined by QTMSI) which are expected to take at least a year to embed across setting and home following assessment and provision of strategies.
- The young person receives training and assessment in the areas of Independent Living Skills and Orientation and Mobility from the LINT Paediatric Habilitation Specialist.
- The young person has been assessed by and/or is known to a Speech & Language Therapist for Deaf Children and Young People.
- The young person will need a high level of intervention to successfully transition between different settings.
- The young person requires a high level of LINT-MSI liaison with multi-agencies.
- The young person requires LINT-MSI to provide advice, guidance and full-time support in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching MSI strategies.
- The young person's family requires frequent communication (minimal of weekly) to ensure that the young person has a knowledgeable and empowered family around them.
- The young person's educators require frequent communication (daily as applicable) to ensure that the young person has knowledgeable and empowered educators around them.
- All key persons involved with the young person require tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.

Threshold 1 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for MSI equivalent is E (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 1 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person does not require any active involvement or further assessments from LINT-MSI. The young person remains on caseload and LINT-MSI can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.</p>	<p>Assessment</p> <p>Initial/last LINT-MSI assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> • Auxiliary aids such as hand-held magnifiers if previously put into place are used and daily listening checks are completed for any audiological equipment. • The young person understands their multi-sensory impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> • The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by combination of a vision and hearing impairment and provide support to enable teachers to plan appropriately. • Settings take on CAF Lead Practitioner role where appropriate. 	<ul style="list-style-type: none"> • All staff and supply staff, visiting speakers, sport, drama groups etc. to be informed needs at the planning stage of activities. • Procedures for contact lens wearers (for young people who are aphakic) and audiological aids as well as implementing the wearing and cleaning of them. • Adherence to Reasonable Adjustments i.e., exemption from learning a cursive script. • Tutor verbalises work on the board (ensuring they are facing the young person) and all written information within the teaching environment. • Consideration of seating position – young person positioned in optimal location in relation to interactive white board/ learning facilitator/ point of learning and not facing a window to facilitate attention and access to lip patterns if required. • Provision of a range of multi-sensory tasks, ensuring that teaching styles are matched to the young person's style of learning and support alternative ways of accessing and recording work. • Implementation sensory rest breaks within the setting day. • Attention to speed of lesson delivery and speed of working. 	<ul style="list-style-type: none"> • Appropriate resources made available from within setting. • Some in-class support provided by setting – especially in lessons where health and safety require consideration. • Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post- teaching for consolidation and generalisation of skills. • Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. • Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. • Exam access arrangements may allow 25% additional time. 	<ul style="list-style-type: none"> • Provision of auxiliary aids (low vision aids and technology) by LINT following LINT-MSI Auxiliary Aid Assessment. • Key person/s to take responsibility for acting upon personalised educational advice supplied by specialist Qualified Teacher of Multi-Sensory Impairment (QTMSI) around individual young person's needs (adaptations and curriculum delivery to facilitate access). • A designated member of setting staff to monitor and manage the use of auxiliary aids e.g., CCTV, iPad, magnifiers. • Provision of consumables by setting e.g., specialist paper, matt laminates, appropriate black fibre tipped pens/ dark leaded pencils, use of a sloping desk, cleaning kits etc. • Provision of additional quiet workspace for 1:1 and small group work • Appropriate levels of support on trips.

Threshold 1 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • A PEEP (Personal Emergency Evacuation Plan) to ensure the young person is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). • The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. • Educators, parent/carer and/ or other key professionals can request updated advice if needed or visual/hearing functioning changes. 	<ul style="list-style-type: none"> • Differentiated questioning and explicit language used to explain whole class responses. • Setting staff give careful consideration to the accessibility of learning materials in terms of readability, density of text, size and choice of font (use a simple font such as Comic Sans or Sassoon), layout, overlays, coloured paper, appropriate use of illustrations, clutter-free diagrams, all modified resources onto A4 paper only/or use of LVAs. • Tutors to ensure presentations delivered on interactive white boards have a high contrast between the text and background. Any text displayed is in a clear font such as Arial or Comic Sans . • Tutors ensure young people can access work displayed on interactive white boards in the method identified by the QTMSI e.g., handouts, e-mailing presentations to be accessed on iPad or laptop or by use of mirroring software. • Tutors to use dark coloured white board pens and avoid light colours or pens which are running out. • Provide a consistent routine. • Speaker stays still when talking. • Provide additional transition visits for the young person between rooms. 		<ul style="list-style-type: none"> • Setting will ensure the young person has all the curriculum materials and equipment required to hand and that the materials are organised and contained consistently and securely.

Threshold 1 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
		<ul style="list-style-type: none"> • Encouragement of social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully including the young person in the wider setting life i.e., in the café. • Say the young person's name first to gain their attention. • Describe events that are going on around them if required e.g., spontaneous laughter caused by an event at the other side of the room. • Verbal description alongside facial expressions or body language. • Provide opportunities to take responsibility for helpful tasks. • Ensuring any AAC are accessible e.g., symbols aren't laminated on shiny laminate. • Provide a 'can do' environment where the young person can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the young person and developing their self-advocacy skills. • Ensure there is a balance between intervention and independence is understood by all professionals. 		

Threshold 2 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for MSI equivalent is D (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 2 require the following from the MSI specialist curriculum:</p> <p>Facilitating and Inclusive World: The young person does not require any active intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies. The young person remains on caseload and LINT-MSI provides an annual assessment with updated strategies (as appropriate).</p>	<p>Assessment</p> <p>LINT-MSI Annual Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> LINT-MSI provides an annual assessment including up to 3 visits with updated strategies (as appropriate i.e., troubleshooting for specialist equipment may generate additional visits). LINT-MSI provides an Annual Assessment Report or letter, Specialist Strategies, and links shared within report to cause of MSI. Auxiliary aids e.g., hand-held magnifiers are suitably removing barriers to access. The young person understands their multi-sensory impairment including barriers and strategies to overcome these as appropriate to age and stage of development. <p>Planning</p> <ul style="list-style-type: none"> Setting identifies a key member of staff to work in partnership with LINT-MSI to monitor and manage the use of auxiliary aids throughout the year. Setting will facilitate monitoring and assessment visit from LINT-MSI. The setting must ensure that all staff are aware that the young person will be experiencing barriers caused by combination of a vision and hearing impairment and provide support to enable teachers to plan appropriately. Settings take on CAF Lead Practitioner role where appropriate. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Risk assessments supplemented by LINT. Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO (with parental permission). Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within setting. Some in-class support provided by setting – especially in lessons where health and safety require consideration. Setting staff provide some individual teaching/ teaching assistant support (or a mix of the two as appropriate) for pre- and post-teaching for consolidation and generalisation of skills. Setting considers timetabling and location of rooms for the young person and/or appropriate workstation for 1:1 intervention. Setting is responsible for baselines and subsequent monitoring of progress and provision is regularly reviewed. Exam access arrangements may allow 25% additional time. 	<p>As Threshold 1</p>

Threshold 3 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person with one approach required to access information around them (i.e., modified and enlarged print or symbols).</p> <p>Eligibility Criteria for MSI equivalent is C.</p> <p>Young people within Threshold 3 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-MSI provides an annual assessment with updated strategies as appropriate.</p> <p>Areas 2-11: The young person requires active intervention based on a short-term block from the specialist provided by LINT-MSI following assessment and provision of strategies. Intervention will be reviewed on a termly basis.</p>	<p>Assessment</p> <p>LINT-MSI Annual Assessment (the frequency of which is determined by the young person's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The young person requires a short-term block from one Area of the specialist MSI curriculum (up to 6 visits) provided by LINT-MSI. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, and links shared within report to cause of MSI. The LINT-MSI Auxiliary Aid Assessment has identified that there may be a requirement for a short 'course' or 'refresher' based on use of auxiliary aids via related specialist curriculum Areas. <p>Planning</p> <ul style="list-style-type: none"> Educators have regular liaison with QTMSI to support the young person and themselves in understanding the impact of the multi-sensory impairment and promote independent use of auxiliary aids. Setting identifies a key member of staff to work in partnership with LINT-MSI to monitor and manage the use of auxiliary aids (low vision aids) throughout the year. Settings take on CAF Lead Practitioner role as appropriate. A PEEP (Personal Emergency Evacuation Plan) to ensure the young person is safe. Risk assessments supplemented by LINT. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Clear classroom routines supported by cues, e.g., objects of reference, auditory timetables, tactile symbols. Some additional group and individual work to meet identified needs and to facilitate learning and inclusion, as appropriate to access to curriculum. Ensure the learning environment is responsive. New vocabulary is introduced in context and is meaningful i.e., from the pupil's perspective. Use natural rhythm, intonation, stress and lip movements. Groups and layout of tables will need to be adjusted to ensure access to all auxiliary aids whilst ensuring the pupil can still sit next to/near their peers. Opportunities are sought within PSHE to discuss MSI and role models within society. Behaviour management systems motivate the pupil and set clear expectations. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions. QTMSI supports educators in developing the young person's personal understanding of their multi-sensory impairment and developing their confidence and independence into adulthood. Educators supports LINT-MSI in practising and consolidating skills taught discreetly within specialist curriculum as well as delivering visual and/or communication training as appropriate which is embedded within the day. Exam access arrangements may allow 25% additional time. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Training offered re the needs of the young person to raise awareness of multi-sensory impairment and strategies to reduce barriers to learning and ensures all relevant staff attend.

