

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

Guidance for babies, children and young people with:

- Vision Impairment
- Hearing Impairment
- Multi-sensory Impairment
- Physical and Medical Needs

Vision Impairment

Identification

If you have any concerns about a CYP's vision, please encourage the parents/carers to see a GP or go to an optician **prior to referral to LINT**.

[Eye tests for children - NHS \(www.nhs.uk\)](http://www.nhs.uk)

Although lots of CYP have eye conditions i.e., myopia (short-sightedness), a person is considered to have a vision impairment if they have an eye condition/s that cannot be fully corrected (i.e., wearing glasses) and/or they have damage to the visual pathways or visual processing areas of the brain. The term vision impairment is used to cover a range of conditions and a range of levels of vision. There is no direct correlation between vision impairment and cognitive ability. People with a vision impairment have the same range of intelligence and abilities as their fully sighted peers.

Referral

Referrals are usually received following medical diagnosis from Health (i.e., Ophthalmology, Health Visiting Teams, Paediatrics etc) however schools, settings and parent/carers, social care professionals, professionals from the 3rd sector or the young person themselves can also refer. CYP must meet the vision impairment referral criteria. If you are not sure if a CYP meets the criteria, please contact the Low Incidence Needs Team prior to referral.

Universal offer

Following diagnosis all new referrals from parents/carers, settings/schools, health and other professionals will receive an initial assessment to include:

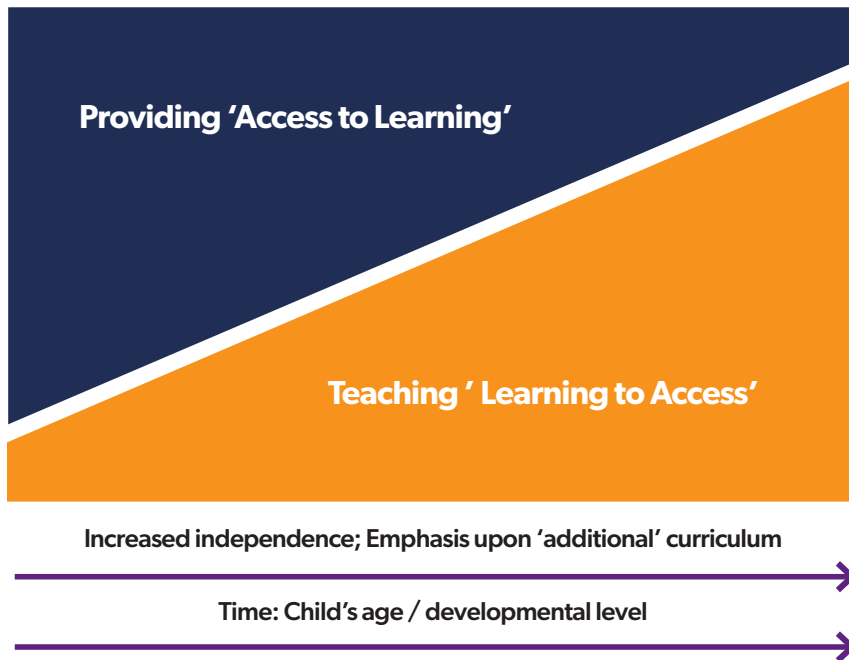
- Assessment of visual functioning, including observations, by a Qualified Teacher of children and young people with Vision Impairment (QTVI)
- Information from school/setting
- Information from Health/other agencies

- Information from parent/carer
- Information from the CYP

The assessment will be aligned to the **NatSIP Eligibility Criteria**, which will:

- Enable the service to provide an equitable allocation of resources.
- Provide a means of identifying the levels of intervention required.
- Identify the frequency of assessments by LINT-VI.

All CYP who meet the criteria as having a vision impairment receive an eligibility banding following every annual assessment (or last assessment if receiving an E Eligibility Criteria banding) which determines the Threshold they access. These are not fixed over time but reflect the changing needs of the CYP, their family, key professionals and settings in line with the 'access to learning-learning to access' model which underpins all specialist provision for CYP with a vision impairment as below:



McLinden et al, 2021; McLinden et al, 2016; Douglas et al, 2019

Over time the emphasis shifts from support being provided directly to the CYP ('access to learning'), to their acquisition of specialist skills to promote greater independence over time ('learning to access'). A balance of provision needs to be determined via the Threshold to ensure inclusive practice for CYP with vision impairment (through promoting access to learning approaches), whilst ensuring that individuals are provided with the necessary skills and opportunities to become as independent as possible (through targeted specialist teaching to access approaches).

Provision is determined by the **Curriculum Framework for Children and Young People with a Vision Impairment (CFVI)** to ensure CYP develop the broad range of skills they need to live as independently as possible whilst also having appropriate adjustments and support put in place to enable access. **Area 1** focusses on inclusion and inclusive practice to ensure physical and social environments are accessible for CYP with vision impairment (Facilitating an Inclusive World). **Areas 2-11** highlight the particular skills that they require to enable them to participate in education with increasing independence, learn how to carry out everyday activities, move around by themselves, and to feel fully included in their education setting ([Curriculum Framework for Children and Young People with Vision Impairment \(rnib.org.uk\)](https://www.rnib.org.uk)).

The offer for CYP with vision impairment is designed to ensure that intervention continues to be delivered on the basis of individual need and in accordance with local, regional and/or national policy and practice.

Vision Impairment Needs Guidance

Threshold Descriptors Overview

<p>Threshold 1</p> <p>(Eligibility Criteria E)</p> <p>The CYP meets criteria for vision impairment with assessed need identifying a child with one approach required to access information around them (i.e., print or symbols).</p>	<ul style="list-style-type: none"> • The CYP does not require any active involvement or further assessments from LINT-VI. The CYP 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 CYP’s LINT-VI Low Vision Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related CFVI Areas. • The CYP either does not require or requires minimal LINT-VI liaison with multi-agencies. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching VI Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching VI Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-VI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-VI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP 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.
<p>Threshold 2</p> <p>(Eligibility Criteria D)</p> <p>The CYP meets criteria for vision impairment with assessed need identifying a child with one approach required to access information around them (i.e., print or symbols).</p>	<ul style="list-style-type: none"> • The CYP does not require any active intervention based on the specialist curriculum from LINT-VI following assessment and provision of strategies. The CYP remains on caseload and LINT-VI provides an annual assessment including a monitoring visit with updated strategies (as appropriate). • The CYP’s LINT-VI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related CFVI Areas. • The CYP requires minimal LINT-VI liaison with multi-agencies as needed. LINT-VI annual assessment is shared as appropriate.. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching VI Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching VI Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-VI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-VI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP 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 CYP meets criteria for vision impairment with assessed need identifying a child with one approach required to access information around them (i.e., modified and enlarged print or symbols).

- The CYP remains on caseload and LINT-VI provides a short-term block from one Area of the CFVI (up to 6 visits).
- The CYP 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 CYP requires minimal or short-term LINT-VI liaison with multi-agencies.
- The CYP 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 CYP 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 CYP's family require additional time-limited advice and guidance to ensure that the CYP has a knowledgeable and empowered family around them.
- The CYP's educators require additional time-limited advice and guidance to ensure that the CYP has knowledgeable and empowered educators around them.
- All key person/s involved with the CYP require timely LINT-VI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the CYP in addition to LINT reports and strategies i.e., during the autumn term when the CYP has transitioned.

Threshold 4

(Eligibility Criteria B)

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

- The CYP 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 CYP 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 CYP'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 CYP may need a medium level of intervention to successfully transition between different settings.
- The CYP requires a low/medium level of LINT-VI liaison with multi-agencies.
- The CYP 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 strategies.
- The CYP 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 CYP's family requires frequent communication (minimal of half-termly) to ensure that the CYP has a knowledgeable and empowered family around them.
- The CYP's educators require frequent communication (minimal of half-termly) to ensure that the CYP has knowledgeable and empowered educators around them.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies.

Threshold 5

(Eligibility Criteria A)

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

- The CYP 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 CYP requires specialist teaching in at least 4 areas from the CFVI.
- The CYP'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 CYP may need a high level of intervention to successfully transition between different settings.
- The CYP requires a medium/high level of LINT-VI liaison with multi-agencies.
- The CYP 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 CYP's family requires frequent communication (at least fortnightly) to ensure that the CYP has a knowledgeable and empowered family around them.
- The CYP's educators require frequent communication (at least bi-weekly) to ensure that the CYP has knowledgeable and empowered educators around them.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies.

Threshold 6

(Eligibility Criteria A*)

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

- The CYP 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 CYP 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 CYP receives training and assessment in the areas of Independent Living Skills and Orientation and Mobility from the LINT Paediatric Habilitation Specialist.
- The CYP will need a high level of intervention to successfully transition between different settings.
- The CYP requires a high level of LINT-VI liaison with multi-agencies.
- The CYP 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 CYP's family requires frequent communication (at least weekly) to ensure that the CYP has a knowledgeable and empowered family around them.
- The CYP's educators require frequent communication (daily as applicable) to ensure that the CYP has knowledgeable and empowered educators around them.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies with LINT-VI liaison meetings occurring either weekly or fortnightly.

Threshold 1 - Sensory Impairment: Vision

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for VI equivalent is E.</p> <p>CYPs within Threshold 1 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP does not require any active involvement or further assessments from LINT-VI. The CYP 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 CYP'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. • The CYP 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 school must ensure that all staff are aware that the CYP will be experiencing barriers caused by vision impairment and provide support to enable staff to plan appropriately. • Schools take on CAF Lead Practitioner role. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 	<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. • Teacher verbalising work on the board and all written information within the classroom. • Consideration of seating position – CYP 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 CYP's style of learning and support alternative ways of accessing and recording work. • Cue and reinforce the CYP's listening and attention. • Implement visual fatigue rest breaks within the school day. • Attention to speed of lesson delivery and speed of working. • Differentiated questioning and explicit language used to explain whole class responses. • School 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. • Teachers 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 school. • Some in-class support provided by school – especially in lessons where health and safety require consideration. • School 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. • School considers timetabling and location of rooms for the CYP and/ or appropriate workstation for 1:1 intervention. • School 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 children's needs (adaptations and curriculum delivery to facilitate access). • A designated member of school staff to monitor and manage the use of specialist equipment e.g., CCTV, iPad, magnifiers. • Provision of consumables by school 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*

CYP 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 CYP 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 Functional Vision Assessment Report. • Referral is made to Vision & Hearing Support (if appropriate) when CYP reaches Y9 to access specialist VI support as part of transition into adult services. 	<ul style="list-style-type: none"> • Teachers to ensure CYPs 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. • Teachers 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 CYP between classrooms/key stages. • Encourage social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully including the CYP in the wider school life including outside and at busier times of the day. • Say the CYP'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 CYP can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the CYP 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"> • School will ensure the CYP 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 CYP 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). • Vision and Hearing Support (adult-based Gateshead service) for appropriate CYPs identified by LINT from Year 9.

Threshold 2 - Sensory Impairment: Vision

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for VI equivalent is D.</p> <p>CYPs within Threshold 2 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP does not require any active intervention based on the CFVI from LINT-VI following assessment and provision of strategies. The CYP 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 CYP’s Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> LINT-VI provides an annual assessment including up to 3 visits as appropriate (i.e., troubleshooting for specialist equipment may generate additional visits). LINT-VI provides a Functional Vision Assessment Report or letter, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-VI Poster ‘Helping Pupils with a Visual Impairment in Your Class’ and links shared within Report to visual conditions. Auxiliary aids e.g., hand-held magnifiers are suitably removing barriers to access. The CYP 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"> School 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. School will facilitate monitoring and assessment visit from LINT-VI. The school must ensure that all staff are aware that the CYP will be experiencing barriers caused by vision impairment and provide support to enable staff to plan appropriately. School takes on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within school. Some in-class support provided by school – especially in lessons where health and safety require consideration. School 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. School considers timetabling and location of rooms for the CYP and/or appropriate workstation for 1:1 intervention. School 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*

CYP 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 CYP 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 Functional Vision Assessment Report. • Referral is made to Vision & Hearing Support (if appropriate) when CYP reaches Y9 to access specialist VI support as part of transition into adult services. 			

Threshold 3 - Sensory Impairment: Vision

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP 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.</p> <p>CYPs within Threshold 3 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP remains on caseload and LINT-VI provides an annual assessment with updated strategies as appropriate.</p> <p>Areas 2-11: The CYP 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 CYP’s Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> • The CYP requires a short-term block from one Area of the CFVI (up to 6 visits) provided by LINT-VI. • LINT-VI provides a Functional Vision Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-VI Poster ‘Helping Pupils with a Visual Impairment in Your Class’ 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 CYP and themselves in understanding the impact of vision loss and promote independent use of auxiliary aids. • School 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. • School takes 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. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. 	<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. • 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 CYP can still sit next to/ near their peers. • Opportunities are sought within PSHE to discuss VI and role models within society. • Behaviour management systems motivate the CYP and set clear expectations. 	<ul style="list-style-type: none"> • Timetable adjustments to accommodate specialist interventions. • QTVI supports educators in developing CYP’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 regarding the needs of the CYP 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*

CYP 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 CYP to be disseminated to all staff by the SENDCo (with parental permission). • Educators identify times within the day to deliver training programmes as appropriate. • From Y9 onwards, communication between school, LINT-VI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the CYP and their families. • From Y9 onwards, communication between school, LINT-VI and 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

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP 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.</p> <p>CYPs within Threshold 4 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP 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>Area 2-11: The CYP requires active intervention based on an annual block from the CFVI provided by LINT-VI following assessment and provision of strategies.</p>	<p>Assessment</p> <p>Functional Vision 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 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 a Functional Vision Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-VI Poster 'Helping Pupils with a Visual Impairment in Your Class' and 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 CYP'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 CYP in addition to LINT reports and strategies e.g., during the autumn term when a CYP has transitioned into a new year group. 	<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. CYPs working with tactile learning resources that will need additional differentiation to take into account pace of learning. School 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 CYP'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. School supports the provision of special examination arrangements and allows CYPs time to develop the discreet skills associated with their use. Advice on sourcing large print or tactile materials and production of accessible materials (transcription). Time away from main cohort of CYPs 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 CYP 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"> Specific resources such as 'Think Right, Feel Good' to promote well-being used alongside school resources. Peer awareness training. Bespoke training offered around creating Vision Friendly Classroom with CPD offer extended to whole school as appropriate. LINT-VI 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-VI and school can support the CYP 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*

CYP 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 school environment. <p>Planning</p> <ul style="list-style-type: none"> School manages SEND support and engages in joint planning with LINT-VI, family, the CYP and other agencies. Common targets are distributed to all educators and reviewed regularly. School takes 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. Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCo. The CYP 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 schools is frequent (minimal of half-termly) to ensure that there are knowledgeable and empowered educators around the CYP. Outcomes from EHCP (if appropriate) reflect the CFVI 'above and additional to' interventions for the CYP to learn to access. School provides time within the week for direct specialist teaching from LINT-VI. 	<ul style="list-style-type: none"> Suitable peers and adults scaffolding the CYP's environment e.g., facilitate interaction with others. Suitable peers and adults facilitating interaction in less structured environments e.g., break times. 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. Specific resources such as 'Guide Dogs – Think Right, Feel Good' to promote well-being used alongside school resources. 	<ul style="list-style-type: none"> Advice to access leisure and sports clubs outside school. School supports involvement of other agencies e.g., Guide Dogs. Assess and deliver discreet teaching relevant to the CYP which will be generalised and used within the day. CFVI is running alongside school curriculum with up to at least 3 areas to be embedded within school and home environment. Exam access arrangements may allow up to 50% additional time. QTVI works with school to facilitate interaction and communication with other CYPs with a VI within or external of school. 	

Threshold 4 - Sensory Impairment: Vision *continued*

CYP 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. • Policies reflect reasonable adjustments. • Educators facilitate working between themselves, the family, LINT-VI and SaLT to identify appropriate use of communication methods e.g., AAC. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • From Year 9 onwards, co-ordination between school, LINT-VI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the CYP and their families. • From Year 9 onwards, co-ordination between school, LINT-VI and 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

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP 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.</p> <p>CYPs within Threshold 5 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP 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 CYP 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 CYP's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> • The CYP requires specialist teaching at least 4 areas from the CFVI. • The CYP is known to LINT's Habilitation Specialist and has been assessed using LINT's Habilitation Eligibility Criteria. • LINT-VI provides a Functional Vision Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-VI Poster 'Helping Pupils with a Visual Impairment in Your Class' 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 CYP to successfully transition between different rooms. • Advice, guidance and direct support (minimum of 10 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 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 CYP in addition to LINT reports and strategies e.g., during the autumn term when a CYP has transitioned into a new year group. • An environmental assessment may be necessary to assess accessibility of school environment. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> • School 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 class participation. • Marking and recording of work reflects unique access needs of the CYP e.g., use of Penfriend stickers. • Communication between the CYP 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 within the day 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 CYP's emotional and mental wellbeing. • Timetable adjustments to accommodate specialist interventions and rest breaks. • QTVI supports educators in developing CYP'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 school offered around creating a Vision Friendly school with CPD offer extended to whole school as appropriate. • School has regular liaison with QTVI to support the CYP 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 school' clubs.

Threshold 5 - Sensory Impairment: Vision *continued*

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<p>Planning</p> <ul style="list-style-type: none"> • School manages SEND support and engages in joint planning with LINT-VI, family, the CYP 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. • School takes on CAF Lead Practitioner role. • The CYP 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 school is frequent (at least twice a week) to ensure that there are knowledgeable and empowered educators around the CYP. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • School 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 CYP to learn to access. • School 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 school and LINT-VI. • School engages in joint planning/target setting. • 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 CYP. 	<ul style="list-style-type: none"> • The PSHE programme is adapted to reflect the unique needs of the CYP. 	<ul style="list-style-type: none"> • Time away from main cohort of CYPs 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 CYP 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 school. • Schools work 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 CYP can fully access all curriculum areas. Personalised differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. • CFVI is merging within the CYP's curriculum offer within school with up to at least 5 areas to be embedded within school and home environment. 	

Threshold 5 - Sensory Impairment: Vision *continued*

CYP 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 work with LINT-VI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-VI to identify when the CYP 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 CYP is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the CYP 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. • From Y9 onwards, co-ordination between school, LINT-VI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for CYP and their families. • From Y9 onwards, co-ordination between school, LINT-VI and 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. 		<ul style="list-style-type: none"> • 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 QTVI to receive advice and support on access arrangements will be required for internal and external examinations. LINT-VI may help with the administration of these. • LINT –VI responsible for all specialist skills training, higher levels of support, modelling and coaching. • Exam access arrangements may allow at least 50% additional time. • QTVI works with the school to facilitate interaction and communication with other CYPs with a VI within or external of school. 	

Threshold 6 - Sensory Impairment: Vision

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for vision impairment with assessed need identifying a CYP with auditory/tactile approaches as their primary access to information around them.</p> <p>Eligibility Criteria for VI equivalent is A*.</p> <p>CYPs within Threshold 6 require the following from the CFVI:</p> <p>Facilitating an Inclusive World: The CYP 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>Area 2-11: The CYP requires active, ongoing and a significant level of 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 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 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 a Functional Vision Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) a LINT-VI Poster 'Helping Pupils with a Visual Impairment in Your Class' and 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 CYP to successfully transition between different rooms. 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 and assessment 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 CYP 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 CYP to engage and socialise with their peers and adults. 	<ul style="list-style-type: none"> The CYP has full-time support provided by a LINT Specialist Sensory Teaching Assistant (SSTA). 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 to support the CYP's emotional and mental wellbeing. LINT -VI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the CYP is seamless between the school's curriculum and the CFVI. QTVI supports educators in developing CYP's personal understanding of their vision impairment and developing their confidence and independence into adulthood. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to school around creating a Vision Friendly school with CPD offer extended to whole setting as appropriate.

Threshold 6 - Sensory Impairment: Vision *continued*

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<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 CYP in addition to LINT reports and strategies i.e. during the autumn term when a CYP has transitioned to another year group. An environmental assessment is often necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> School 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 CYP 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 school is frequent (daily) to ensure that there are knowledgeable and empowered educators around the CYP. All outcomes from EHCP reflect the CFVI 'above and additional to' interventions for the CYP to learn to access. School works closely with QTVI to create a bespoke education offer to meet unique needs based on school curriculum and CFVI. 		<ul style="list-style-type: none"> Educators directly plan with LINT-VI to ensure that specialist skills are practised and consolidated within the day. Time away from main cohort of CYPs 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 CYP 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 school. School work 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 CYP 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*

CYP Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<ul style="list-style-type: none"> • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last Functional Vision Assessment Report. • Assessment and monitoring will be bespoke between school 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 CYP 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. • From Year 9, precise planning between educators, the CYP, their family, LINT-VI and Vision & Hearing Support (if appropriate) is 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 CYP's curriculum offer within school with up to at least 6 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. • 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 school to facilitate interaction and communication with other CYPs with a VI within or external of school. 	

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Child is able to access the whole learning environment with activities, materials, toys and equipment modified and adapted to meet their VI needs as appropriate.</p> <p>Child is able to cooperate with maintenance of low- and high-tech auxiliary aids.</p> <p>Child is able to at least demonstrate the basic functions of any high-tech auxiliary aids.</p> <p>Child is able to sit appropriately in a good seating position.</p> <p>Child is able to begin to develop their mobility and orientation skills in order to explore their environment within familiar settings.</p> <p>Child is able to maintain balance when active.</p>	<p>Child is able to locate and identify an increasing range of their own body parts.</p> <p>Child is able to understand that other people have similar/ different body parts and senses.</p> <p>Child is able to demonstrate basic personal hygiene and can dress using some fastenings.</p> <p>Child is able to use at least a spoon and demonstrate some basic cutting skills.</p> <p>Child is able to demonstrate spatial awareness and movement of whole body, head, limbs, and trunk through imitation and functional use.</p> <p>Child is able to co-ordinate movements.</p> <p>Child is able to identify body planes (through touch, imitation, or functional use).</p> <p>Child is able to identify common human, home and vehicle sounds.</p> <p>Child is able to begin to understand and functionally use any mobility aids to explore their environment.</p> <p>Child is able to develop an awareness of pre-cane and sighted guide techniques if required.</p>	<p>Child is able to access a variety of community-based activities/clubs/groups, sometimes with adult support to facilitate shared play and interaction and to support the development of balance, strength, body awareness and mobility as well as friendships with peers.</p> <p>Child is able to build skills and independence to enable them to build and sustain positive friendships.</p> <p>Child is able to begin to identify common shop and venue sounds in familiar environments.</p> <p>Child is able to demonstrate an understanding of the importance of polite language, saying please and thank you, and when to use an appropriate range of greetings (handshakes, hug etc.).</p> <p>Child is able to develop an understanding of the importance of communicating confidently and effectively their needs.</p> <p>Child is able to engage in conversation and interactions with peers and familiar adults and begin to resolve conflict when it may occur.</p> <p>Child is able to begin to understand that different people have different needs and abilities and are beginning to understand how/when to offer assistance.</p> <p>Child is able to begin to identify some coins and notes, understands that cash/currency is used to pay for things, and that different items can be different amounts.</p>	<p>Child is able to attend regular Ophthalmology/Optomist appointments with an adult.</p> <p>Child is able to begin to have an understanding of their own identity as a child with VI and begin to develop resilience to overcome difficult situations.</p> <p>Child is able to begin to identify their strengths.</p> <p>Child is able to identify their own feelings and emotions and share them with a familiar adult.</p> <p>Child is able to make a decision and give a reason of why an impact behind this decision to a familiar adult.</p> <p>Child is able to begin to understand the social and health benefits of participation in sports and fitness activities.</p> <p>Child is able to confidently explore and eat new tastes and textures.</p>

Vision Impairment: PfA Outcomes and Provision

Y3 to Y6 (8-11 years)

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>CYP is able to take ownership of maintaining their auxiliary aids.</p> <p>CYP is able to use their mobility and orientation skills to navigate their environment in a familiar setting.</p> <p>CYP is able to at least begin to choose suitable approaches (or combinations of approaches) to accessing and presenting information in different circumstances themselves.</p> <p>CYP is able to utilise a range of suitable approaches to accessing and presenting information (e.g. tangible objects /objects of reference, print, speech, recordings, braille, tactile graphics).</p> <p>CYP is able to feel that they can have an influence and impact on their world and on the decisions that are made regarding their education and life.</p> <p>CYP is able to begin to understand the essential benefits of employment (salary, sense of worth etc.).</p>	<p>CYP is able participate independently in most self-care routines.</p> <p>CYP is able to use cutlery and demonstrate basic food preparation skills i.e. pouring.</p> <p>CYP is able to begin to develop their skills in the safe use of kitchen appliances and specialist technology, such as talking scales and liquid level indicators.</p> <p>CYP is able to understand and explain the similarities/ differences of people’s body parts and senses and understands how different disabilities can affect them.</p> <p>CYP is able to demonstrate a functional understanding through whole-body movements when relating to objects in the environment.</p> <p>CYP is able to develop their mobility aid/cane/ wheelchair skills in order to support safe travel in familiar and some unfamiliar environments if appropriate.</p> <p>CYP is able to functionally use a variety on pre-cane and sighted guide techniques to travel safely through familiar and some unfamiliar environments.</p> <p>CYP is able to identify, locate and track a range common human, home and vehicle sounds.</p> <p>CYP is able to begin to make simple cash purchases using the exact amount or expect change and/or make a card purchase (i.e., GoHenry 6+, debit, chip/pin, contactless, pre-loaded, gift card) with adult support.</p>	<p>CYP is able to begin to access a variety of community-based activities/clubs/groups independently to support the development of balance, strength, body awareness and mobility as well as friendships with peers.</p> <p>CYP is able to identify, locate and track common shop and venue sounds in familiar environments.</p> <p>CYP is able to develop an awareness of social norms, knows the characteristics of a healthy personal relationship and has an awareness of non-verbal cues which may be missed.</p> <p>CYP is able to demonstrate confidence when interacting with others independently, beginning to make polite small talk (around weather, wellbeing, day-to-day etc.).</p> <p>CYP is beginning to feel confident with meeting up with friends in age-appropriate settings and keeping safe online.</p> <p>CYP is able to understand it is okay to refuse assistance sometimes.</p>	<p>CYP is able to develop their understanding of their own identity as a CYP with V, developing self-esteem, self-advocacy and problem-solving skills, self-confidence, self-efficacy and agency, self-awareness (i.e. recognising anxiety) in relation to this.</p> <p>CYP is able to access specialist support, such as mentoring or counselling as appropriate.</p> <p>CYP is able to make a decision and give a reason of why an impact behind this decision to other.</p> <p>CYP is able to engage in conversation and interactions with peers and familiar adults and begin to resolve conflict when it may occur or seek support of an appropriate adult.</p> <p>CYP is able to understand the social and health benefits of participation in sports and fitness activities with opportunities to progress to professional and disability sport.</p> <p>CYP is able to understand that everyone should have equal access to cultural, artistic, recreational and leisure activities.</p> <p>CYP is able to understand that people with disabilities and their families have the right to request and receive support from appropriately qualified professionals.</p>