Threshold 3 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission if appropriate). • Educators identify times within the day to deliver training programmes as appropriate. • Communication between setting, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their families (if appropriate). • Communication between setting, LINT-MSI and Vision & hearing Support is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing multi-sensory impairment and preparing for interviews. 			

Threshold 4 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e., large and modified print and tactile).</p> <p>Eligibility Criteria for MSI equivalent is B (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 4 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate.</p> <p>Area 2-11: The young person requires active intervention based on block/s of intervention from the specialist curriculum provided by LINT-MSI following assessment and provision of strategies.</p>	<p>Assessment</p> <p>LINT-MSI Assessment (the frequency of which is determined by the young person's Eligibility Criteria) including a Learning Media Assessment if required has identified that:</p> <ul style="list-style-type: none"> The young person requires specialist teaching in up to 2 areas from the LINT specialist curriculum. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, and links shared within report to cause of MSI. LINT-MSI Auxiliary Aid assessment has identified there is a requirement for specialist intervention based on use of auxiliary aids via related specialist curriculum Areas. Advice, guidance and direct support over the year is required in line with the young person's specialist intervention to ensure that all learning and assessment activities are accessible in addition to appropriate Quality First Teaching MSI Friendly strategies. Timely LINT monitoring is required to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. An environmental assessment may be necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> Setting manages SEND support and engages in joint planning with LINT-MSI, family (if appropriate), the young person and other agencies. Common targets are distributed to all educators and reviewed regularly. Settings take on CAF Lead Practitioner role where appropriate. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. Risk assessments supplemented by LINT. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Tactile, olfactory, gustatory, haptic (touch), proprioceptive and vestibular approaches to learning and teaching may supplement the visual and auditory stimuli used. Young people working with tactile learning resources that will need additional differentiation to take into account pace of learning. Setting provides materials in advance of lesson so that materials can be presented in an appropriate format e.g., modified print. Language needs to become clearer, concise and meaningful. Auditory clutter and less busy learning environments are now key to facilitate learning. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions and rest breaks QTMSI supports educators in developing the young person's personal understanding of their multi-sensory impairment and developing their confidence and independence into adulthood. Educators support LINT-MSI in practising and consolidating skills taught discreetly within specialist curriculum as well as delivering visual/communication training as appropriate which is embedded within the day. Setting supports the provision of special examination arrangements and allows the young person time to develop the discreet skills associated with their use. Weekly teaching from QTMSI to teach specialist curriculum that enables access and progress within curriculum. Advice on sourcing accessible materials. Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> complete tasks made slower by the multi-sensory impairment 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Peer awareness training. Bespoke training offered around creating a Multi-Sensory Impaired Friendly Classroom with CPD offer extended to whole setting as appropriate. LINT-MSI signpost and/or facilitate educators and parents/carers to external training opportunities. CPD training offered to SENCOs to ensure collaboration and understanding of how LINT-MSI and settings can support to progress and develop efficient ways of working. Charities working in collaboration with the family and LINT-MSI i.e., SENSE.

Threshold 4 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO. • Communication between LINT-MSI and the setting is frequent (minimal of half-termly) to ensure that there are knowledgeable and empowered educators around the young person. • Outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • Setting provides time within the week for direct specialist teaching from LINT-MSI. • Educators identify times within the day to deliver training programmes as appropriate. • Policies reflect reasonable adjustments. • Educators facilitate working between themselves, the family, LINT-MSI and SaLT to identify appropriate use of communication methods e.g., AAC. • The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment report. • Co-ordination between setting, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their families. • Co-ordination between setting, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing multi-sensory impairment and preparing for interviews. 		<ul style="list-style-type: none"> - reinforce work and prepare the young person for a class activity/learning experience (pre- and post- teaching) - provide additional hands-on experience of materials or presentations - provide additional experiences of the environment to support gaps in learning including real-life experience • Advice to access leisure and sports clubs outside setting. • Settings support involvement of other agencies e.g., SENSE. • Environmental assessment is completed and recommendations made to ensure access and the safety of the young person is safety made. • Assess and deliver discreet teaching relevant to the young person which will be generalised and used within the day. • Specialist curriculum is running alongside setting curriculum with up to at least 3 areas to be embedded within setting and home environment. • Exam access arrangements may allow up to 50% additional time. • QTMSI works with setting to facilitate interaction and communication with other young people with MSI within or external of setting. 	

Threshold 5 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person requiring at least two different approaches to access information around them (i.e., print and tactile).</p> <p>Eligibility Criteria for MSI equivalent is A (subject to additional funding per young person for those attending college provision).</p> <p>The young person within Threshold 5 requires the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and are provided at least half-termly.</p>	<p>Assessment</p> <p>LINT-MSI Assessment (the frequency of which is determined by the young person's Eligibility Criteria) including a Learning Media Assessment if required has identified that:</p> <ul style="list-style-type: none"> The young person requires specialist teaching at least 4 areas from the specialist curriculum. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, and links shared within report to cause of MSI. The young person is known to LINT's Paediatric Habilitation Specialist and Specialist SaLT and has been assessed using their criteria. LINT-MSI Auxiliary Aid Assessment has identified there is a requirement for specialist intervention based on use of auxiliary aids via related specialist curriculum Areas. High level of intervention may be needed for the young person to successfully transition between different rooms. Advice, guidance and direct support (minimum of 10 hours per week) is required in line with the young person's specialist intervention to ensure that all learning, assessment and social activities are in addition to appropriate Quality First Teaching MSI Friendly strategies. Timely LINT monitoring with tailored training packages (offered across Health, Education and Social Care) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies e.g., during transition. An environmental assessment may be necessary to assess accessibility of setting environment. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Setting supports the provision of different types of learning experience i.e., individual, small group, pre- and post-lesson tutoring etc. to ensure curriculum access and discreet skills teaching can take place. Teaching methods based on experiential and tactile learning with a strong verbal emphasis required, and which facilitate access to the curriculum and class participation. Marking and recording of work reflects unique access needs. Utilise textures to support recognition. Consistent, well-cued routines. 	<ul style="list-style-type: none"> IF MSI is primary need, LINT Intervenor provides intervention within the day to facilitate access, inclusion and independent learning opportunities. Intervenor provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. Intervenor provides critical role in enabling access to learning and works in conjunction with educators for adaptation and sourcing of learning materials. Intervenor/QTMSI/SSLM identified as key individual to support the young person's emotional and mental wellbeing. Timetable adjustments to accommodate specialist interventions and rest breaks. QTMSI supports educators in developing the young person's personal understanding of their multi-sensory impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-MSI to ensure that specialist skills are practised and consolidated within the day. Time away from main cohort of young people for individual or small group work may be necessary to: <ul style="list-style-type: none"> complete tasks made slower by the multi-sensory impairment reinforce work and prepare the young person for a class activity/learning experience (pre- and post- teaching) 	<ul style="list-style-type: none"> Bespoke training at a significant level to the setting offered around creating a Multi-Sensory Impaired Friendly setting with CPD offer extended to whole setting as appropriate. Setting have regular liaison with QTMSI to support the young person and themselves in understanding the impact of vision loss, promote independent use of specialist equipment and through training, Advice is given to providers of 'out of setting' clubs.

Threshold 5 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Area 2-11: The young person requires active and ongoing intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies.</p>	<p>Planning</p> <ul style="list-style-type: none"> • Setting manages SEND support and engages in joint planning with LINT-MSI, family (if appropriate), the young person and other agencies. QTMSI ensures that specialist planning based on specialist curriculum is shared with all key educators including parents/carers and other agencies as appropriate. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • Communication between LINT-MSI and settings is frequent (at least twice a week) to ensure that there are knowledgeable and empowered educators around the young person. • Settings take on CAF Lead Practitioner role where appropriate. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCO. • All outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • Setting provides time within the week for direct specialist teaching from LINT-MSI. • Opportunities in place for regular reviews of planning in line with LA. • Assessment and monitoring will be collaborative between setting and LINT-MSI. • Setting engages in joint planning/target setting. 	<ul style="list-style-type: none"> • People and items are presented slowly and clearly to the young person, in familiar, quiet environments. • Communication between the young person and others in a variety of forms which can be high tech e.g., on-body signing. • Using support techniques to experiment with autonomy and curiosity to develop problem-solving skills, e.g., a hand-under-hand technique, co-active exploration or Intensive Interaction. • The young person may require an intensive interaction approach. • The young person may require a Total Communication Approach. • Use of personal identifiers. 	<ul style="list-style-type: none"> - provide additional hands-on experience of materials or presentations - provide additional experiences of the environment to support gaps in learning including real-life experience • Advice to access leisure and sports clubs outside setting. • Settings work closely with LINT-MSI to facilitate the involvement of other specialist agencies e.g., SENSE. • Regular consultation with QTMSI about delivery of curriculum to ensure the young person can fully access all curriculum areas. Personalised differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. • Specialist curriculum is merging within the young person's curriculum offer within setting with up to at least 5 areas to be embedded within setting and home environment. • Assessment and Habilitation training in the Area of Independent Living Skills and/or Orientation and Mobility to ensure age-related levels of independence are maintained in Independent Living Skills and/or Orientation and Mobility. • Close liaison with QTMSI to receive advice and support on access arrangements will be required for internal and external examinations. LINT-MSI may help with the administration of these. 	