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>CYP is able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and access to appropriate equipment available to them.</p> <p>CYP is able to utilise specialist input into careers education, information and guidance, including supporting volunteering/work experience opportunities.</p> <p>CYP is able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.</p> <p>CYP is able to navigate a variety of environments within familiar and some unfamiliar settings.</p> <p>CYP is able to develop skills to empower them to articulate their needs in different environments.</p> <p>CYP is able to choose specific approaches (or combinations of approaches) to information access in particular contexts (e.g., exam skills, in lessons and independent study).</p> <p>CYP is able to manage information e.g., file/ folder management, organisational skills, editing/bookmarking, revision skills via using, recognising and managing the tools needed e.g. low vision devices.</p> <p>CYP is able to develop confidence in using technology e.g. mobile phones, apps (including specialist apps such as colour recognition tools), GPS and navigation apps (including transportation apps), social media and speech input software to complete a wider range of tasks.</p>	<p>CYP is able to use their mobility aid/cane/wheelchair with developing proficiency, to support safe travel in familiar and some unfamiliar environments.</p> <p>CYP is able to understand when and how to use a variety of pre-cane and sighted guide techniques to travel safely through familiar and increasingly unfamiliar environments if appropriate.</p> <p>CYP is able to make cash purchases using a variety/combination of coins and notes to make the exact amount, and/or identify how much change they should be given.</p> <p>CYP is able to develop technology skills for living such as online shopping, food identification, online banking and using technology to read print post.</p> <p>CYP is able to expand their skills in the safe use of kitchen appliances and specialist technology, such as talking scales and liquid level indicators.</p> <p>CYP is able to demonstrate a more complex understanding of the social skills around eating i.e., eating at a social occasion.</p>	<p>CYP is able to access a variety of community-based activities/clubs/groups with growing independence.</p> <p>CYP is able to identify, locate and track a range of common shop and venue sounds in familiar and increasingly unfamiliar environments.</p> <p>CYP is able to make and maintain relationships (attachments, familial, peer and romantic), beginning to understand the interrelation with sex education as appropriate.</p> <p>CYP is able to safely access online communities.</p> <p>CYP is able to develop their ability to express own needs and make clear requests of members of the public and professionals (i.e., bus driver, shop assistant etc.).</p> <p>CYP is able to begin to explain and demonstrate how to provide sighted-guide assistance if appropriate.</p> <p>CYP is able to access travel services with additional support.</p>	<p>CYP is able to attend regular Ophthalmology/Optomestrist appointments with increasing independence and take responsibility for making their own appointments where appropriate.</p> <p>CYP is able to begin to make their own balanced judgements on accessing specialist support, such as mentoring or counselling as appropriate.</p> <p>CYP is able to understand and explain the social and health benefits of participation in sports and fitness activities.</p> <p>CYP is able to understand and explain about personal safety, privacy and sexual consent.</p> <p>CYP is able to understand and can explain the characteristics of a healthy personal relationship.</p> <p>CYP is able to demonstrate an acceptance of vision impairment, establishing their own identity in relation to vision impairment.</p>

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

Hearing Impairment

Identification

If you have any concerns about a CYP's hearing, please encourage the parents/carers to talk to their GP or health visitor about the CYP seeing an audiologist prior to referral to LINT.

[Hearing tests for children - NHS \(www.nhs.uk\)](https://www.nhs.uk)

The term hearing impairment is used to cover a range of conditions and a range of levels of hearing. Hearing impairment (also described as hearing loss or D/deafness) is measured in terms of the sound level (in decibels or dB) that someone can hear at a given frequency (pitch). Hearing impairment is tested across the range of speech frequencies, usually between 250 Hz and 8kHz. If a person has good hearing across all these frequencies they are considered to have normal hearing.

Levels of hearing impairment are often assessed as being mild, moderate, severe or profound, it can be bi lateral or unilateral. It is dangerous to assume that because a hearing impairment is labelled as 'mild' the consequences are barriers for the individual will be negligible.

There is no direct correlation between hearing impairment and cognitive ability. People with a hearing impairment have the same range of intelligence and abilities as their peers.

Referral

Referrals are usually received following medical diagnosis from Health (i.e. Audiology, ENT Health Visitor or the Newborn Hearing Screening Programme etc) however schools, settings and parent/carers, social care professionals, professionals from the 3rd sector or the young person themselves can also refer. CYP must meet the hearing impairment referral criteria. If you are not sure if a CYP meets the criteria, please contact the Low Incidence Needs Team prior to referral.

Universal offer

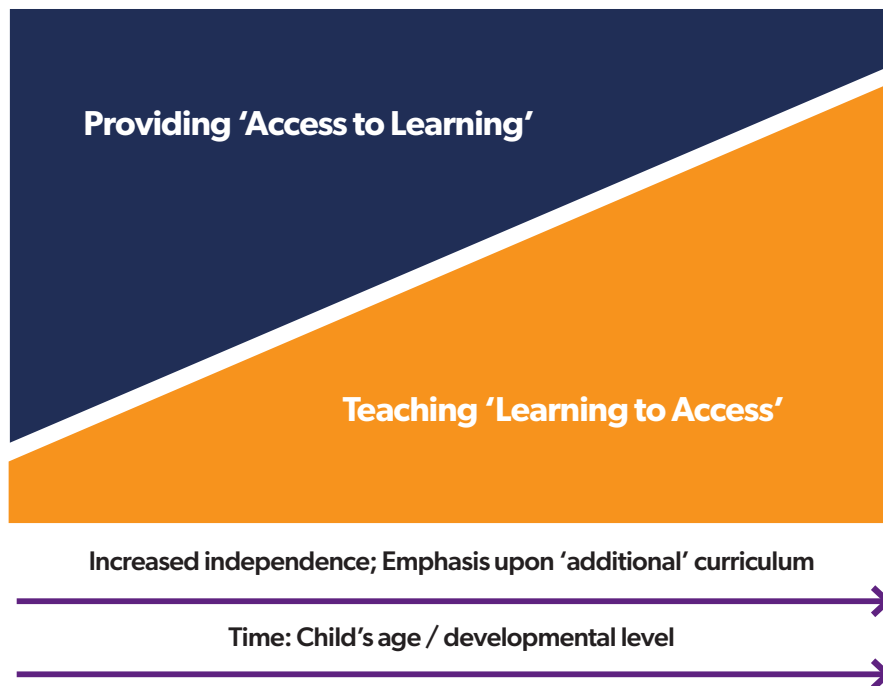
Following diagnosis all new referrals from parents/carers, settings/schools, health and other professionals will receive an initial assessment from LINT-HI to include:

- Assessment of functional hearing, including observations, by a Qualified Teacher of the Deaf (QToD)
- Information from school/setting
- Information from Health/other agencies
- Information from parent/carers
- Information from the CYP

The assessment will be aligned to the NatSIP Eligibility Criteria, which will:

- Enable the service to provide an equitable allocation of resources.
- Provide a means of identifying the levels of intervention required.
- Identify the frequency of assessments by LINT-HI.

All CYP who meet the criteria as having a hearing impairment receive an eligibility banding following every annual assessment (or last assessment if receiving an E Eligibility Criteria banding) which determines the Threshold they access. These are not fixed over time but reflect the changing needs of the CYP, their family, key professionals and settings in line with the 'access to learning-learning to access' model adopted by LINT-HI to include CYP with a hearing impairment as shown on the next page:



McLinden et al, 2021; McLinden et al, 2016; Douglas et al, 2019

Provision is determined by good practice by working alongside the school curriculum, the individual needs of the CYP and the Leeds Peri Curriculum where appropriate. A tailored provision is provided for CYP with hearing impairment to ensure CYP develop the broad range of skills they need to learn and then live as independently as possible whilst having the appropriate adjustments and support in place to enable access.

Over time the emphasis shifts from support being provided directly to the CYP ('access to learning'), to their acquisition of specialist skills to promote greater independence over time ('learning to access'). A balance of provision needs to be determined via the Threshold to ensure inclusive practice for CYP with a hearing impairment (through promoting access to learning approaches) whilst ensuring that individuals are provided with the necessary skills and opportunities to become as independent as possible (through targeted specialist teaching to access approaches).

The offer for CYP with a hearing impairment is designed to ensure that intervention continues to be delivered on the basis of individual need and in accordance with local, regional and/or national policy and practice.

Note from NHS:

Thresholds 1-2: A NHS Speech & Language Therapist may see children at any range due to an open referral system which may include assessment, advice & monitoring or direct intervention.

Speech & Language Therapy intervention will be based on communication needs and not necessarily on diagnosed hearing loss or medical condition.

Thresholds 3-6:

A NHS Speech & Language Therapist may see children at any range due to an open referral system which may include assessment, advice & monitoring or direct intervention.

Speech & Language Therapy intervention will be based on communication needs and not necessarily on diagnosed hearing loss or medical condition.

The Speech & Language Therapist for Deaf Children and Young People works as an integrated part of the Low Incidence Needs Team (as per Service Level Agreement) with level of input assessed on a case-by-case basis.

Hearing Impairment Needs Guidance

Threshold Descriptors Overview

<p>Threshold 1</p> <p>(Eligibility Criteria E)</p> <p>The CYP 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 CYP does not require any active involvement or further assessments from LINT-HI. The CYP 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 CYP’s LINT-HI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related specialist curriculum Areas. • The CYP either does not require or requires minimal LINT-HI liaison with multi-agencies. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching Deaf Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching Deaf Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-HI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-HI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP 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 CYP 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 CYP does not require any active intervention based on the specialist curriculum from LINT-HI following assessment and provision of strategies. The CYP remains on caseload and LINT-HI provides an annual assessment including a monitoring visit with updated strategies (as appropriate). • The CYP’s LINT-HI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related specialist curriculum Areas. • The CYP requires minimal LINT-HI liaison with multi-agencies as they need the LINT-HI annual assessment shared as appropriate. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching Deaf Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching Deaf Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-HI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-HI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP based on information shared to date by LINT-HI which have been cascaded to relevant staff on a yearly basis in line with transitions.

<p>Threshold 3</p> <p>(Eligibility Criteria C)</p> <p>The child 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.</p>	<ul style="list-style-type: none"> • The CYP remains on caseload and LINT-HI provides a short-term block from one Area of the specialist curriculum (up to 6 visits). • The CYP 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 CYP requires minimal or short-term LINT-HI liaison with multi-agencies. • The CYP 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. 	<ul style="list-style-type: none"> • The CYP 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 CYP’s family require additional time-limited advice and guidance to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP’s educators require additional time-limited advice and guidance to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP require timely LINT-HI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the CYP in addition to LINT reports and strategies i.e., during the autumn term when the CYP has transitioned.
<p>Threshold 4</p> <p>(Eligibility Criteria B)</p> <p>The child meets criteria for hearing impairment with assessed need identifying significant adaptations are required. The child will require formal ongoing intervention from LINT to be as independent as possible.</p>	<ul style="list-style-type: none"> • The CYP 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 CYP 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 CYP’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 CYP may need a medium level of intervention to successfully transition between different settings. • The CYP requires a low/medium level of LINT-HI liaison with multi-agencies. • The CYP requires LINT-HI to provide advice, guidance and direct 	<p>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.</p> <ul style="list-style-type: none"> • The CYP 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 CYP’s family requires frequent communication (minimal of half-termly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP’s educators require frequent communication (minimal of half-termly) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies.

<p>Threshold 5</p> <p>(Eligibility Criteria A)</p> <p>The CYP 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>	<ul style="list-style-type: none"> • The CYP 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 CYP requires specialist teaching in at least 4 areas from the HI specialist curriculum. At least one of these will include Communication. • The CYP'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 CYP may need a high level of intervention to successfully transition between different settings. • The CYP requires a medium/high level of LINT-HI liaison with multi-agencies. 	<ul style="list-style-type: none"> • The CYP 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 CYP's family requires frequent communication (minimal of fortnightly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require frequent communication (at least twice a week) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies.
<p>Threshold 6</p> <p>(Eligibility Criteria A*)</p> <p>The CYP meets criteria for hearing impairment with assessed need identifying a child 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.</p>	<ul style="list-style-type: none"> • The CYP 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 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 following assessment and provision of strategies. • The CYP has been assessed by and/or is known to a Speech & Language Therapist for Deaf Children and Young People. • The CYP will need a high level of intervention to successfully transition between different settings. • The CYP requires a high level of LINT-HI liaison with multi-agencies. 	<ul style="list-style-type: none"> • The CYP 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 CYP's family requires frequent communication (minimal of weekly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require frequent communication (daily as applicable) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies with LINT-HI liaison meetings occurring either weekly or fortnightly.

Threshold 1 - Sensory Impairment: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets criteria for hearing impairment with assessed needs being met through Quality First Teaching strategies and any previous strategies/ aids are in place.</p> <p>Eligibility Criteria for HI equivalent is E.</p> <p>CYPs within Threshold 1 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP does not require any active involvement or further assessments from LINT-HI. The CYP 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 CYP'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 CYP 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 school must ensure that all staff are aware that the CYP will be experiencing barriers caused by hearing impairment and provide support to enable teachers to plan appropriately. • School takes 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 – CYP 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. • Provision of a range of multi-sensory tasks, ensuring that teaching styles are matched to the CYP's style of learning and support alternative ways of accessing and recording work. • Cue and reinforce the CYP's listening and attention. • Implement sensory rest breaks within the setting day, if advised by QTOD. • 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. • Speaker stays still when talking. 	<ul style="list-style-type: none"> • Appropriate resources made available from within school. • Some in-class support provided by school – especially during lessons where health and safety requires consideration. • School 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. • School considers timetabling and location of rooms for CYP and/ or appropriate workstation for 1:1 intervention. 	<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 CYP'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. • School will ensure the CYP 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 CYP to support emotional and mental wellbeing.