Threshold 5 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Good communication needed on lesson planning and assessment between educators and QTMSI to ensure access to learning in a way that does not disadvantage the young person. • Educators must work with LINT-MSI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-MSI to identify when the young person accesses their specialist interventions with adaptations to the setting's curriculum required. • Policies reflect reasonable adjustments and are written in collaboration with QTMSI. • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • Risk assessments supplemented by LINT. • Educators facilitate working between themselves, the family, LINT-MSI and SaLT to identify appropriate use of communication methods e.g., AAC. • Co-ordination between setting, Vision & Hearing Support and LINT-MSI is required to provide successful Careers Advice and Guidance for the young person and their families. • Co-ordination between setting, LINT-MSI and Vision & Hearing Support is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing multi-sensory impairment and preparing for interviews. 		<ul style="list-style-type: none"> • LINT-MSI responsible for all specialist skills training, higher levels of support, modelling and coaching. • Exam access arrangements may allow at least 50% additional time. • QTMSI works with setting to facilitate interaction and communication with other young people with a MSI within or external of setting. 	

Threshold 6 - Sensory Impairment: Multi-Sensory

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person meets the criteria for multi-sensory impairment with assessed need identifying a young person with auditory/tactile approaches as their primary access to information around them.</p> <p>Eligibility Criteria for MSI equivalent is A* (subject to additional funding per young person for those attending college provision).</p> <p>Young people within Threshold 6 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The young person remains on caseload and LINT-MSI provides assessment determined by need (e.g. ongoing assessment and intervention with assessment report when requested by Health) with updated strategies as appropriate. Monitoring arrangements are in place and carried out via LINT-MSI liaison meetings which occur either weekly or fortnightly.</p>	<p>Assessments</p> <p>LINT-MSI Assessment (the frequency of which is determined by the young person's Eligibility Criteria) including a Learning Media Assessment if required has identified that:</p> <ul style="list-style-type: none"> The young person requires long-term intervention based on at least 6 Areas of the specialist curriculum in addition to Area 1 (Area/s to be determined by QTMSI) which are expected to take at least a year to embed across setting and home. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, and links shared within report to cause of MSI. The direct intervention and ongoing assessment based on Habilitation Areas of the specialist curriculum (Areas 5 and 6) provided by LINT's Habilitation Specialist. Very high level of intervention may be needed for the young person to successfully transition between different settings. Advice, guidance and direct support is required in line with the young person's specialist intervention to ensure that all learning, social and assessment activities are in addition to appropriate Quality First Teaching MSI Friendly strategies. Timely LINT monitoring with tailored training packages (offered across Health, Education and Social Care as appropriate) to ensure that all key person/s can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during transition. An environmental assessment is often necessary to assess accessibility of setting environment. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Access to learning is only possible with the presentation of learning materials in alternative formats including Braille/ Moon, tactile diagrams and/or the use of sign e.g., BSL. Tactile methods of communication relevant for the young person is presented within and beyond the classroom environment e.g., Braille labels and signage. A high level of scaffolding is required throughout the day in order enable the young person to engage and socialise with their peers and adults. 	<ul style="list-style-type: none"> The young person has full-time support provided by a LINT Intervenor. Intervenor provides critical role in embedding the specialist curriculum within the day whilst facilitating independence. Intervenor provides critical role in enabling access to learning and is primarily responsible for the adaptation and sourcing of learning materials (transcription). Intervenor/QTMSI/SSLM identified as key individual to support the young person's emotional and mental wellbeing. LINT-MSI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the young person is seamless between the setting's curriculum and the specialist curriculum. QTMSI supports educators in developing the young person's personal understanding of their multi-sensory impairment and developing their confidence and independence into adulthood. Educators directly plan with LINT-MSI to ensure that specialist skills are practised and consolidated within the day. Time away from main cohort of young people for individual or small group work may be necessary to: 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to setting around creating a Multi-Sensory Impaired Friendly setting with CPD offer extended to whole setting as appropriate.

Threshold 6 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Area 2-11: The young person requires active, ongoing and a significant level of intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies.</p>	<p>Planning</p> <ul style="list-style-type: none"> • Setting and QTMSI work very closely to identify, assess and meet EHCP outcomes. QTMSI ensures that specialist planning based on the specialist curriculum is shared with all key educators including parents/carers and other agencies as appropriate. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • Communication between LINT-MSI and settings is frequent (daily as appropriate) to ensure that there are knowledgeable and empowered educators around the young person. • All outcomes from EHCP reflect the specialist curriculum 'above and additional to' interventions for the young person to learn to access. • Setting works closely with QTMSI to create a bespoke education offer to meet unique needs based on setting curriculum and LINT specialist curriculum. • Assessment and monitoring will be bespoke between setting and LINT-MSI across the curriculum. • Educators and LINT-MSI precisely plan to provide seamless lessons offering access to an appropriate curriculum embedded with the specialist curriculum. • Policies reflect reasonable adjustments and are written in collaboration with QTMSI. • The setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. 		<ul style="list-style-type: none"> - complete tasks made slower by the multi-sensory impairment - reinforce work and prepare the young person for a class activity/learning experience (pre- and post- teaching) - provide additional hands-on experience of materials or presentations - provide additional experiences of the environment to support gaps in learning including real-life experience • Advice to access leisure and sports clubs outside setting. • Settings work closely with LINT-MSI to facilitate the involvement of other specialist agencies e.g., SENSE. • Regular consultation with QTMSI about delivery of curriculum to ensure the young person can fully access all curriculum areas. Bespoke differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. • The specialist curriculum is seamless within the young person's curriculum offer within setting with up to at least 7 areas to be embedded within setting and home environment. • Habilitation training and regular assessment in the areas of Independent Living Skills and Orientation and Mobility to ensure age-related levels of independence are maintained in Independent Living Skills and Orientation and Mobility. 	

Threshold 6 - Sensory Impairment: Multi-Sensory *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • Risk assessments supplemented by LINT. • Educators facilitate working between themselves, the family, LINT-MSI and Specialist SaLT to identify appropriate use of communication methods e.g., AAC. • Co-ordination between setting, LINT-MSI and Vision & hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the young person and their families. 		<ul style="list-style-type: none"> • Specialist SaLT training and regular assessment in Communication to ensure age-related levels of language and communication. • Close liaison with QTMSI to receive advice and support on access arrangements will be required for internal and external examinations. LINT-MSI must administer these. • LINT-MSI responsible for all specialist skills training, full levels of support, modelling and coaching. • Exam access arrangements may allow up to 100% additional time. • QTMSI works with setting to facilitate interaction and communication with other young people with a MSI within or external of setting. 	

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Young person is able to access and function within work-based environments in relation to apprenticeships, supported internships and traineeships in order to progress with future career choices.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options. They may require support with specific language choices to be explicitly explained and taught to them.</p>	<p>Young person is able to demonstrate life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances and know how to seek support from both familiar and unfamiliar people if they require assistance with their hearing needs.</p> <p>Young person is able to engage with self-care routines to maintain hearing equipment and assistive listening devices as appropriate.</p> <p>Young person is able to have an awareness of risk within the home context and will manage this appropriately in order to remain safe. Specialist equipment may need to be sourced to support independent living.</p> <p>Young person is able to plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p>	<p>Young person is able to transfer to adult services and attend regular audiology/ ENT to support good access to sound with independence and take responsibility for making their own appointments.</p> <p>Young person is able to keep equipment in good condition and applications will be made to manufacturers to purchase their own assistive listening devices if required.</p> <p>Young person is able to organise and access specialist support, such as mentoring or counselling as appropriate from appropriate 3rd sector.</p>

Pfa Outcomes and Provision

Employability/Education	Independence	Community Participation	Health
<p>Young person is able to successfully access work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices.</p> <p>Young person is able to successfully access further/higher education provision in order to progress with future career choices.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options. They may require support with specific language choices to be explicitly explained and taught to them.</p> <p>Young person is able to access job centre provision to support pathways into employment post education.</p> <p>Young person is able to confidently liaise with specialist 3rd sector providers in order to highlight their access needs if appropriate.</p> <p>Young person is able to take personal responsibility for themselves including recognising their rights and responsibilities, entitlement and benefits.</p>	<p>Young person is able to access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing.</p> <p>Young person is able to make informed choices on specialist equipment they may need to support independent living.</p> <p>Young person is able to confidently use their mobility aid/cane/wheelchair with proficiency, to support safe travel in familiar and unfamiliar environments.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to analyse risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>Young person is able to maintain wider relationships: house sharing, romantic relationships, preparing for parenthood, housing.</p> <p>Young person is able to directly engage between health professionals, social services personnel and local specialist adult sensory impairment services.</p>	<p>Young person is able to transfer to adult services and attend regular audiology/ENT/SaLT/Ophthalmology/Optomtrist appointments, taking responsibility for making their own appointments.</p> <p>Young person is able to keep equipment in good condition and applications will be made to manufacturers to purchase their own assistive listening devices if required.</p> <p>Young person is able to identify, organise and access specialist support, such as mentoring or counselling as appropriate from appropriate 3rd sector.</p>
<p>Provision: Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Post 16 Thresholds Guidance: Multi-Sensory Impairment.</p>			

Physical and/or Medical Needs (PMN)

Threshold Descriptors Overview

Threshold 1

(Eligibility Criteria E)

The young person has a physical and/or medical need with minimal impact on daily functioning. The young person's needs can be met through Quality First Teaching.

- The young person does not require any active involvement or further assessments from LINT-PMN if involved. The young person remains on caseload and LINT-PMN can be contacted at any time by parents/carers, Health, Social and/or Education professionals with any queries or concerns.
- The young person either does not require or requires minimal LINT-PMN liaison with multi-agencies if involved.
- The young person's learning environment is accessible with appropriate Quality First Teaching PMN Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching PMN Friendly strategies.
- The young person has a knowledgeable and empowered family around them in relation to PMN.
- The young person has knowledgeable and empowered educators around them in relation to PMN.
- All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person with PMN.
- The young person requires no or minimal treatment/medication.
- The young person requires no or minimal therapy intervention.
- The young person can move around their environment without adult support.
- The young person can manage their physical and personal care needs i.e., dressing, personal hygiene.
- The young person is meeting age-related expectations and does not need additional input.
- The young person does not need specialist equipment/aids to produce written work.
- The young person have appropriately trained staff employed in setting (i.e., moving & Handling, medical procedures, catheter trained etc).

Threshold 2

(Eligibility Criteria D)

The young person has a physical and/or medical need with minimal impact on daily functioning. The young person's needs can be met through Quality First Teaching as well as targeted strategies and setting-led interventions.

- The young person does not require any active intervention based on the specialist curriculum from LINT-PMN if involved following assessment and provision of strategies. The young person remains on caseload and LINT-PMN provides an annual assessment including a monitoring visit with updated strategies (as appropriate).
- The young person requires minimal LINT-PMN liaison with multi-agencies if involved after receiving the LINT-PMN annual assessment as appropriate.
- The young person's learning environment is accessible with appropriate Quality First Teaching PMN Friendly strategies.
- The young person's social environment is accessible with appropriate Quality First Teaching PMN Friendly strategies.
- The young person has a knowledgeable and empowered family around them in relation to PMN.
- The young person has knowledgeable and empowered educators around them in relation to PMN.
- All key person/s involved with the young person can identify, recognise, and understand the specific and holistic needs and rights of the young person.
- The young person may have infrequent or historical involvement from health.
- The young person has prescribed medication which requires management by adults/staff.
- The young person requires little or no assistance to access the curriculum.
- The young person needs little or no supervision/monitoring during physical activities such as P.E.
- The young person has limited involvement with therapists.
- The young person has been assessed by a therapist/health professional and the school/setting have been advised of appropriate measures needed to ensure the young person's safety, and/or a programme put into the school/setting for staff to use.
- The young person wears orthotics such as PEDRO boots, shoe inserts and/or splints.
- The young person has the appropriate posture/seating/physical aids available and these are regularly monitored by the appropriate therapist.
- The young person requires minimal support with their communication i.e., mild speech difficulties, use of sign/symbols, can communicate sufficiently to be able to express/understand views.
- The young person needs specialist equipment/aids that do not require operational assistance/preparation.

Threshold 3

(Eligibility Criteria C)

The young person has a physical and/or medical need that may impair their ability to participate in many aspects of education and social life/leisure activities. The young person's needs are met through a combination of approaches including small group interventions and 1-1 individualised support following advice / support from health professionals as appropriate.

- The young person remains on caseload and LINT-PMN provides an annual assessment with updated strategies as appropriate as well as active intervention based on a short-term block (up to 4 visits) based on the young person needs.
- All key person/s involved with the young person require timely LINT-PMN monitoring (if involved) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies i.e., during the autumn term when the young person has transitioned.
- The young person may need a low level of intervention to successfully transition between different settings.
- The young person requires minimal or short-term LINT-PMN liaison with multi-agencies if involved.
- The young person's family require additional time-limited advice and guidance to ensure that the young person has a knowledgeable and empowered family around them in relation to their PMN.
- The young person's educators require additional time-limited advice and guidance to ensure that the young person has knowledgeable and empowered educators around them in relation to their PMN.
- The young person has continuing mild to moderate problems with hand/eye co-ordination, fine/gross motor skills and recording which impacts on access to the curriculum.
- The young person has ongoing difficulties with continence/ toileting and other aspects of self-help and independence.
- The young person requires assessment for equipment and resources.
- The young person may need specialist input to comply with health and safety legislation, e.g., to access learning in the classroom, for personal care needs, at break and lunch times etc.
- The young person has increased dependence on seating to promote appropriate posture for fine motor activities/feeding.
- The young person has increased dependence on mobility aids i.e., wheelchair or walking aid.
- The young person has increased use of alternative methods for extended recording e.g., scribe, ICT etc.
- The young person may have medical condition that impacts on time in school and requires a medical/care/ specialist support plan for seating and specialist equipment via the educational OT.
- The young person may require their school/setting to have moving and handling training.

Threshold 4

(Eligibility Criteria B)

The young person has a physical and/or medical need that requires a highly personalised timetable and the use of specialist equipment and training, planned in conjunction with appropriate multi-agency approach

- The young person remains on LINT-PMN caseload (if involved) and LINT-PMN provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies and monitoring as appropriate.
 - The young person requires active intervention from LINT-PMN receiving a minimum of 6 visits per year with programmes which are expected to take up to a year to embed across setting and home provided by LINT-PMN following assessment and provision of strategies (if involved).
 - The young person requires a low/medium level of LINT-PMN liaison with multi-agencies (if involved).
 - The young person requires LINT-PMN to provide advice, guidance and direct support over the year as required (if involved) in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching PMN strategies.
 - The young person's family requires frequent communication (minimal of termly) to ensure that the young person has a knowledgeable and empowered family around them in relation to PMN.
 - The young person's educators require frequent communication (minimal of half-termly) to ensure that the young person has knowledgeable and empowered educators around them in relation to PMN.
 - All key person/s involved with the young person require at least termly LINT-PMN monitoring (if involved) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.
 - The young person may need a medium level of intervention to successfully transition between different settings.
- The young person requires specialist equipment (medical/ educational) that requires operational assistance.
 - The young person is not reaching age related expectations in all areas of the curriculum.
 - The young person requires assistance during lunchtimes i.e., help to move tray/feeding etc.
 - The young person requires aid/s such as rolator, sticks, to move around their environment. Minor adaptations are required to ensure full access to all areas of the setting i.e., handrails, ramps etc.
 - The young person needs some assistance with their personal care needs i.e., dressing/undressing, toileting, hygiene. and access to an appropriate accessible hygiene area.
 - The young person needs a therapist/therapy assistant to attend the school/setting to carry out an appropriate programme.
 - The young person has some of the necessary appropriate posture/seating/physical aids available and needs an up-to-date assessment of need to be carried out by the appropriate therapist.
 - The young person's disability/condition affects their speech and has an impact on their verbal communication and ability to express views.
 - The young person is unable to or has difficulty in using verbal and/or signing to communicate and may use specialist communication/aids/ICT that require training and/or operational assistance/preparation.
 - The young person requires assessment and/or provision of programme from Therapists (OT/Physiotherapy).
 - The young person requires assistance to participate in physical activities i.e., PE and requires a modified physical curriculum.
 - The young person experiences unstable health which impacts on their everyday life/ability to access curriculum.

Threshold 5

(Eligibility Criteria A)

The young person has a physical and/or medical need that requires a significant level of support to access the curriculum with specialist equipment resources to break down barriers to learning.