Threshold 1 - Sensory Impairment: Hearing *continued*

CYP'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 CYP is safe. • Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCO (with parental permission). • The school 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"> • Support for inclusion with extra-curricular activities, homework and newsletters. • Encourage social interaction through sensitive seating arrangements, provision of a buddy and fully including the CYP in the wider setting life including in the playground and at busier times of the day i.e., trips, setting council etc. • Say the CYP's name first to gain their attention. • Describe events that are going on around them if required. • Use facial expressions and/or body language to emphasise key language. • Provide opportunities to take responsibility for helpful tasks in a range of settings. • Provide a 'can do' environment where the CYP can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the CYP and develop their self-advocacy skills. • Ensure balance between intervention and independence is understood by all professionals. 	<ul style="list-style-type: none"> • School 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"> • 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: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP 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.</p> <p>CYPs within Threshold 2 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP does not require any active intervention LINT-HI following assessment and provision of strategies. The CYP remains on caseload and LINT-HI provides an annual assessment with updated strategies (as appropriate).</p>	<p>Assessment</p> <p>Annual assessment (the frequency of which is determined by the CYP'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, CYP Passport (Y6-Y11) a LINT-HI Poster 'Helping Pupils with a Hearing Impairment in Your Class' and links shared within Report to conditions. Auxiliary aids are suitably removing barriers to access. The CYP 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 school 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. School will facilitate monitoring and assessment visit from LINT-HI. The setting must ensure that all staff are aware that the CYP will be experiencing barriers caused by a hearing impairment and provide support to enable teachers to plan appropriately. School takes on CAF Lead practitioner role. Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCO (with parental permission). The school takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within school. Some in-class support provided by school – especially in lessons where health and safety require consideration. School 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. School considers timetabling and location of rooms for the CYP and/or appropriate workstation for 1:1 intervention. School 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: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP 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.</p> <p>Eligibility Criteria for HI equivalent is C.</p> <p>CYP within Threshold 3 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP remains on caseload and LINT-HI provides an annual assessment with updated strategies as appropriate.</p> <p>Specialist Teaching Areas: The CYP 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>LINT-HI Annual 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 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, CYP Passport (Y6-Y11) a LINT-HI Poster 'Helping Pupils with a Hearing Impairment in Your Class' and links shared within Report to 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 CYP and themselves in understanding the impact of the hearing impairment and promote independent use of auxiliary aids. School 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. School takes on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCO (with parental permission). The school takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. Educators identify times within the day to deliver training programmes as appropriate. 	<p>As Thresholds 1 and 2 plus:</p> <ul style="list-style-type: none"> Clear classroom 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 access to curriculum. Ensure the learning environment is responsive. New vocabulary is introduced in context and is meaningful i.e., from the CYP's perspective. Use natural rhythm, intonation, stress and lip movements. Apply LINT strategies to utilise a radio aid if one has been supplied to the setting. Seating position of CYP will be considered to ensure access to teacher and peers. Opportunities are sought within PSHE to discuss HI and role models within society. Behaviour management systems motivate the CYP and set clear expectations. 	<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 CYP to raise awareness of HI impairment and strategies to reduce barriers to learning and ensures all relevant staff attend.

Threshold 4 - Sensory Impairment: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for hearing impairment with assessed need identifying significant adaptations are required. The CYP will require formal ongoing intervention from LINT to be as independent as possible.</p> <p>Eligibility Criteria for HI equivalent is B.</p> <p>CYPs within Threshold 4 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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>Specialist Teaching Areas: The CYP requires active intervention based on an annual block from the specialist curriculum provided by LINT-HI following assessment and provision of strategies.</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 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, CYP Passport (Y6-Y11) a LINT-HI Poster 'Helping Pupils with a Hearing Impairment in Your Class' and links shared within Report to 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 CYP's specialist intervention to ensure that all learning, social and assessment activities are accessible (i.e., that all CYPs with hearing impairment are provided with access to learning) 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. CYPs relying on signing will need additional differentiation to take into account pace of learning. School 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 scaffolding the CYP'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 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 appropriate which is embedded within the day. School supports the provision of special examination arrangements and allows CYPs 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 CYPs 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 CYP 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 the CYP 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*

CYP'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"> 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 CYP in addition to LINT reports and strategies e.g., during the autumn term when a CYP has transitioned into a new class. An environmental assessment may be necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> School manages SEND support and engages in joint planning with LINT-HI, family, the CYP and other agencies. Common targets are distributed to all educators and reviewed regularly. Schools take on CAF Lead Practitioner role. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCo. The school takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. 	<ul style="list-style-type: none"> A suitable communication partner who creates opportunities for communication. Match the pace of interaction to the CYP's needs. Suitable peers and adults facilitating interaction in less structured environments e.g., playground. Direct teaching of emotional literacy; how emotions appear (applying multi-sensory approach) across a range of people/occasions. Share experiences and have discussions on how other people are feeling. 	<ul style="list-style-type: none"> Advice to access leisure and sports clubs outside setting. Settings support involvement of other agencies e.g., NDCS. Assess and deliver discreet teaching relevant to the CYP which will be generalised and used within the day. Specialist curriculum is running alongside school 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. QToD works with setting to facilitate interaction and communication with other CYPs with HI within or external of setting. 	

Threshold 4 - Sensory Impairment: Hearing *continued*

CYP'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"> • The CYP 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 (minimal of half-termly) to ensure that there are knowledgeable and empowered educators around the CYP. • Outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the CYP to learn to access. • School provides time 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. 			

Threshold 5 - Sensory Impairment: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for hearing impairment with assessed need identifying a CYP requiring access to a specialist curriculum with multi-sensory resources to teach curriculum subjects.</p> <p>Eligibility Criteria for HI equivalent is A.</p> <p>CYPs within Threshold 5 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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>Specialist Teaching Areas: The CYP requires active and ongoing intervention based on the specialist curriculum from LINT-HI following assessment and provision of strategies.</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 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, CYP Passport (Y6-Y11) a LINT-HI Poster 'Helping Pupils with a Hearing Impairment in Your Class' and links shared within Report to conditions. • The CYP is known to and has been assessed by and/or known to a Speech & Language Therapist for Deaf Children and Young People. • A 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 CYP to successfully transition between different classrooms and into secondary provision. • Advice, guidance and direct support (minimum of 10 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. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> • School 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 are used. • Materials are presented slowly and clearly to the CYP, 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/SLM identified as key individual to support the CYP's emotional and mental wellbeing. • Timetable adjustments to accommodate specialist interventions and sensory breaks • QToD supports educators in developing CYP's personal understanding of their hearing impairment and developing their confidence and independence. • 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 offered to school around creating a Deaf Friendly school with CPD offer extended to whole school as appropriate. • School has regular liaison with QToD to support the CYP 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 school' clubs.

Threshold 5 - Sensory Impairment: Hearing *continued*

CYP'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"> • 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 CYP in addition to LINT reports and strategies e.g., during the autumn term when a CYP has transitioned into a new classroom or secondary provision. • An environmental assessment may be necessary to assess accessibility of setting environment. <p>Planning</p> <ul style="list-style-type: none"> • School manages SEND support and engages in joint planning with LINT-HI, family, the CYP 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 CYP 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 CYP. • Settings take on CAF Lead practitioner role. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. • Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCo. 	<ul style="list-style-type: none"> • Embrace communication between the CYP 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 SEAL/PSHE programme is adapted to reflect the unique needs of the CYP. • Provide structured games during less formal times of the day. • The CYP may require a Total Communication Approach. 	<ul style="list-style-type: none"> • Time away from main cohort of CYPs 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 CYP 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 CYP 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 CYP's curriculum offer within setting with up to at least 5 area to be embedded within setting and home environment. 	

Threshold 5 - Sensory Impairment: Hearing *continued*

CYP'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"> • The school takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. • All outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the CYP to learn to access. • School 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. • School engages in joint planning/target setting. • 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 CYP. • Educators work with LINT-HI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-HI to identify when the CYP accesses their specialist interventions with adaptations to the school'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. 		<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 CYPs with a HI within or external of setting. 	

Threshold 6 - Sensory Impairment: Hearing

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets criteria for hearing impairment with assessed need identifying a CYP 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.</p> <p>Eligibility Criteria for HI equivalent is A*.</p> <p>CYPs within Threshold 6 require the following from the HI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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. 	<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/AAC. A high level of scaffolding is required throughout the day in order enable the CYP to engage and socialise with their peers and adults. 	<ul style="list-style-type: none"> The CYP has full-time support provided by a LINT Specialist Sensory Teaching Assistant (SSTA). 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 identified as key individual to support the CYP's emotional and mental wellbeing. LINT-HI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the CYP is seamless between the setting's curriculum and the specialist curriculum. QToD supports educators in developing CYP's personal understanding of their hearing impairment and developing their confidence and independence. Educators directly plan with LINT-HI to ensure that specialist skills are practised and consolidated. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to school around creating a Deaf Friendly setting with CPD offer extended to whole school as appropriate.

Threshold 6 - Sensory Impairment: Hearing *continued*

CYP'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"> 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 CYP in addition to LINT reports and strategies i.e., during the autumn term when a CYP has transitioned to another classroom. <p>Planning</p> <ul style="list-style-type: none"> School 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 CYP 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) to ensure that there are knowledgeable and empowered educators around the CYP. All outcomes from EHCP reflect the specialist curriculum 'above and additional to' interventions for the CYP to learn to access. School works closely with QToD to create a bespoke education offer to meet unique needs based on setting curriculum and LINT specialist curriculum. 		<ul style="list-style-type: none"> Time away from main cohort of CYPs 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 CYP 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 support access to 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 CYP 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 CYP's curriculum offer, embedded within school and home. 	

Threshold 6 - Sensory Impairment: Hearing *continued*

CYP'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-HI across the curriculum. • The school takes responsibility for the organisation of access arrangements for statutory assessments based on the last Assessment Report. • Educators and LINT-HI 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 QToD. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. • Educators facilitate working between themselves, the family, LINT-HI and Specialist SaLT to identify appropriate use of communication methods e.g., BSL/SSE/AAC. 		<ul style="list-style-type: none"> • 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 CYPs with a HI within or external of setting. 	

Hearing Impairment: PFA Outcomes and Provision

Reception to Y2 (5-7 years)

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Child is able to cooperate with maintenance of hearing aids/BAHA/Cochlear implant and assistive listening devices.</p> <p>N.B. for some children with a profound/severe hearing loss they will require signed support from LINT-HI.</p> <p>Child is able to sit appropriately within a good seating position to allow them access to spoken voice.</p>	<p>Child is able to co-operate with self-care routines, including removal of listening devices, cleaning of devices and where appropriate changing batteries.</p> <p>Child is able to remove and insert listening devices into their own ear/on own head.</p>	<p>Child is able to participate in team games, after-school clubs, and weekend activities and communicate with familiar, unfamiliar adults and peers.</p> <p>N.B. for some children with a profound/severe hearing loss they will require signed support from LINT-HI/PA.</p> <p>Child is able to engage in conversation and interactions with peers and familiar adults and begin to resolve conflict when it may occur.</p>	<p>Child is able to attend regular audiology/ENT to support good access to sound.</p> <p>Child is able to keep equipment in good condition, with regular updates shared with LINT-HI to ensure assistive listening devices will be applicable to the equipment given to the child.</p> <p>Child is able to attend SALT sessions if appropriate.</p> <p>Child is able to begin to have an understand of own deaf identity, how they feel in different situations and begin to develop resilience to overcome difficult situations.</p> <p>Child is able to identify their own feelings and emotions and share them with a familiar adult.</p> <p>Child is able to read body language, facial expressions and behaviour of others to read if they are feeling a range of emotions.</p> <p>Child is able to make a decision and give a reason of why an impact behind this decision to a familiar adult.</p>

Pfa Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Child is able to access careers information, opportunities to meet role models/talks from visitors to school through good seating position, good acoustics, use of assistive listening device where appropriate.</p> <p>N.B. for some children with a profound/severe hearing loss they will require signed support from LINT.</p> <p>Child is able to take ownership with maintenance of hearing aids/BAHA/Cochlear implant and assistive listening devices, ensure charged and appropriate batteries are carried with them or stored appropriately in school.</p>	<p>Child is able to co-operate with self-care routines, including removal of listening devices, cleaning of devices and where appropriate changing batteries.</p> <p>Child is able to remove and insert listening devices into their own ear/on own head and change batteries, alert an adult if they are having technical difficulties.</p> <p>Child is able to develop age-appropriate life skills including an awareness of transport and requirements for travel (tickets, timetables etc.), money in accordance with their hearing needs and is beginning to learn how to make adaptations to overcome barriers when they do not have access to sound e.g. unable to listen to a Tannoy announcement so may need to seek assistance from another person.</p>	<p>Child is able to participate in team games, after-school clubs, and weekend activities and communicate with familiar, unfamiliar adults and peers.</p> <p>N.B. for some children with a profound/severe hearing loss they will require signed support from LINT-HI/PA.</p> <p>Child is able to engage in conversation and interactions with peers and familiar adults and begin to resolve conflict when it may occur or seek support of an appropriate adult.</p>	<p>Child is able to attend regular audiology/ENT to support good access to sound.</p> <p>Child is able to keep equipment will in good condition, with regular updates shared with LINT-HI to ensure assistive listening devices will be applicable to the equipment given to the child.</p> <p>Child is able to attend SALT sessions if appropriate.</p> <p>Child is able to develop their understanding of their own deaf identity, how they feel in different situations and begin to develop resilience to overcome difficult situations. When they are unable to show resilience, they are able to access for support.</p> <p>Child is able to identify their own feelings and emotions and share them with a familiar adult.</p> <p>Child is able to read body language, facial expressions and behaviour of others to read if they are feeling a range of emotions and begin to respond appropriate to the emotions of others.</p> <p>Child is able to make a decision and give a reason of why an impact behind this decision to other.</p>

Hearing Impairment: PFA Outcomes and Provision

Y7 to Y11 (11-16 years)