- The young person remains on LINT-PMN caseload (if involved) and LINT-PMN provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies and monitoring as appropriate.
 - The young person requires active and ongoing intervention throughout the year based on the specialist LINT-PMN curriculum from LINT-PMN following assessment and provision of strategies (if involved).
 - The young person requires a medium/high level of LINT-PMN liaison with multi-agencies (if involved).
 - The young person requires LINT-PMN (if involved) to provide advice and guidance in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching PMN strategies.
 - The young person's family requires frequent communication (minimal of half-termly) to ensure that the young person has a knowledgeable and empowered family around them in relation to PMN.
 - The young person's educators require frequent communication (minimal of fortnightly) to ensure that the young person has knowledgeable and empowered educators around them in relation to PMN.
 - All key person/s involved with the young person require at least half-termly LINT-PMN monitoring (if involved) with tailored training packages (offered across Health, Education and Social Care) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.
 - The young person may need a high level of intervention to successfully transition between different settings.
- Requires intervention from specialist nursing teams, health professionals and/or Therapy services.
 - The young person may need a planned programme of therapy/intervention.
 - The young person uses specialist equipment on a daily basis that requires operational assistance or preparation in order to access all areas of the curriculum.
 - The young person's physical and/or medical needs means that they require the intervention of an appropriately trained adult to support within the setting during all or the majority of tasks.
 - The young person has limited access to the appropriate posture/seating/physical aids and may need an urgent assessment of need to be carried out by the appropriate therapist.
 - The young person requires support at lunchtime.
 - The young person's setting needs significant adaptations to ensure that the young person has full access to their learning environment.
 - The young person has regular/weekly/daily involvement with a therapist/health professional.
 - The young person may be an Augmentative Alternative Communication (AAC) user.
 - The young person may have a degenerative condition which impacts on independence.

Threshold 6

(Eligibility Criteria A*)

The young person has a physical and/or medical need/s (multiple and complex) and requires access to a significant level of support to access the curriculum.

- The young person remains on LINT-PMN caseload (if involved) and LINT-PMN provides assessment determined by need (e.g., ongoing assessment and intervention with assessment report when requested by Health) with updated strategies and monitoring as appropriate.
 - The young person requires long-term intervention based on the LINT-PMN specialist curriculum (if involved) which is expected to take at least a year to embed across setting and home following assessment and provision of strategies.
 - The young person requires a high level of LINT-PMN liaison with multi-agencies (if involved).
 - The young person requires LINT-PMN (if involved) to provide advice and guidance in line with their specialist intervention to ensure that all learning, assessment and social activities are accessible in addition to appropriate Quality First Teaching PMN strategies.
 - The young person's family requires frequent communication (minimal of fortnightly) to ensure that the young person has a knowledgeable and empowered family around them in relation to PMN.
 - The young person's educators require frequent communication (weekly) to ensure that the young person has knowledgeable and empowered educators around them in relation to PMN.
 - All key person/s involved with the young person require tailored training packages (offered across Health, Education and Social Care by LINT-PMN if involved) to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the young person in addition to LINT reports and strategies.
 - The young person will need a high level of intervention to successfully transition between different settings.
 - The young person's medical needs demonstrates moderate risk to self or others i.e., petit-mal seizures/spasms.
- The young person's behaviour demonstrates serious risk of harm to self/others i.e., tonic clonic seizures, choking, self-harming etc. (Consider onward referral to behaviour/health services).
 - The young person may require regular/daily/24-hour supervision/monitoring (continuing care due to intrusive procedures).
 - The young person requires regular/daily intervention from specialist nursing teams or health professionals.
 - The young person needs a skilled or familiar person to assist in communicating their expressive and receptive needs.
 - The young person's physical/medical needs directly affects their ability to communicate verbally and/or record work/ideas.
 - The young person uses specialist equipment/aids that require daily operational assistance or preparation.
 - The young person requires regular or daily intervention from therapists/health professionals.
 - The young person spends a significant part, or all of their day using a specialist aid such as a wheelchair, standing frame, walking sticks and/or rolator to move around their environment.
 - The young person is dependent on an adult to manage their everyday needs i.e., ensuring any aids provided are applied correctly and with personal care needs.
 - The young person needs a specialist/differentiated physical curriculum.
 - The young person requires a daily or intensive therapy programme.
 - The young person has a medical/medication regime that requires adult assistance e.g., changing catheter, tube medication/feeding, epilepsy management etc.
 - The young person has a life threatening/limiting or degenerative condition.

Threshold 1 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need with minimal impact on daily functioning. The young person's needs can be met through Quality First Teaching.</p> <p>Eligibility Criteria for PMN is E (if the young person has been assessed by LINT-PMN specialist teacher).</p> <p>The young person can move around the environment with no additional aids and adaptations.</p> <p>The young person requires no/minimal intervention from specialist nursing teams or health professionals (including therapists).</p> <p>The young person does not need equipment which requires operational assistance.</p> <p>The young person can manage their physical and personal care needs i.e., dressing, personal hygiene.</p>	<p>Assessment</p> <ul style="list-style-type: none"> The learning environment is accessible and inclusive for a young person with PMN including the use of any aids or adaptations. The young person understands their PMN including barriers and strategies to overcome these as appropriate to age and stage of development. <p>IF Involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The young person does not require any active interventions following specialist assessment. <p>Planning</p> <ul style="list-style-type: none"> The setting must ensure that all staff are aware that the young person is experiencing barriers related to their PMN and provide support to enable tutors to plan appropriately. Universal provision can meet need. Usual curriculum planning including group or individual targets is required. 	<ul style="list-style-type: none"> Inform all staff and supply staff, sport or drama groups etc. of PMN needs at the planning stage of activities. Consider seating position – young person positioned in optimal position to make entry and exit from rooms as clear as possible. Consider accessibility to the smartboard/ whiteboard i.e. that the young person can physically interact with the board. Provide a range of multi-sensory tasks, ensuring that teaching styles are matched to the young person's style of learning and support alternative ways of accessing and recording work. Cue and reinforce the young person's listening and attention. Implement fatigue rest breaks within the setting day if appropriate. Implement sensory breaks within the setting day if appropriate. Consider timetabling arrangements i.e., consider the young person accessing physical activities earlier in the day. Consider accessibility to learning materials in terms of height of resources, at eye level with the young person, use of sloped baskets or containers, reasonable height shelves, resources are within reach etc. 	<ul style="list-style-type: none"> Quality First Teaching. Some support provided by the setting i.e. with physical activities if required. Setting considers timetabling and location of rooms for the young person for ease of access. An educational occupational therapist may see the young person which may include assessment for equipment/ adaptations. The NHS occupational therapist can only be accessed by a Paediatric Consultant referral. 	<ul style="list-style-type: none"> Appropriate support and transport for trips. Identification of a key member of staff for the young person to support emotional and mental wellbeing. Supportive / correctly sized standard setting chair and table i.e., a chair and table surface that fit the young person with feet supported and table at the correct height etc. Pupils in this category may require specialist equipment via physio/OT services. i.e., specialist seating for science labs. Access to appropriate ICT provision i.e., accessibility options on Windows. Where appropriate a 2:1 staffing ratio required for positional changes the young person and/or transitioning between areas. Access to a disabled toilet. Access to the environment via ramps or lift where appropriate.

Threshold 1 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>NC Level Across expected range with an unusual profile showing relative strengths and weaknesses.</p>	<ul style="list-style-type: none"> • Trips out of the setting to be planned in advance. • Educators, parent/carer and/ or other key professionals can request updated advice if needed or if physical/medical needs change. • Risk assessments carried out by setting if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • An Emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last. LINT-PMN Assessment Report if appropriate. 	<ul style="list-style-type: none"> • Consider accessibility of AAC i.e., that the young person can easily access their switches. • Ensure all pathways are clear. • All resources needed for activities are within reach. • All medical information is recorded and emergency procedures are known to all staff. • Provide additional transition visits for the young person between rooms. • Encourage social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully including the young person in the wider setting life. • Provide opportunities to take responsibility for helpful tasks. • Provide of a 'can do' environment where the young person can succeed and achieve. • Provide opportunities to take controlled risks in a safe environment. • Ensure a balance between intervention and independence that is understood by all professionals. • Listen to the voice of the young person and develop 		<ul style="list-style-type: none"> • Access to SEND-Support-and-Guidance-Document-2021.pdf (gateshead-localoffer.org) • Access to 3701-JH-Accessibility-STRATEGY-2021-24.pdf (gateshead-localoffer.org)

Threshold 2 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need with minimal impact on daily functioning. The young person's needs can be met through Quality First Teaching as well as targeted strategies and setting-led interventions.</p> <p>Eligibility Criteria for PMN is D (if the young person has been assessed by LINT PMN specialist teacher).</p> <p>The young person can move around the environment independently with or without specialist equipment.</p> <p>The young person requires no or minimal intervention from specialist nursing teams or health professionals (including therapists).</p> <p>The young person may need specialist positional equipment, equipment for which the young person requires operational assistance and/or wears orthotics such as PEDRO boots, splints, shoe inserts etc.</p>	<p>Assessment</p> <ul style="list-style-type: none"> The learning environment is partially accessible and inclusive for a young person with PMN and which will require some reasonable adjustments in relation to adaptations and specialist equipment. The young person understands their PMN including barriers and strategies to overcome these as appropriate to age and stage of development. The young person may require referral by the setting to OT for advice re fine/gross motor assessment. <p>IF involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The young person does not require any active interventions following specialist assessment. A LINT- PMN Assessment Report or letter with links shared within report to physical and/or medical conditions. <p>Planning</p> <ul style="list-style-type: none"> Usual curriculum planning including group or individual targets. The setting must ensure that all staff are aware that the young person is experiencing barriers related to their PMN and provide support to enable tutors to plan appropriately. Risk assessments carried out by setting if necessary with referral to Health & Safety if required. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. An Emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. 	<p>As Threshold 1 plus:</p> <ul style="list-style-type: none"> Flexible use of resources and staffing available in the learning environment to assist with recording work, accessing text, pre-teaching vocabulary, modifying tutor talk, modelling responses, focusing listening and attention. The setting may require moving and handling training. First line strategies, based on advice and strategies given in training packages delivered by OT and via drop-in sessions / telephone consultations with health professionals. 	<ul style="list-style-type: none"> Quality First Teaching Some differentiation to physical activities if appropriate. Main provision by staff with some age-appropriate programmes delivered one-to-one or in small groups. Physiotherapy may intervene with young people who have mild physical issues to prevent further deterioration/reduce impact of condition / early intervention to achieve more successful outcomes. 	<p>As Threshold 1 plus:</p> <ul style="list-style-type: none"> Differentiated writing materials and equipment. Non-slip mat (Dycem), adapted pencils, pens, scissors, foot stool, writing slope, cutlery via educational OT assessment. Staff awareness training of relevant medical conditions on a 'need to know' basis. Refer to LINT-PMN information on the website on adapted equipment/aids if necessary.