PfA Outcomes and Provision

Employability/Education	Independence	Community Participation	Health
<p>CYP is able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and different equipment available to them to purchase through PIP.</p> <p>CYP is able to understand supported employment options e.g., Access to Work.</p> <p>CYP is able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.</p> <p>N.B. for some CYP with a profound/severe hearing loss they will require signed support from LINT-HI.</p>	<p>CYP is able to independently do daily self-care of equipment including removal of listening devices, cleaning of devices and where appropriate changing batteries. CYP can troubleshoot equipment faults as necessary.</p> <p>CYP is able to develop age-appropriate life skills including an awareness of transport and requirements for travel (tickets, timetables etc.), money in accordance with their hearing needs and can make adaptations to overcome barriers when they do not have access to sound e.g., unable to listen to a Tannoy announcement so may need to seek assistance from another person.</p>	<p>CYP is able to participate in games, after-school clubs, and weekend activities and communicate with familiar, unfamiliar adults and peers.</p> <p>N.B. for some CYP with a profound/severe hearing loss they will require signed support from LINT-HI/PA.</p> <p>CYP is able to engage in conversation and interactions with peers and both familiar and unfamiliar adults including resolving conflict when it may occur.</p>	<p>CYP is able to attend regular audiology/ENT to support good access to sound with increasing independence and take responsibility for making their own appointments where appropriate.</p> <p>CYP is able to keep equipment will be in good condition, with regular updates shared with LINT-HI to ensure assistive listening devices will be applicable to the equipment given to the CYP.</p> <p>CYP is able to attend SALT sessions if appropriate.</p> <p>CYP is able to demonstrate resilience to overcome difficult situations in relation to their own deaf identity.</p> <p>CYP is able to identify more complex feelings in relation to themselves and others.</p>

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

Multi-Sensory Impairment

Identification

If you have any concerns about a CYP with a hearing impairment's vision, please encourage the parents/carers to see a GP or go to an optician prior to referral to LINT ([Eye tests for children - NHS \(www.nhs.uk\)](https://www.nhs.uk)). If you have any concerns about a CYP with a vision impairment's hearing, ask parents/carers to talk to their doctor or health visitor about the CYP seeing an audiologist prior to referral to LINT ([Hearing tests for children - NHS \(www.nhs.uk\)](https://www.nhs.uk)).

A person is considered to have a multi-sensory impairment if they have an impairment in both their hearing and vision. The term multi-sensory impairment is used to cover a range of conditions and a range of levels of both vision and hearing i.e. a CYP with multi-sensory impairment may have a mild-moderate hearing impairment and a profound vision impairment. There is no direct correlation between multi-sensory impairment and cognitive ability. People with a multi-sensory impairment have the same range of intelligence and abilities as their peers.

Referral

Referrals are usually received following a second sensory medical diagnosis from Health in addition to the CYP already having either a vision or a hearing impairment (i.e., from Ophthalmology, Audiology, ENT, Health Visiting Teams, Paediatrics etc) however schools, settings and parent/carers, social care professionals, professionals from the 3rd sector or the young person themselves can also refer. Often the CYP is already known to LINT due to them having either a vision or hearing impairment. **CYP must meet the multi-sensory impairment referral criteria.** If you are not sure if a CYP meets the criteria, please contact the Low Incidence Needs Team prior to referral.

Universal offer

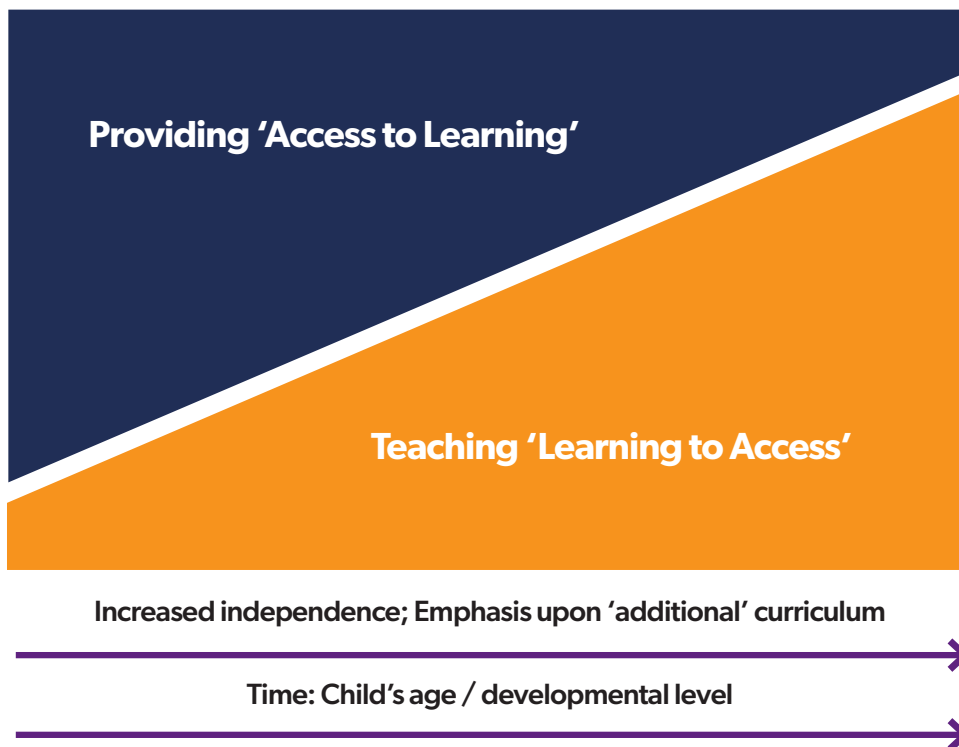
Following diagnosis all new referrals from parents/carers, settings/schools, health and other professionals will receive an initial assessment from LINT-MSI to include:

- Assessment of sensory functioning, including observations, by a Qualified Teacher of children and young people with Multi-Sensory Impairment (QTMSI) or a dual assessment from a Qualified Teacher of Vision Impairment and a Teacher of the Deaf
- Information from school/setting
- Information from Health/other agencies
- Information from parent/carer
- Information from the CYP

The assessment will be aligned to the NatSIP Eligibility Criteria, which will:

- Enable the service to provide an equitable allocation of resources.
- Provide a means of identifying the levels of intervention required.
- Identify the frequency of assessments by LINT-MSI.

All CYP who meet the criteria as having a multi-sensory impairment receive an eligibility banding following every annual assessment (or last assessment if receiving an E Eligibility Criteria banding) which determines the Threshold they access. These are not fixed over time but reflect the changing needs of the CYP, their family, key professionals and settings in line with the 'access to learning-learning to access' model adopted by LINT-MSI to include CYP with a multi-sensory impairment as shown on next page:



McLinden et al, 2021; McLinden et al, 2016; Douglas et al, 2019

Over time the emphasis shifts from support being provided directly to the CYP ('access to learning'), to their acquisition of specialist skills to promote greater independence over time ('learning to access'). A balance of provision needs to be determined via the Threshold to ensure inclusive practice for CYP with multi-sensory impairment (through prompting access to learning approaches), whilst ensuring that individuals are provided with the necessary skills and opportunities to become as independent as possible (through targeted specialist teaching to access approaches).

Provision is determined by the **Curriculum for Multi-Sensory Impaired Children** in conjunction with the **Curriculum Framework for Children and Young People with a Vision Impairment (CFVI)** to ensure CYP develop the broad range of skills they need to live as independently as possible whilst also having appropriate adjustments and support put in place to enable access. **Area 1** focusses on inclusion and inclusive practice to ensure physical and social environments are accessible for CYP with multi-sensory impairment (Facilitating an Inclusive World). **Areas 2-11** highlight the particular skills that they require to enable them to participate in education with increasing independence, learn how to carry out everyday activities, move around by themselves, and to feel fully included in their education setting (Curriculum Framework for Children and Young People with Vision Impairment (rnib.org.uk)).

The offer for CYP with multi-sensory impairment is designed to ensure that intervention continues to be delivered on the basis of individual need and in accordance with local, regional and/or national policy and practice.

Multi-Sensory Impairment Guidance

Threshold Descriptors Overview

<p>Threshold 1</p> <p>(Eligibility Criteria E)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child with one approach required to access information around them (i.e., print or symbols).</p>	<ul style="list-style-type: none"> • The CYP does not require any active involvement or further assessments from LINT-MSI. The CYP 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 CYP’s LINT-MSI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related specialist curriculum Areas. • The CYP either does not require or requires minimal LINT-MSI liaison with multi-agencies. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching MSI Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching MSI Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-MSI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-MSI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP 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.
<p>Threshold 2</p> <p>(Eligibility Criteria D)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child with one approach required to access information around them (i.e. print or symbols).</p>	<ul style="list-style-type: none"> • The CYP does not require any active intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies. The CYP remains on caseload and LINT-MSI provides an annual assessment including a monitoring visit with updated strategies (as appropriate). • The CYP’s LINT MSI Auxiliary Aid Assessment has identified no requirement for additional equipment or technology and therefore the CYP does not require access to related specialist curriculum Areas. • The CYP requires minimal LINT-MSI liaison with multi-agencies after receiving the LINT-MSI Annual Assessment and strategies. • The CYP’s learning environment is accessible (availability of accessible and appropriate learning materials in place) with appropriate Quality First Teaching MSI Friendly strategies. • The CYP’s social environment is accessible with appropriate Quality First Teaching MSI Friendly strategies. • The CYP has a knowledgeable and empowered family around them due to information shared by LINT-MSI. • The CYP has knowledgeable and empowered educators around them due to information shared by LINT-MSI. • All key persons involved with the CYP can identify, recognise, and understand the specific and holistic needs and rights of the CYP based on information shared to date by LINT-MSI which have been cascaded to relevant staff on a yearly basis in line with transitions.

<p>Threshold 3</p> <p>(Eligibility Criteria C)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child with one approach required to access information around them (i.e., modified and enlarged print or symbols).</p>	<ul style="list-style-type: none"> • The CYP remains on caseload and LINT-MSI provides a short-term block from one Area of the MSI specialist curriculum (up to 6 visits). • The CYP may need a low level of intervention to successfully transition between different settings. • The CYP'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 CYP requires minimal or short-term LINT-MSI liaison with multi-agencies. • The CYP 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. <ul style="list-style-type: none"> • The CYP 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 CYP's family require additional time-limited advice and guidance to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require additional time-limited advice and guidance to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP require timely LINT-MSI monitoring to ensure that they can identify, recognise, and understand the specific and holistic needs and rights of the CYP in addition to LINT reports and strategies i.e., during the autumn term when the CYP has transitioned.
<p>Threshold 4</p> <p>(Eligibility Criteria B)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child requiring at least two different approaches to access information around them (e.g., print and tactile).</p>	<ul style="list-style-type: none"> • The CYP 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 CYP 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 CYP'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 CYP may need a medium level of intervention to successfully transition between different settings. • The CYP requires a low/medium level of LINT-MSI liaison with multi-agencies. <ul style="list-style-type: none"> • The CYP 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 CYP 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 CYP's family requires frequent communication (minimal of half-termly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require frequent communication (minimal of half-termly) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies.

<p>Threshold 5</p> <p>(Eligibility Criteria A)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child requiring at least two different approaches to access information around them (e.g. print and tactile).</p>	<ul style="list-style-type: none"> • The CYP 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 CYP requires specialist teaching in at least 4 areas from the MSI specialist curriculum. • The CYP'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 CYP may need a high level of intervention to successfully transition between different settings. • The CYP requires a medium/high level of LINT-MSI liaison with multi-agencies. 	<ul style="list-style-type: none"> • The CYP 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 CYP's family requires frequent communication (minimal of fortnightly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require frequent communication (at least twice a week) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies.
<p>Threshold 6</p> <p>(Eligibility Criteria A*)</p> <p>The CYP meets criteria for multi-sensory impairment with assessed need identifying a child with auditory/tactile/signing approaches as their primary access to information around them.</p>	<ul style="list-style-type: none"> • The CYP 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 CYP 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 CYP receives training and assessment in the areas of Independent Living Skills and Orientation and Mobility from the LINT Paediatric Habilitation Specialist. • The CYP has been assessed by and/or is known to a Speech & Language Therapist for Deaf Children and Young People. • The CYP will need a high level of intervention to successfully transition between different settings. 	<ul style="list-style-type: none"> • The CYP requires a high level of LINT-MSI liaison with multi-agencies. • The CYP 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 CYP's family requires frequent communication (minimal of weekly) to ensure that the CYP has a knowledgeable and empowered family around them. • The CYP's educators require frequent communication (daily as applicable) to ensure that the CYP has knowledgeable and empowered educators around them. • All key persons involved with the CYP 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 CYP in addition to LINT reports and strategies.

Threshold 1 - Sensory Impairment: Multi-Sensory

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for MSI equivalent is E.</p> <p>CYPs within Threshold 1 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP does not require any active involvement or further assessments from LINT-MSI. The CYP 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 CYP'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 CYP 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"> • School must ensure that all staff are aware that the CYP will be experiencing barriers caused by combination of a vision and hearing impairment and provide support to enable teachers to plan appropriately. • School takes on CAF Lead Practitioner role where appropriate. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 	<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 for contact lens wearers (for CYPs 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. • Teacher verbalises work on the board (ensuring they are facing the CYP) and all written information within the classroom. • Consideration of seating position – CYP 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 CYP's style of learning and support alternative ways of accessing and recording work. • Implementation of sensory rest breaks within the school day. 	<ul style="list-style-type: none"> • Appropriate resources made available from within school. • Some in-class support provided by school – especially in lessons where health and safety require consideration. • School 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. • School considers timetabling and location of rooms for the CYP and/or appropriate workstation for 1:1 intervention. • School 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 CYP's needs (adaptations and curriculum delivery to facilitate access). • A designated member of school staff to monitor and manage the use of auxiliary aids e.g., CCTV, iPad, magnifiers. • Provision of consumables by school 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*

CYP'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 CYP to be disseminated to all staff by the SENDCO (with parental permission). • The school 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. • Referral is made to Vision & Hearing Support (if appropriate) when CYP reaches Y9 to access specialist support as part of transition into adult services. 	<ul style="list-style-type: none"> • Attention to speed of lesson delivery and speed of working. • Differentiated questioning and explicit language used to explain whole class responses. • School 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. • Teachers 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. • Teachers to ensure CYPs 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. • Teachers 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. 		<ul style="list-style-type: none"> • School will ensure the CYP 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 CYP to support emotional and mental wellbeing. • Known to Vision and Hearing Support (adult-based Gateshead service) if appropriate and from Year 9.

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

CYP'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"> • Provide additional transition visits for the CYP between classrooms/key stages. • Encouragement of social interaction through sensitive seating arrangements, provision of a mentor/ buddy and fully including the CYP in the wider school life. • Say the CYP'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. • Ensure any AAC are accessible e.g., symbols aren't laminated on shiny laminate. • Provide a 'can do' environment where the CYP can succeed and achieve. • Offer opportunities to take controlled risks in a safe environment. • Listen to the voice of the CYP 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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP with one approach required to access information around them (i.e., print or symbols).</p> <p>Eligibility Criteria for MSI equivalent is D.</p> <p>CYPs within Threshold 2 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP does not require any active intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies. The CYP 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 CYP'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, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. Auxiliary aids e.g., hand-held magnifiers are suitably removing barriers to access. The CYP 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"> School 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. School will facilitate monitoring and assessment visit from LINT-MSI. The school must ensure that all staff are aware that the CYP will be experiencing barriers caused by combination of a vision and hearing impairment and provide support to enable teachers to plan appropriately. School takes on CAF Lead Practitioner role where appropriate. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 	<p>As Threshold 1</p>	<ul style="list-style-type: none"> Appropriate resources made available from within school. Some in-class support provided by school – especially in lessons where health and safety require consideration. School 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. School considers timetabling and location of rooms for the CYP and/or appropriate workstation for 1:1 intervention. School 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: Multi-Sensory *continued*

CYP'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 CYP 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-MSI Assessment Report. • Referral is made to Vision & Hearing Support (if appropriate) when CYP reaches Y9 to access specialist support as part of transition into adult services. 			

Threshold 3 - Sensory Impairment: Multi-Sensory

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP 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>CYPs within Threshold 3 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP remains on caseload and LINT-MSI provides an annual assessment with updated strategies as appropriate.</p> <p>Areas 2-11: The CYP 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 CYP's Eligibility Criteria) has identified that:</p> <ul style="list-style-type: none"> The CYP requires a short-term block from one Area of the specialist curriculum (up to 6 visits) provided by LINT-MSI. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. 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 CYP and themselves in understanding the impact of the multi-sensory impairment and promote independent use of auxiliary aids. School 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. School takes on CAF Lead Practitioner where appropriate. A PEEP (Personal Emergency Evacuation Plan) to ensure the CYP is safe. 	<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 CYP'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 CYP 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 CYP and set clear expectations. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions. QTMSI supports educators in developing CYP'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 CYP 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*

CYP'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 CYP 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-MSI Assessment Report. • Educators identify times within the day to deliver training programmes as appropriate. • From Y9 onwards, communication between school, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the CYP and their families. • From Y9 onwards, communication between school, 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. 			

Threshold 4 - Sensory Impairment: Multi-Sensory

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP 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.</p> <p>CYPs within Threshold 4 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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 CYP requires active intervention based on an annual block 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 CYP's Eligibility Criteria) including a Learning Media Assessment if required has identified that:</p> <ul style="list-style-type: none"> The CYP requires block/s of intervention based on at least 2 Areas of the 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 school and home. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. 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 CYP'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 CYP in addition to LINT reports and strategies e.g., during the autumn term when a CYP has transitioned into a new year group. An environmental assessment may be necessary to assess accessibility of the school environment. 	<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. CYPs working with tactile learning resources will need additional differentiation to take into account pace of learning. School 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. 	<ul style="list-style-type: none"> Timetable adjustments to accommodate specialist interventions and rest breaks. QTMSI supports educators in developing CYP'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/communication training as appropriate which is embedded within the day. School supports the provision of special examination arrangements and allows CYPs 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. 	<p>As Thresholds 1 to 3 plus:</p> <ul style="list-style-type: none"> Specific resources such as 'Guide Dogs – Think Right, Feel Good' to promote well-being used alongside school resources. Peer awareness training. Bespoke training offered around creating a Multi-Sensory Impaired Friendly Classroom with CPD offer extended to whole school 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 school can support the CYP 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*

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<p>Planning</p> <ul style="list-style-type: none"> • School manages SEND support and engages in joint planning with LINT-MSI, family, the CYP and other agencies. Common targets are distributed to all educators and reviewed regularly. • School takes on CAF Lead practitioner role where appropriate. • A PEEP (Personal Emergency Evacuation Plan) to ensure the CYP is safe. • Risk assessments supplemented by LINT. • Relevant information and strategies relating to learning and access needs of the CYP to be disseminated to all staff by the SENDCO. • Communication between LINT-MSI and schools is frequent (minimal of half-termly) ensure that there are knowledgeable and empowered educators. • Outcomes from EHCP (if appropriate) reflect the specialist curriculum 'above and additional to' interventions for the CYP to learn to access. • The CYP can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • School 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. 	<ul style="list-style-type: none"> • Auditory clutter and less busy learning environments are now key to facilitate learning. • Provide repeated learning opportunities based on outcomes. • Bring learning opportunities to the CYP. • Link learning opportunities to support the generalisation of concepts. • Suitable peers and adults scaffolding the CYP's environment e.g., facilitate interaction with others. • A suitable communication partner who creates opportunities for communication. • Match the pace of interaction to the CYP's sensory needs. 	<ul style="list-style-type: none"> • Time away from main cohort of CYPs 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 CYP 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 school. • School supports involvement of other agencies e.g., SENSE. • Assess and deliver discreet teaching relevant to the CYP which will be generalised and used within the day. 	

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

CYP'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 facilitate working between themselves, the family, LINT-MSI and SaLT to identify appropriate use of communication methods e.g., AAC. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment report. • From Y9 onwards, co-ordination between school, LINT-MSI and Vision & hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for the CYP and their families. • From Y9 onwards, co-ordination between school, 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"> • Suitable peers and adults facilitating interaction in less structured environments e.g., during break times. • Direct teaching of emotional literacy; how emotions appear (applying multi-sensory approach) across a range of people/ occasions. • Share experiences and have discussions on how other people are feeling. • Use specific resources such as 'Think Right, Feel Good' to promote well-being used alongside school resources. 	<ul style="list-style-type: none"> • Specialist curriculum is running alongside school curriculum with up to at least 3 areas to be embedded within school and home environment. • Exam access arrangements may allow up to 50% additional time. • QTMSI works with school to facilitate interaction and communication with other CYPs with MSI within or external of school. 	

Threshold 5 - Sensory Impairment: Multi-Sensory

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP 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.</p> <p>CYP within Threshold 5 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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>Area 2-11: The CYP requires active and ongoing intervention based on the specialist curriculum from LINT-MSI following assessment and provision of strategies.</p>	<p>Assessment</p> <p>LINT-MSI Assessment (the frequency of which is determined by the CYP's Eligibility Criteria) including a Learning Media Assessment if required has identified that:</p> <ul style="list-style-type: none"> • The CYP requires specialist teaching at least 4 areas from the specialist curriculum. • LINT-MSI provides an Annual Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. • LINT-MSI provides an Annual Assessment Report or letter, Specialist Strategies, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. • The CYP is known to LINT's Paediatric Habilitation Specialist and Specialist SaLT and has been assessed using their criteria. • A 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 CYP to successfully transition between different rooms. • Advice, guidance and direct support (minimum of 10 hours per week) is required in line with the CYP'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 CYP in addition to LINT reports and strategies e.g. during the autumn term when a CYP has transitioned into a new year group. • An environmental assessment may be necessary to assess accessibility of the school environment. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> • School 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 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 CYP's emotional and mental wellbeing. • Timetable adjustments to accommodate specialist interventions and rest breaks. • QTMSI supports educators in developing CYP'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. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> • Bespoke training at a significant level to school offered around creating a Multi-Sensory Impaired Friendly school with CPD offer extended to whole school as appropriate. • School has regular liaison with QTMSI to support the CYP 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 school' clubs.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<p>Planning</p> <ul style="list-style-type: none"> • School manages SEND support and engages in joint planning with LINT-MSI, family, the CYP 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. • Communication between LINT-MSI and school is frequent (at least twice a week) to ensure that there are knowledgeable and empowered educators around the CYP. • School takes on CAF Lead Practitioner role where appropriate. • Relevant information and strategies relating to learning and access needs of the CYP 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 CYP to learn to access. • The CYP can contribute to their EHC Plan with additional adaptations and modifications recommended by QTMSI prior to meetings in line with LA SEND timescales. • The school 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 school and LINT-MSI. • School provides time within the week for direct specialist teaching from LINT-MSI. • School engages in joint planning/target setting. 	<ul style="list-style-type: none"> • People and items are presented slowly and clearly to the CYP in familiar, quiet environments. • Communication between the CYP and others in a variety of forms is used which can be high tech 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 Intensive Interaction. • The PSHE programme is adapted to reflect the unique needs of the CYP. • The CYP may require an intensive interaction approach. • The CYP may require a Total Communication Approach. • Use of personal identifiers. 	<ul style="list-style-type: none"> • Time away from main cohort of CYPs 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 CYP 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 school. • School works 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 CYP can fully access all curriculum areas. Personalised differentiation and adaptation to all areas of curriculum, with high levels of specialist teaching and support. 	

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

CYP'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 CYP. • Educators must work with LINT-MSI to facilitate assessment and planning across the curriculum. • Educators work closely with LINT-MSI to identify when the CYP accesses their specialist interventions with adaptations to the school's curriculum required. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. • Policies reflect reasonable adjustments and are written in collaboration with QTMSI. • A PEEP (Personal Emergency Evacuation Plan) to ensure the CYP 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. • From Y9 onwards, co-ordination between school, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for CYP and their families. • From Y9 onwards, co-ordination between school, 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"> • Specialist curriculum is merging within the CYP's curriculum offer within school with up to at least 5 areas to be embedded within school 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. • 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 school to facilitate interaction and communication with other CYPs with a MSI within or external of school. 	

Threshold 6 - Sensory Impairment: Multi-Sensory

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP meets the criteria for multi-sensory impairment with assessed need identifying a CYP with auditory/tactile approaches as their primary access to information around them.</p> <p>Eligibility Criteria for VI equivalent is A*.</p> <p>CYPs within Threshold 6 require the following from the MSI specialist curriculum:</p> <p>Facilitating an Inclusive World: The CYP 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>Area 2-11: The CYP 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>Assessment</p> <p>LINT-MSI Assessment (the frequency of which is determined by the CYP's Eligibility Criteria) including a Learning Media Assessment if required 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 Area 1 (Area/s to be determined by QTMSI) which are expected to take at least a year to embed across school and home. LINT-MSI provides an Annual Assessment Report, Specialist Strategies, CYP Passport (Y6-Y11) and links shared within Report to visual and auditory conditions. 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 CYP to successfully transition between different rooms. 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 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 CYP in addition to LINT reports and strategies i.e., during the autumn term when a CYP has transitioned to another year group. 	<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 CYP 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 CYP to engage and socialise with their peers and adults. 	<ul style="list-style-type: none"> The CYP 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 CYP's emotional and mental wellbeing. LINT-MSI will provide specialist skills training, intensive levels of support, modelling and coaching. The curriculum offer for the CYP is seamless between the school's curriculum and the specialist curriculum. QTMSI supports educators in developing CYP'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. 	<p>As Thresholds 1 to 5 plus:</p> <ul style="list-style-type: none"> Bespoke training at a significant level offered to the school around creating a Multi-Sensory Impaired Friendly school with CPD offer extended to whole school as appropriate.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
	<p>Planning</p> <ul style="list-style-type: none"> • School and QTMSI work very closely to identify, assess and meet EHCP outcomes. QTMSI ensures that specialist planning based on the MSI specialist curriculum is shared with all key educators including parents/carers and other agencies as appropriate. • The CYP 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 school is frequent (daily) to ensure that there are knowledgeable and empowered educators around the CYP. • All outcomes from EHCP reflect the specialist curriculum 'above and additional to' interventions for the CYP to learn to access. • School works closely with QTMSI to create a bespoke education offer to meet unique needs based on school curriculum and LINT specialist curriculum. • Assessment and monitoring will be bespoke between school 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. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-MSI Assessment Report. 		<ul style="list-style-type: none"> • Time away from main cohort of CYPs 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 CYP 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 school. • School works 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 CYP 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: Multi-Sensory *continued*

CYP'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 CYP is safe. • 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 school, LINT-MSI and Vision & Hearing Support (if appropriate) is required to provide successful Careers Advice and Guidance for CYPs and their families. • From Year 9, precise planning between educators, the CYP, their family, LINT-MSI and Vision & Hearing Support (if appropriate) is required to enable 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"> • The specialist curriculum is seamless within the CYP's curriculum offer within school with up to at least 7 areas to be embedded within school 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. • 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 school to facilitate interaction and communication with other CYPs with a MSI within or external of school. 	