Threshold 2 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person can manage their physical and personal care needs i.e. dressing, personal hygiene.</p> <p>The young person needs little or no supervision/monitoring during physical activities.</p>	<ul style="list-style-type: none"> • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission if required). • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report if appropriate. • Care plan in place, if appropriate, written in conjunction with specialist nurse and LINT-PMN (if involved). • The young person is involved in monitoring and setting targets. • SENDCO awareness if no progress apparent after targeted teaching approach. 			

Threshold 3 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need that may impair their ability to participate in many aspects education and social life/leisure activities. The young person's needs are met through a combination of approaches including small group interventions and 1-1 individualised support following advice/support from health professionals as appropriate.</p> <p>Eligibility Criteria for PMN is C (if the young person has been assessed by LINT PMN specialist teacher).</p> <p>The young person has ongoing mild to moderate problems with hand/eye co-ordination, fine/gross motor skills and recording which is impacting on access to curriculum.</p> <p>The young person is making slow or little progress despite provision of targeted teaching approaches.</p> <p>The young person has continuing difficulties with self-help and independence i.e. with continence/ toileting.</p>	<p>Assessment</p> <p>IF involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The young person may require a short block (equating to up to 4 visits) of intervention/termly visit in order to comply with health and safety legislation, e.g., to access learning in the classroom, for personal care needs. The young person remains on caseload and the LINT PMN QT provides an annual assessment with links shared within report to physical and/or medical conditions and updated strategies. The young person may have a condition that requires assessment for equipment and resources. <p>Planning</p> <ul style="list-style-type: none"> Educators identify times within the day to deliver training programmes as appropriate. Parents are involved regularly (if appropriate) to support targets at home. The young person is involved in monitoring and setting targets. The setting must ensure that all staff are aware that the young person is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. Risk assessments carried out by setting if necessary with referral to Health & Safety if required. 	<p>As Threshold 1 and 2 plus:</p> <ul style="list-style-type: none"> Small group or one-to-one adult input to practice skills. Clear routines within the learning environment. Alternative ways of recording to minimise handwriting. Groups and layouts of tables will need to be adjusted to ensure access for the young person and any specialist equipment they are using i.e., wheelchair, standing frame etc. This will allow them to be at the same level and sit next to their peers. Opportunities are sought within the curriculum discuss PMN and role models within society. 	<ul style="list-style-type: none"> Quality First Teaching Some differentiation to physical activities if required. Opportunities to practice dressing and undressing skills. Access to appropriate ICT provision. Occasional input from additional adult to provide targeted support under the direction of tutor. Minimal support/ supervision may be needed to meet hygiene needs and/or sporting activities. Advice to be sought from Health Professionals e.g., Physiotherapist, Occupational Therapist etc. Physiotherapists may intervene with young people who have mild - moderate physical issues to prevent further deterioration/reduce impact of condition/early intervention to achieve more successful outcomes. 	<p>As Threshold 1 and 2 plus:</p> <ul style="list-style-type: none"> Provision expected from setting. <p>IF involvement from LINT PMN QT:</p> <ul style="list-style-type: none"> Training offered re: the needs of the young person to raise awareness of types of PMN and to reduce any further barriers to learning. Manual handling training may be offered bespoke to the needs of the young person.

Threshold 3 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person is having ongoing difficulties with gross motor skills and coordination often seen in physical activities.</p> <p>The young person may have medical condition that impacts on time in school and requires a medical care plan.</p> <p>The young person has increased dependence on seating to promote appropriate posture for fine motor activities/feeding.</p> <p>The young person has increased dependence on mobility aids i.e., wheelchair or walking aid.</p> <p>The young person has increased use of alternative methods for extended recording e.g., scribe, ICT.</p> <p>NC Level Across expected range with an unusual profile showing relative strengths and weaknesses.</p>	<ul style="list-style-type: none"> • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • An Emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission if required). • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report if appropriate. • Care plan in place, if appropriate, written in conjunction with specialist nurse and LINT-PMN (if involved). 	<p>As Threshold 1 and 2</p>		

Threshold 4 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need that requires a highly personalised timetable and the use of specialist equipment and training, planned in conjunction with appropriate multi-agency approach.</p> <p>Eligibility Criteria for PMN is B (if the young person has been assessed by LINT PMN specialist teacher).</p> <p>The young person requires specialist equipment (medical/ educational) that requires operational assistance.</p> <p>The young person is not reaching age related expectations in all areas of the curriculum.</p> <p>The young person requires assistance during mealtimes i.e. help to move tray/feeding etc.</p> <p>The young person requires aid/s such as rolator, sticks, to move around their environment.</p>	<p>Assessment</p> <p>IF involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> • The young person remains on active caseload and the LINT-PMN QT provides assessment determined by need i.e., progressive or fluctuating condition requiring more regular assessment with updated strategies and monitoring as appropriate. • A LINT- PMN Assessment Report with links shared within report to physical and/or medical conditions and Specialist Strategies is required. • The young person requires block/s of intervention (equating to a minimum of 6 visits per year) with programmes which are expected to take up to a year to embed across setting and home and may include: <ul style="list-style-type: none"> - Minor adaptations to ensure full access to all areas of the setting (handrails, ramps etc). - An assessment of assistive technology - Intensive modelling, coaching and training by Teacher for PMN and/or relevant therapists/ medical professional to enable setting to support and identify general/specific PMN needs. - An environmental assessment. - A personal care and manual handling assessment in conjunction with the LINT-PMN, Occupational Therapy, Physiotherapy and Health Professionals. - An environmental assessment re accessibility. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> • Individual skills-based work may need to take place. • Nurture group input may be necessary to help with low self-esteem. • A buddy system may benefit the young person. • Attention needed to position in rooms. • ICT equipment to aid recording. • Suitable peers and adults scaffolding the young person's environment e.g., facilitating interaction with others. • Suitable peers and adults facilitating interaction in less structured environments e.g., in a café. • Sharing experiences and having discussions on how other people are feeling. 	<ul style="list-style-type: none"> • Assistive technology may be in use to aid recording work i.e., laptop, iPad etc. • Further differentiation to physical activities if required in conjunction with Physiotherapy (physio needs would be based on assessment on a case-by-case basis). • Referral to OT by setting if first line strategies / advice and programmes have been trialled and evidenced but achievement is limited. • Main provision from setting staff with support from SENDCO and/or the LINT-PMN QT (if involved). • Flexible use of support to access curriculum and develop skills in recording. • Furniture and equipment assessed jointly by the LINT-PMN QT (if involved) and Occupational Therapy • Need handwriting/ fine motor advice from OT. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> • Disability/condition requires the intervention of an appropriately trained adult to support within the setting during specific times/ tasks. • Hygiene /medical room may be necessary. • Adapted site may be necessary to physically access the building (assessment by OT will be required). <p>IF involvement from LINT PMN QT:</p> <ul style="list-style-type: none"> • Bespoke training may be offered around creating a PMN Friendly Environment with CPD offer extended to whole setting as appropriate.

Threshold 4 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person is more dependent on appropriate ICT for recording.</p> <p>The young person needs some assistance with their personal care needs i.e., dressing/undressing, toileting and hygiene.</p> <p>A therapist/therapy assistant attends the setting to carry out an appropriate programme.</p> <p>The young person has some of the necessary appropriate posture/seating/physical aids available and needs an up-to-date assessment of need to be carried out by the appropriate therapist.</p> <p>The young person requires some monitoring/supervision by staff/adults.</p> <p>The disability/condition affects speech and has an impact on verbal communication and ability to express views.</p> <p>The young person is unable to or has difficulty in using verbal and/or signing to communicate.</p>	<p>Planning</p> <ul style="list-style-type: none"> • Curriculum planning including group or individual targets differentiated as appropriate to the NC level. • SENDCO seeks advice from LINT-PMN QT and health care professionals in order to discuss next steps. • Setting manages SEND support and engages in joint planning with the LINT-PMN QT, family, the young person and other agencies. • Common targets are distributed to all educators and reviewed regularly. • The young person can contribute to their EHC Plan and/setting targets. • Communication between the LINT-PMN QT and settings is regular (at least half termly if involved). • Setting policies reflect reasonable adjustments made to ensure inclusion • Timetabling of specialist equipment use to have the least impact on classroom time. • Individual targets on support plan following advice from the LINT PMN QT, and health professionals/therapists • Modified planning for outdoor activities is likely to be needed. 			