Multi-Sensory Impairment: Pfa Outcomes and Provision

Reception to Y2 (5-7 years)

Pfa Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Child is able to recognise familiar sensory information and seek further information if necessary.</p> <p>Child is able to successfully engage in their learning environment with activities, materials, toys and equipment modified and adapted to meet their MSI needs as appropriate.</p> <p>Child is able to cooperate with maintenance of low- and high-tech auxiliary aids.</p> <p>Child is able to at least demonstrate the basic functions of any high-tech auxiliary aids.</p> <p>Child is able to sit appropriately within a good seating position.</p>	<p>Child is able to orientate themselves in very familiar environments and shows awareness of particular parts and/or boundaries of environment.</p> <p>Child is able to understand that other people have similar/different body parts and senses.</p> <p>Child is able to co-operate with self-care routines, including removal of listening devices, cleaning of devices and where appropriate changing batteries.</p> <p>Child is able to demonstrate basic personal hygiene and can dress using some fastenings.</p> <p>Child is able to use at least a spoon and demonstrate some basic cutting skills.</p> <p>Child is able to identify body planes (through touch, imitation, or functional use).</p> <p>Child is able to begin to understand and functionally use any mobility aids to explore their environment.</p> <p>Child is able to develop an awareness of pre-cane and sighted guide techniques if required.</p>	<p>Child is able to respond in small group situations and is beginning to understand social codes of behaviour such as sharing.</p> <p>Child is able to sustain extended interactions with trusted adults who know them well, although the adult may need to structure the interaction and repair breakdowns.</p> <p>Child is able to access a variety of community-based activities/clubs/groups, with adult support to facilitate shared play and interaction.</p> <p>Child is able to begin to identify common shops and venues using accessible cues in familiar environments.</p> <p>Child is able to wait their turn and feel confident that their needs will be met.</p>	<p>Child is able to attend regular medical, optical and visual checks to support good health with an adult.</p> <p>Child is able to attend SALT sessions if appropriate with an adult.</p> <p>Child is able to check and maintain hearing and/or visual aids by sharing responsibility with staff and carrying out some of the actions themselves.</p> <p>Child is able to begin to have an understanding of their own identity as a child with MSI and begin to develop resilience to overcome difficult situations.</p> <p>Child is able to begin to identify their strengths.</p> <p>Child is able to identify some basic feelings and share them with a familiar adult.</p> <p>Child is able to begin to understand the social and health benefits of participation in sports and fitness activities.</p> <p>Child is able to confidently explore and eat new tastes and textures.</p>

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>Child is able to work in partnership with adults to complete familiar activities independently and/or indicate when help is needed.</p> <p>Child is able to work with familiar keyworkers to complete new activities or work in unfamiliar contexts.</p> <p>Child is able to transfer familiar skills to new situations with support.</p> <p>Child is able to work successfully on a new activity, in a new environment or with an unfamiliar person provided only one or two of these changes occur at a time.</p> <p>Child is able to take ownership of maintaining their auxiliary aids.</p> <p>Child is able to at least begin to choose suitable approaches (or combinations of approaches) to accessing and presenting information in different circumstances themselves.</p> <p>Child is able to utilise a range of suitable approaches to accessing and presenting information (e.g. tangible objects /objects of reference, print, speech, recordings, braille, tactile graphics).</p> <p>Child is able to feel that they can have an influence and impact on their world and on the decisions that are made regarding their education and life.</p>	<p>Child is able to gradually take responsibility for developing and maintaining their own timetables, using prompts (such as a larger weekly timetable on the wall) if necessary.</p> <p>Child is able to use familiar environments confidently and competently.</p> <p>Child is able to apply independent mobility techniques when functional contexts are used e.g., taking a message to a different class.</p> <p>Child is able to generally accept changes in routine if given appropriate explanations.</p> <p>Child is able to understand and explain the similarities/ differences of people’s body parts and senses and understands how different disabilities can affect them.</p> <p>Child is able to begin to become more aware of time passing by using appropriate support systems (such as egg timers and later kitchen timers).</p> <p>Child is able participate independently in most self-care routines.</p> <p>Child is able to use cutlery and demonstrate basic food preparation skills i.e. pouring.</p> <p>Child is able to begin to develop their skills in the safe use of kitchen appliances and specialist technology, such as talking scales and liquid level indicators.</p> <p>Child is able to begin to make simple cash purchases using the exact amount or expect change and/or make a card purchase (i.e., GoHenry 6+, debit, chip/pin, contactless, pre-loaded, gift card) with adult support.</p>	<p>Child is able to work co-operatively or reactively with adults on familiar activities.</p> <p>Child is able to regularly use an increasing range of environments including local community facilities (for example, local shops). Outings are prepared and reviewed in school, with pupils taking increasing responsibility for developing prompts and resources.</p> <p>Child is able to discuss events that happen at home as well as those in school.</p> <p>Child is able to participate in established group activities such as snack time and collective worship which are modified to encourage to encourage less structured interaction with adult support only if needed.</p> <p>Child is able to develop an awareness of social norms, knows the characteristics of a healthy personal relationship and has an awareness of non-verbal cues which may be missed.</p> <p>Child is able to understand it is okay to refuse assistance sometimes.</p>	<p>Child is able to attend regular audiology/ENT/ ophthalmology/optometrist appointments with an adult.</p> <p>Child is able to attend SALT sessions if appropriate with an adult.</p> <p>Child is able to increasingly take responsibility for day-to-day cleaning and maintenance of hearing aids, spectacles and low vision aids – for example, telling staff when their hearing aids need new batteries but with close monitoring of their performance in this area by staff to ensure that aids remain fully operational.</p> <p>Child is able to begin to have an understanding of their own identity as a child with MSI and begin to develop resilience to overcome difficult situations.</p> <p>Child is able to begin to identify their strengths.</p> <p>Child is able to identify their own feelings and emotions and share them with a familiar adult.</p> <p>Child is able to make a decision and give a reason of why an impact behind this decision to a familiar adult.</p> <p>Child is able to begin to understand the social and health benefits of participation in sports and fitness activities.</p> <p>Child is able to confidently explore and eat new tastes and textures.</p>

Hearing Impairment: PFA Outcomes and Provision

Y7 to Y11 (11-16 years)

PfA Outcomes and Provision

Employability/Education	Independence	Community Participation	Health
<p>CYP is able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.</p> <p>CYP is able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and access to appropriate equipment available to them.</p> <p>CYP is able to utilise specialist input into careers education, information and guidance, including supporting volunteering/work experience opportunities.</p> <p>CYP is able to develop skills to empower them to articulate their needs in different environments.</p> <p>CYP is able to choose specific approaches (or combinations of approaches) to information access in particular contexts (e.g., exam skills, in lessons and independent study).</p> <p>CYP is able to manage information e.g., file/folder management, organisational skills, editing/bookmarking, revision skills via using, recognising and managing the tools needed e.g., low vision devices.</p> <p>CYP is able to develop confidence in using technology e.g., mobile phones, apps (including specialist apps such as colour recognition tools), GPS and navigation apps (including transportation apps), social media and speech input software to complete a wider range of tasks.</p>	<p>CYP is able to demonstrate developing time management i.e., completing the tasks involved in getting ready to go home before the deadline of the transport arriving.</p> <p>CYP is able to independently do daily self-care of equipment including removal of listening devices, cleaning of devices and where appropriate changing batteries. CYP can troubleshoot equipment faults as necessary.</p> <p>CYP is able to practise independent mobility, using appropriate techniques in both indoor and outdoor settings.</p> <p>CYP is able to understand when and how to use a variety of pre-cane and sighted guide techniques to travel safely through familiar and increasingly unfamiliar environments if appropriate.</p> <p>CYP is able to make cash purchases using a variety/combination of coins and notes to make the exact amount, and/or identify how much change they should be given.</p> <p>CYP is able to develop technology skills for living such as online shopping, food identification, online banking and using technology to read print post.</p> <p>CYP is able to expand their skills in the safe use of kitchen appliances and specialist technology, such as talking scales and liquid level indicators.</p> <p>CYP is able to demonstrate a more complex understanding of the social skills around eating i.e., eating at a social occasion.</p>	<p>CYP is able to demonstrate confidence when interacting with others independently, beginning to make polite small talk (around weather, wellbeing, day-to-day etc.).</p> <p>CYP is beginning to feel confident with meeting up with friends in age-appropriate settings and keeping safe online.</p> <p>CYP is able to access a variety of community-based activities/clubs/groups with growing independence.</p> <p>CYP is able to make and maintain relationships (attachments, familial, peer and romantic), beginning to understand the interrelation with sex education as appropriate.</p> <p>CYP is able to safely access online communities.</p> <p>CYP is able to develop their ability to express own needs and make clear requests of members of the public and professionals (i.e., bus driver, shop assistant etc.).</p> <p>CYP is able to begin to explain and demonstrate how to provide sighted-guide assistance if appropriate.</p> <p>CYP is able to access travel services with additional support.</p>	<p>CYP is able to attend regular audiology/ENT/ophthalmology/optometrist appointments with increasing independence and take responsibility for making their own appointments where appropriate.</p> <p>CYP is able to attend SALT sessions if appropriate.</p> <p>CYP is able to begin to make their own balanced judgements on accessing specialist support, such as mentoring or counselling as appropriate.</p> <p>CYP is able to understand and explain the social and health benefits of participation in sports and fitness activities.</p> <p>CYP is able to understand and explain about personal safety, privacy and sexual consent.</p> <p>CYP is able to understand and can explain the characteristics of a healthy personal relationship.</p> <p>CYP is able to demonstrate an acceptance of multi-sensory impairment, establishing their own identity in relation to multi-sensory impairment including demonstrating resilience to overcome difficult situations in relation to this.</p> <p>CYP is able to identify more complex feelings in relation to themselves and others.</p>

Provision: Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Thresholds Guidance: Multi-Sensory Impairment.



Physical/Medical Needs (PMN)

Identification

Although lots of CYP can have illnesses and accidents which result in requiring short-term medical intervention, LINT-PMN provide intervention for CYP with physical and/or medical needs who mainly have long-term conditions which affect their physical development and/or health. Some CYP may require intervention for significant and acute PMN to reduce extended absences. PMN is used to cover a range of needs and conditions.

LINT do not always require a formal diagnosis before providing support to CYP. In cases where a CYP's medical condition is unclear, or where there is a difference of opinion, generic advice can be provided based on the available evidence. This would normally involve some form of medical evidence and LINT will consult with parents.

LINT – Physical and/or Medical Needs (PMN) support children and young people from 0 to 25 who have physical disabilities and/or complex medical needs. The CYP supported generally have complex, life-long conditions which affect their physical development and/or health. They may have associated learning difficulties.

Who can receive support

We can give advice and guidance for children and young people who have a physical and/or medical need impacting significantly on their gross or fine motor skills such as:

- birth trauma and prematurity
- chromosomal disorders significantly affecting physical development
- complex medical needs like cancer, severe epilepsy, chronic illness, or complex medical needs that affect physical function like cystic fibrosis
- musculoskeletal condition for example, juvenile idiopathic arthritis

- neurological impairments for example, cerebral palsy
- persistent symptoms affecting mobility and physical function although there is no diagnosis
- specific muscle impacting conditions for example, Duchenne muscular dystrophy and spinal muscular atrophy
- severe trauma from a road accident, spinal cord injury, or brain injury
- upper and lower limb differences.

Long-term medical need

Long-term and complex medical conditions may require ongoing support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences

There may be social and emotional implications associated with physical and/or medical conditions. CYP may be self-conscious about their condition, and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect CYP's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health.

Physical and environmental barriers may be identified and may need to be adapted (reasonable adjustments in line with the equality Act 2010) in order to access the curriculum alongside their peers.

[Supporting pupils at school with medical conditions \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

Referral

Referrals are usually received following medical diagnosis or identification of a physical need. Referrals can be made by parents/carers, schools/settings, Health (i.e. Health Visitor, Paediatrician, Physiotherapist etc), social care professionals, professionals from the 3rd sector or the young person themselves can also refer. **CYP must meet the PMN referral criteria.** If you are not sure if a CYP meets the criteria, please contact the Low Incidence Needs Team prior to referral.

Universal offer

All new referrals will receive an initial visit to include:

- Initial assessment, including observations, by a Specialist Teacher for PMN.
- Information from school/setting
- Information from Health/other agencies
- Information from parent/carer
- Information from the CYP

The assessment will be aligned to the **Gateshead Eligibility Criteria**, which will:

- Enable the service to provide an equitable allocation of resources.
- Provide a means of identifying the levels of intervention required.
- Identify the frequency of assessments by LINT-PMN.

All CYP who meet the criteria as having a physical and/or medical need receive an eligibility banding following every annual assessment (or last assessment if receiving an E Eligibility Criteria banding) which determines the Threshold they access. These are not fixed over time but reflect the changing needs of the CYP, their family, key professionals and settings in line with the 'access to learning-learning to access' model which underpins all specialist provision for CYP with a physical/medical need as bopposite:



Increased independence; Emphasis upon 'additional' curriculum

Time: Child's age / developmental level

McLinden et al, 2021; McLinden et al, 2016; Douglas et al, 2019

Over time the emphasis shifts from support being provided directly to the CYP ('access to learning'), to their acquisition of specialist skills to promote greater independence over time ('learning to access'). A balance of provision needs to be determined via the Threshold to ensure inclusive practice for CYP with PMN (through promoting access to learning approaches), with ensuring that individuals are provided with the necessary skills and opportunities to become as independent as possible (through targeted specialist teaching to access approaches).

The offer for CYP with PMN is designed to ensure that intervention continues to be delivered on the basis of individual need.