Threshold 4 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person requires assessment and/or provision of programme from Therapists (OT/Physio).</p> <p>The young person needs assistance to participate in physical activities and requires a modified access to these.</p> <p>The young person's health is unstable which impacts on everyday life/ability to access curriculum.</p> <p>NC Level Depending on the identified nature of the difficulty, their NC level range may vary between 'well above average' to 'well below average'.</p>	<ul style="list-style-type: none"> • The setting must ensure that all staff are aware that the young person is experiencing barriers related to their PMN and provide support to enable tutors to plan appropriately. • Risk assessments carried out by setting if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • An Emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report if appropriate. • Care plan in place, if appropriate, written in conjunction with specialist nurse and LINT-PMN (if involved). • Co-ordination between setting, Health, LINT-PMN (if involved) and adult services is required to provide successful Careers Advice and Guidance for the young person and their families (if appropriate). • Co-ordination between setting, Health, LINT-PMN (if involved) and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing disabilities and preparing for interviews. 			

Threshold 5 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need that requires a significant level of support to access the curriculum with specialist equipment resources to break down barriers to learning.</p> <p>Eligibility Criteria for PMN is A (if the young person has been assessed by LINT PMN specialist teacher).</p> <p>Health care inputs and therapies are intensive and on a regular basis i.e., weekly/daily.</p> <p>The young person requires daily use of specialist equipment that require operational assistance or preparation in order to access all areas of the curriculum.</p> <p>The young person requires support during mealtimes.</p> <p>The young person may be an Augmentative Alternative Communication (AAC) user.</p> <p>The young person may have a degenerative condition which impacts on independence.</p>	<p>Assessment</p> <p>IF involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The young person remains on active caseload and the LINT-PMN QT provides assessment determined by need i.e., progressive or fluctuating condition requiring more regular assessment with updated strategies and monitoring which is provided on at least a half-termly basis. A LINT- PMN Assessment Report with links shared within report to physical and/or medical conditions and Specialist Strategies is required. The young person requires specialist intervention throughout the year (equating to a minimum of monthly visits) to embed across setting and home and may include: <ul style="list-style-type: none"> Ongoing formal instruction in the use of specialist equipment and devices. The development of mobility and independent living skills. A Personal Care Assessment. A Manual Handling Assessment. The young person may require an environmental assessment re accessibility. <p>Planning</p> <ul style="list-style-type: none"> involved) continually monitor and evaluate the need for the increased intensity of input from Speech and Language, Occupational Therapy, Physiotherapy as appropriate. The young person can contribute to their EHC Plan and/ setting targets. Communication between the setting and the LINT-PMN (if involved) is frequent to ensure there are knowledgeable and empowered educators around the young person. 	<ul style="list-style-type: none"> Setting supports differed types of learning experience i.e., individual, small group, pre and post lesson tutoring etc. to ensure curriculum access and discreet skills and teaching can take place. Adult input to practice skills as advised by LINT/OT. Physiotherapy/ Occupational Therapy programme to be completed in setting. Individual and small group teaching as appropriate, carefully organised to ensure full access to the curriculum, which includes life and communication skills. Alternative ways of recording are used to minimise handwriting. 	<ul style="list-style-type: none"> Specialist programmes are integrated within the day i.e., gross and fine motor, dressing and undressing, independent life skills. ICT utilised most of the time for recording purposes. Differentiated writing materials and equipment. Timetable adjustments to accommodate specialist interventions and sensory and/or fatigue rest breaks. Differentiation to physical activities if required. Delivery of physiotherapy programme/postural management by trained staff. The curriculum is modified in some or all areas. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> Condition/disability requires the intervention of an appropriately trained adult to support within the setting during all or the majority of tasks. The setting needs significant adaptations to ensure that full access to the curriculum is achieved. Fully equipped hygiene facilities to meet the needs of those who require hoisting for all transfers. Site adaptations to be considered in consultation with the Local Authority and OT environmental assessment. May need a suitable space or room(s) in which therapies can be carried out with appropriate hoisting facilities, therapy bench, parallel bars, and height adjustable writing table.

Threshold 5 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>NC Level</p> <p>Significant physical/medical difficulties affect access to many parts of the curriculum but performance on non-physical based tasks may be age appropriate.</p> <p>Where there is a diagnosis of a physical disability or medical condition, the individual's academic potential should not be underestimated.</p>	<ul style="list-style-type: none"> • Opportunities are in place for regular reviews of planning in line with LA. • Individual targets on support plan following advice from OT and health professionals. • The setting must ensure that all staff are aware that the young person is experiencing barriers related to their PMN and provide support to enable tutors to plan appropriately. • Risk assessments carried out by setting if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the young person is safe. • An emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. • Relevant information and strategies relating to learning and access needs of the young person to be disseminated to all staff by the SENDCo (with parental permission). • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report if appropriate. • Emergency Health Care Plan in place, if appropriate, written in conjunction with nurses/ school nurse, LINT-PMN (if involved) and parents/carers. • Co-ordination between setting, Health, LINT-PMN (if involved) and adult services is required to provide successful Careers Advice and Guidance for the young person and their families (if appropriate). • Co-ordination between setting, Health, LINT-PMN (if involved) and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing disabilities and preparing for interviews. 	<ul style="list-style-type: none"> • Attention is given to persistent difficulties in mobility around the building. • An environment is provided to support self-esteem and positive self-image. • Accessibility of the whole site, with facilities and practices that maintain the dignity of each young person. • Some young people are likely to require specialist support in communication with peers with an emphasis on developing the young person's independent use of ICT, recording skills and communication through AAC as appropriate. • Communication is embraced between the young person and others. 	<ul style="list-style-type: none"> • Settings have regular liaison with the LINT-PMN QT (if involved) to support young person and themselves in understanding the impact of the PMN, promote independence and specialist equipment training. • Interventions should be incorporated across all activities throughout the day. 	<ul style="list-style-type: none"> • May need a suitable space where specialist resources such as seating, standing frames, walkers, physiotherapy equipment can be stored. • The facility to recharge powered wheelchairs and mobile hoists/slings when necessary. • May need a rest area for periods where pupils can spend time out of their wheelchairs i.e., away from other activities whilst having regard for their dignity. • Access to specialist resources including specific teaching programmes and systems. These might include appropriate technological aids, ICT programmes, AAC or an amanuensis to aid independent learning and assist communication, recording skills etc.

Threshold 6 - Sensory Impairment: Physical/Medical Needs (PMN)

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person has a physical and/or medical need/s (multiple and complex) and requires access to a significant level of support to access the curriculum.</p> <p>Eligibility Criteria for PMN is A* (if the young person has been assessed by LINT-PMN specialist teacher).</p> <p>The young person needs access to multiple pieces of personal specialist equipment, resources and technology to break down barriers to learning.</p> <p>The disability/condition demonstrates moderate risk to self or others i.e., petit-mal seizures/spasms.</p> <p>The young person's behaviour demonstrates serious risk of harm to self/others – tonic clonic seizures, choking, self-harming. (Consider onward referral to behaviour/health services).</p> <p>The young person may require regular/daily/24-hour supervision/monitoring (continuing care due to intrusive procedures).</p>	<p>Assessments</p> <p>IF involvement from LINT PMN QT the LINT-PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The young person requires long-term, significant and intensive intervention from the LINT-PMN QT (equating to a minimum of fortnightly visits) which is expected to take at least a year to embed across setting and home and may include: <ul style="list-style-type: none"> Ongoing formal instruction in the use of specialist equipment and devices. Ongoing development of mobility and independent living skills. An Environmental Assessment carried out by the LINT-PMN QT alongside OT An environmental assessment re accessibility. The young person requires an Annual PMN Assessment Report with links shared within report to physical and/or medical conditions and Specialist Strategies. <p>Planning</p> <ul style="list-style-type: none"> Risk assessments for: moving and handling, movement around the setting and outside to be in place. An Emergency Health Care Plan is in place as appropriate. A PEEP (Pupil Emergency Evacuation Process) is in place collaboration with the LINT PMN QT (if involved). 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Support may be needed with difficulties in making and sustaining peer relationships leading to concerns about social isolation and vulnerability within the setting and wider environment. Opportunities to interact with others as an Augmentative Alternative Communication (AAC) user. Constant reinforcement and generalisation of skills is an essential priority. Use of adapted teaching resources and materials to support teaching and learning for those with sensory, physical, and medical needs. A specialist learning environment that supports the young person's need to accept and develop pre-requisite skills required to access communication and learning. 	<ul style="list-style-type: none"> There is a highly individualised multi-agency working approach. Individual specialist support for mobility and personal care needs. High staffing ratio with specialist teaching and specialist non-teaching support to facilitate the young person's access to the curriculum. Staff trained and 'signed off' in medical / physical interventions, postural management, and strategies as appropriate. OT intervention will be based on functional needs and not necessarily on diagnosis or medical condition. A skilled or familiar person to assist in supporting the young person to communicate their expressive and receptive needs. A specialist/differentiated physical curriculum, if appropriate, to ensure that they can access this aspect of learning. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Fully equipped hygiene facilities to meet the needs of those who require hoisting for all transfers. A suitably equipped room(s) in which therapies can be carried out including a height adjustable therapy bench and hoist and slings. An equipment room where specialist resources such as seating, wheelchairs, walkers, physiotherapy equipment can be stored. The facility to recharge powered wheelchairs. May have access to specialist hydrotherapy/ water-based activities with advice and guidance from the physiotherapist.

Threshold 6 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person has a physical The young person requires regular/daily intervention from specialist nursing teams or health professionals.</p> <p>The young person's disability/condition directly affects the ability to communicate verbally and/or record work/ideas.</p> <p>The young person uses specialist equipment/aids that require daily operational assistance or preparation.</p> <p>The young person requires a high level of support from specialist health professionals.</p> <p>The young person spends a significant part, or all of the day using a specialist aid such as a wheelchair, standing frame, walking sticks, rolator to move around their environment.</p> <p>The young person is dependent on an adult to manage their everyday needs in terms of ensuring any aids provided are applied correctly and also help with personal care needs.</p>	<ul style="list-style-type: none"> • OT assessment for postural management, feeding, toileting, fine/gross motor needs in collaboration with LINT-PMN QT (if involved). • Setting and LINT-PMN QT (if involved) work very closely to identify, assess and meet EHCP outcomes. LINT PMN QT ensures that specialist planning is shared with all key educators including parents/carers (if appropriate) and other agencies as appropriate. • The young person can contribute to their EHC Plan with additional adaptations and modifications recommended by LINT-PMN QT (if involved) prior to meetings in line with LA SEND timescales. • Communication between LINT-PMN (if involved) and settings is frequent (minimal of fortnightly) to ensure that there are knowledgeable and empowered educators around the young person. • All outcomes from EHCP reflect the PMN specialist curriculum 'above and additional to' interventions for the young person to learn to access (if LINT-PMN is involved). • Setting works closely with LINT PMN QT (if involved) to create a bespoke education offer to meet unique needs based on setting curriculum and specialist curriculum. • Assessment and monitoring will be bespoke. • Policies reflect reasonable adjustments and are written in collaboration with LINT PMN QT (if involved). 		<ul style="list-style-type: none"> • A daily or intensive therapy programme integrated within the day. • Postural management to be regularly reviewed. • Curriculum planning closely tracks levels of achievement. • and incorporates individual targets, self-help and therapy programmes. • Communication skills are an essential priority with the use of total communication environment to facilitate access to the curriculum e.g., PECS, Makaton, objects of reference, situational and sensory clues, simple voice output devices (Big Macs). • Settings have regular liaison with the LINT-PMN QT (if involved) to support the young person and themselves in understanding the impact of the PMN, promote independence and specialist equipment training. 	<ul style="list-style-type: none"> • May have access to sensory room. • A suitable space may be needed for young people with emotional and/or behavioural difficulties including regular periods of withdrawal, disaffection and ongoing reluctance to attend the setting. • Access to regular nursing support and advice • Access to specialist services e.g., educational psychologists, SEN services and health professionals • Staff trained in the use of a range of specialist ICT and AAC equipment and software to support access to learning. • Specialist resources provided by Health to meet the personal care and mobility needs of each young person.

Threshold 6 - Sensory Impairment: Physical/Medical Needs (PMN) *continued*

Young Person's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The young person has a medical/medication regime that requires adult assistance e.g. changing catheter, tube medication/feeding, epilepsy management etc.</p> <p>The young person has a life threatening/limiting or degenerative condition.</p> <p>NC Level Attainment levels will range from P scales in Primary to NC levels in Secondary.</p>	<ul style="list-style-type: none"> • Educators facilitate working between themselves, the family, LINT-PMN (if involved) and SaLT to identify appropriate use of communication methods e.g. AAC. • Individual care plan/ protocol to be in place. • Behaviour care plans in place if appropriate • Plans in place for Egress, moving and handling. • The young person requires a high level of support from a multi-disciplinary team to make successful transitions between rooms. • Setting takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report (if applicable). • Co-ordination between setting, Health, LINT-PMN (if involved) is required and adult services to provide successful Careers Advice and Guidance for the young person and their families (if appropriate). • Co-ordination between setting, Health, LINT-PMN (if involved) and adult services is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing disabilities and preparing for interviews. 			

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Young person is able to access and function within work-based environments in relation to apprenticeships, supported internships and traineeships in order to progress with future career choices.</p> <p>Young person is able to confidently ask for help when there are barriers to accessing educational resources.</p> <p>Young person is able to be supported educationally to engage in missed work due to absences through illness, appointments or therapy time/ medication needs that take them out of class.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options.</p> <p>The young person is able to utilise specialist input into careers education, information and guidance, including supporting volunteering/work experience opportunities.</p> <p>The young person is able to understand the essential benefits of employment (salary, sense of worth etc.).</p> <p>Young person is able to understand the basic principles of wages, National Insurance, pension contributions, tax and employment rights as well as the principle of ‘reasonable adjustments’.</p> <p>Young person is able to begin to understand the purpose and criteria for funding such as Access to Work.</p> <p>Young person is able to request support to obtain and manage specialist equipment and/or support for job applications and funding.</p> <p>Young person is able to begin to identify their personal skills, strengths, and interests regarding employment.</p>	<p>The young person is able to demonstrate the life skills necessary (cooking, cleaning, shopping etc.) to facilitate independent living in the context of individual circumstances.</p> <p>The young person is able to engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.</p> <p>The young person is able to confidently negotiate indoor and outdoor environments independently, understanding their own limitations physically.</p> <p>The young person is able to have an awareness of risk within the home context and will manage this appropriately in order to remain safe.</p> <p>The young person is able to plan for future living arrangements, recognising what is positive and possible to promote independence and wellbeing.</p>	<p>The young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>The young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>The young person is able to analyse risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>The young person is able to safely access online communities.</p> <p>The young person is able to express own needs and make clear requests of members of the public and professionals (bus driver, shop assistant etc.).</p> <p>The young person is able to give their carer instructions.</p> <p>The young person is able to make informed decisions when refusing assistance appropriately, both verbally and non-verbally.</p>	<p>The young person is able to recognise the need for dental, medical and optical health and will take responsibility for making appointments as required.</p> <p>The young person is able to take steps to remain physically active and healthy in the context of their individual circumstances.</p> <p>The young person is able to make healthy eating choices in order to promote physical wellbeing.</p> <p>The young person is able to maintain any physiotherapy regimes necessary to ensure physical health and optimum mobility in the context of their individual circumstances.</p> <p>The young person is able to confidently engage with self-care routines in order to maintain appropriate levels of personal hygiene in the context of their individual circumstances.</p> <p>The young person is able to confidently attend their annual health check with their GP if registered as having a learning disability.</p> <p>The young person is able to access specialist support, such as mentoring or counselling as appropriate.</p>

PfA Outcomes and Provision

Employability/Education	Independence	Community Participation	Health
<p>Young person is able to access and function within work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices.</p> <p>Young person is able to access and function within further/higher education provision in order to progress with future career choices.</p> <p>Young person is able to present their skills in written form (C.V) to help secure future education and work-based options.</p> <p>Young person is able to access job centre provision to support pathways into employment post education.</p> <p>Young person is able to successfully access work-based environments in relation to voluntary work, community-based projects and paid work in order to progress with future career choices.</p> <p>Young person is able to take personal responsibility for themselves including recognising their rights and responsibilities, entitlement and benefits.</p>	<p>Young person is able to access living arrangements appropriate to individual circumstances (including residential arrangements for education), that are positive in promoting independence and wellbeing.</p>	<p>Young person is able to access community, leisure and social facilities to enable participation within the local community in accordance with their preference.</p> <p>Young person is able to access appropriate transport in order to facilitate participation within community, leisure and social activities.</p> <p>Young person is able to show awareness of risk (travel, road safety, personal safety) in the context of community participation in order to remain safe.</p> <p>Young person is able to maintain wider relationships: house sharing, romantic relationships, preparing for parenthood, housing.</p> <p>Young person is able to directly engage between health professionals and social services personnel.</p>	<p>Young person is able to transfer to adult services and attend regular medical appointments to with independence and take responsibility for making their own appointments.</p> <p>The young person is able to access specialist support, such as mentoring or counselling as appropriate.</p>

Provision: Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the Post 16 Thresholds Guidance: Physical and/or Medical Needs.