Physical and/or Medical Needs Guidance

Threshold Descriptors Overview

Threshold 1

(Eligibility Criteria E)

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

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

Threshold 2

(Eligibility Criteria D)

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

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

Threshold 3

(Eligibility Criteria C)

The CYP 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 child'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 CYP 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 CYP needs.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies i.e., during the autumn term when the CYP has transitioned.
- The CYP may need a low level of intervention to successfully transition between different settings.
- The CYP requires minimal or short-term LINT-PMN liaison with multi-agencies if involved.
- The CYP's family require additional time-limited advice and guidance to ensure that the CYP has a knowledgeable and empowered family around them in relation to their PMN.
- The CYP's educators require additional time-limited advice and guidance to ensure that the CYP has knowledgeable and empowered educators around them in relation to their PMN.
- The CYP 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 CYP has ongoing difficulties with continence/ toileting and other aspects of self-help and independence.
- The CYP requires assessment for equipment and resources.
- The CYP 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 CYP has increased dependence on seating to promote appropriate posture for fine motor activities/feeding.
- The CYP has increased dependence on mobility aids i.e., wheelchair or walking aid.
- The CYP has increased use of alternative methods for extended recording e.g., scribe, ICT etc.
- The CYP 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 CYP may require their school/setting to have moving and handling training.

Threshold 4

(Eligibility Criteria B)

The CYP 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 CYP 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 CYP 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 CYP requires a low/medium level of LINT-PMN liaison with multi-agencies (if involved).
- The CYP 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 CYP's family requires frequent communication (minimal of termly) to ensure that the CYP has a knowledgeable and empowered family around them in relation to PMN.
- The CYP's educators require frequent communication (minimal of half-termly) to ensure that the CYP has knowledgeable and empowered educators around them in relation to PMN.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies.
- The CYP may need a medium level of intervention to successfully transition between different settings.
- The CYP requires specialist equipment (medical/educational) that requires operational assistance.
- The CYP is not reaching age related expectations in all areas of the curriculum.
- The CYP requires assistance during lunchtimes i.e., help to move tray/feeding etc.
- The CYP 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 CYP needs some assistance with their personal care needs i.e., dressing/undressing, toileting, hygiene. and access to an appropriate accessible hygiene area.
- The CYP needs a therapist/therapy assistant to attend the school/setting to carry out an appropriate programme.
- The CYP 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 CYP's disability/condition affects their speech and has an impact on their verbal communication and ability to express views.
- The CYP 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 CYP requires assessment and/or provision of programme from Therapists (OT/Physiotherapy).
- The CYP requires assistance to participate in physical activities i.e., PE and requires a modified physical curriculum.
- The CYP experiences unstable health which impacts on their everyday life/ability to access curriculum.

Threshold 5

(Eligibility Criteria A)

The CYP 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 CYP 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 CYP 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 CYP requires a medium/high level of LINT-PMN liaison with multi-agencies (if involved).
- The CYP 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 CYP's family requires frequent communication (minimal of half-termly) to ensure that the CYP has a knowledgeable and empowered family around them in relation to PMN.
- The CYP's educators require frequent communication (minimal of fortnightly) to ensure that the CYP has knowledgeable and empowered educators around them in relation to PMN.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies.
- The CYP 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 CYP may need a planned programme of therapy/intervention.
- The CYP uses specialist equipment on a daily basis that requires operational assistance or preparation in order to access all areas of the curriculum.
- The CYP'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 CYP 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 CYP requires support at lunchtime.
- The CYP's setting needs significant adaptations to ensure that the CYP has full access to their learning environment.
- The CYP has regular/weekly/daily involvement with a therapist/health professional.
- The CYP may be an Augmentative Alternative Communication (AAC) user.
- The CYP may have a degenerative condition which impacts on independence.

Threshold 6

(Eligibility Criteria A*)

The CYP 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 CYP 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 CYP 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 CYP requires a high level of LINT-PMN liaison with multi-agencies (if involved).
- The CYP 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 CYP's family requires frequent communication (minimal of fortnightly) to ensure that the CYP has a knowledgeable and empowered family around them in relation to PMN.
- The CYP's educators require frequent communication (weekly) to ensure that the CYP has knowledgeable and empowered educators around them in relation to PMN.
- All key person/s involved with the CYP 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 CYP in addition to LINT reports and strategies.
- The CYP will need a high level of intervention to successfully transition between different settings.
- The CYP's medical needs demonstrates moderate risk to self or others i.e., petit-mal seizures/spasms.
- The CYP'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 CYP may require regular/daily/24-hour supervision/monitoring (continuing care due to intrusive procedures).
- The CYP requires regular/daily intervention from specialist nursing teams or health professionals.
- The CYP needs a skilled or familiar person to assist in communicating their expressive and receptive needs.
- The CYP's physical/medical needs directly affects their ability to communicate verbally and/or record work/ideas.
- The CYP uses specialist equipment/aids that require daily operational assistance or preparation.
- The CYP requires regular or daily intervention from therapists/health professionals.
- The CYP 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 CYP 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 CYP needs a specialist/differentiated physical curriculum.
- The CYP requires a daily or intensive therapy programme.
- The CYP has a medical/medication regime that requires adult assistance e.g., changing catheter, tube medication/feeding, epilepsy management etc.
- The CYP has a life threatening/limiting or degenerative condition.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP has a physical and/ or medical need with minimal impact on daily functioning. The CYP's needs can be met through Quality First Teaching.</p> <p>Eligibility Criteria for PMN is E (if the CYP has been assessed by LINT-PMN specialist teacher).</p> <p>The CYP can move around the environment with no additional aids and adaptations.</p> <p>The CYP requires no/minimal intervention from specialist nursing teams or health professionals (including therapists).</p> <p>The CYP does not need equipment which requires operational assistance.</p> <p>The CYP can manage their physical and personal care needs i.e., dressing, personal hygiene. ·</p> <p>NC Level Across expected range with an unusual profile showing relative strengths and weaknesses.</p>	<p>Assessment</p> <ul style="list-style-type: none"> • The learning environment is accessible and inclusive for a CYP with PMN including the use of any aids or adaptations. • The CYP 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 CYP does not require any active interventions following specialist assessment. <p>Planning</p> <ul style="list-style-type: none"> • The school must ensure that all staff are aware that the CYP is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. • Universal provision can meets need. • Usual curriculum planning including group or individual targets is required. • Trips out of the school 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. 	<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 – CYP positioned in optimal position to make entry and exit from the classroom as clear as possible. • Consider accessibility to the smartboard/ whiteboard i.e. that the CYP can physically interact with the board. • Provide a range of multi-sensory tasks, ensuring that teaching styles are matched to the CYP's style of learning and support alternative ways of accessing and recording work. • Cue and reinforce the CYP's listening and attention. • Implement fatigue rest breaks within the school day if appropriate. • Implement sensory breaks within the school day if appropriate. • Consider timetabling arrangements i.e., consider the CYP accessing physical activities earlier in the day. • Consider accessibility to learning materials in terms of height of resources, at eye level with CYP, 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 school i.e., P.E. and other physical activities. • School considers timetabling and location of rooms for the CYP for ease of access. • An educational occupational therapist may see the CYP 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 CYP to support emotional and mental wellbeing. • Supportive/correctly sized standard setting chair and table i.e., a chair and table surface that fit the CYP with feet supported and table at the correct height etc. • CYPs 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, 2:1 staffing ratio required for positional changes the CYP 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*

CYP'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 carried out by school if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP 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 CYP 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"> • 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 CYP between rooms. • Encourage social interaction through sensitive seating arrangements, provision of a mentor/buddy and fully include the CYP in the wider setting life including and at busier times of the day. • Provide opportunities to take responsibility for helpful tasks. • Provide of a 'can do' environment where the CYP 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 CYP and develop their self-advocacy skills. 		<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). • Vision and Hearing Support (adult-based Gateshead service) for appropriate CYPs identified by LINT from Year 9.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP has a physical and/or medical need with minimal impact on daily functioning. The CYP's needs can be met through Quality First Teaching as well as targeted strategies and school-led interventions.</p> <p>Eligibility Criteria for PMN is D (if the CYP has been assessed by LINT-PMN specialist teacher).</p> <p>The CYP can move around the environment independently with or without specialist equipment.</p> <p>The CYP requires no or minimal intervention from specialist nursing teams or health professionals (including therapists).</p> <p>The CYP may need specialist positional equipment, equipment for which the CYP requires operational assistance and/or wears orthotics such as PEDRO boots, splints, shoe inserts etc.</p> <p>The CYP can manage their physical and personal care needs i.e., dressing, personal hygiene.</p> <p>The CYP needs little or no supervision/ monitoring during physical activities.</p> <p>The CYP requires minimal support i.e., mild speech difficulties, use of sign/symbols, can communicate sufficiently to be able to express/ understand views.</p> <p>The CYP needs specialist equipment/aids that do not require operational assistance/ preparation.</p>	<p>Assessment</p> <ul style="list-style-type: none"> The learning environment is partially accessible and inclusive for a CYP with PMN and which will require some reasonable adjustments in relation to adaptations and specialist equipment. The CYP understands their PMN including barriers and strategies to overcome these as appropriate to age and stage of development. A referral may be required to school nurse to check hearing, sight or for possible medical condition. The CYP 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 CYP 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 and Specialist Strategies . <p>Planning</p> <ul style="list-style-type: none"> Usual curriculum planning including group or individual targets. The school must ensure that all staff are aware that the CYP is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. Risk assessments carried out by school if necessary with referral to Health & Safety if required. A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 	<p>As Threshold 1 plus:</p> <ul style="list-style-type: none"> Flexible use of resources and staffing available in the classroom to assist with recording work, accessing text, pre-teaching vocabulary, modifying teacher talk, modelling responses, focusing listening and attention. The school 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 P.E. and other 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 CYPs 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*

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>NC Level</p> <p>Across expected range with an unusual profile showing relative strengths and weaknesses.</p>	<ul style="list-style-type: none"> • 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 CYP 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. • Care plan in place, if appropriate, written in conjunction with specialist nurse/ school nurse and LINT-PMN (if involved). • CYP involved in monitoring and setting targets. • Part of continual school and class assessment • Monitoring of developmental goals in line with National Curriculum guidance. • SENDCO awareness if no progress apparent after targeted teaching approach. 			

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP has a physical and/or medical need that may impair their ability to participate in many aspects of school and social life/ leisure activities. The CYP'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>The CYP 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 CYP is making slow or little progress despite provision of targeted teaching approaches.</p> <p>The CYP has continuing difficulties with self-help and independence i.e., with continence/ toileting.</p> <p>The CYP is having ongoing difficulties with gross motor skills and coordination often seen in physical activities.</p> <p>The CYP may have medical condition that impacts on time in school and requires a medical care plan.</p>	<p>Assessment</p> <p>IF involvement from the PMN QT the PMN Assessment has identified that:</p> <ul style="list-style-type: none"> • The CYP requires a short-term block of intervention (up to 4 visits) to comply with health and safety legislation, e.g., to access learning in the classroom, for personal care needs. • The CYP 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 CYP 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 to regularly to support targets at home. • The school must ensure that all staff are aware that the CYP is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. • Risk assessments carried out by school if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. • An Emergency Health Care Plan and Emergency Call Sheet with all key information available is in place. 	<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 classroom routines. • Alternative ways of recording to minimise handwriting. • Groups and layouts of tables will need to be adjusted to ensure access for the CYP 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. • Behaviour management systems motivate the CYP and set clear expectations. 	<ul style="list-style-type: none"> • Quality First Teaching. • Some differentiation to P.E. and other physical activities. • Opportunities to practice dressing and undressing skills. • Access to appropriate ICT provision. • Main provision from class teacher or subject specialist with support from SENDCO. • Occasional input from additional adult to provide targeted support under the direction of teacher. • 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. • Physio may intervene with CYPs 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 the PMN QT:</p> <ul style="list-style-type: none"> • Training offered regarding the needs of the CYP 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 CYP.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP has increased dependence on seating to promote appropriate posture for fine motor activities/feeding.</p> <p>The CYP has increased dependence on mobility aids i.e., wheelchair or walking aid.</p> <p>The CYP 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"> • Relevant information and strategies relating to learning and access needs of the CYP 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. • Care plan in place, if appropriate, written in conjunction with specialist nurse/ school nurse and LINT-PMN (if involved). 			

Threshold 4 - Physical/Medical Needs (PMN)

CYP's Presentationn (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP 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 an appropriate multi-agency approach.</p> <p>Eligibility Criteria for PMN is B (if the CYP has been assessed by LINT PMN specialist teacher).</p> <p>The CYP requires specialist equipment (medical/educational) that requires operational assistance.</p> <p>The CYP is not reaching age related expectations in all areas of the curriculum.</p> <p>The CYP requires assistance during mealtimes i.e. help to move tray/feeding etc.</p> <p>The CYP requires aid/s such as rolator, sticks, to move around their environment.</p> <p>The CYP is more dependent on appropriate ICT for recording.</p> <p>The CYP needs some assistance with their personal care needs i.e., dressing/ undressing, toileting and hygiene.</p> <p>A therapist/therapy assistant attends the school to carry out an appropriate programme.</p>	<p>Assessment</p> <p>IF Involvement from the PMN QT the PMN Assessment has identified that:</p> <ul style="list-style-type: none"> • The CYP remains on active caseload and the PMN QT provides assessment determined by need i.e., progressive or fluctuating condition requiring more regular assessment with updated strategies and monitoring as appropriate. • The CYP requires block/s of intervention which are expected to take up to a year to embed across school and home and may include: <ul style="list-style-type: none"> - Minor adaptations to ensure full access to all areas of the school (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 school to support and identify general/specific PMN needs in their school. - A personal care and manual handling assessment in conjunction with the PMN Team, Occupational Therapy, Physiotherapy and Health Professionals - An environmental assessment regarding accessibility. <p>Planning</p> <ul style="list-style-type: none"> • Curriculum planning including group or individual targets differentiated as appropriate to the NC level. 	<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 would benefit the CYP. • Attention needed to position in classroom. • ICT equipment to aid recording. • Suitable peers and adults scaffolding the CYP's environment e.g., facilitating interaction with others. • Suitable peers and adults facilitating interaction in less structured environments e.g., on the playground. • 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 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 school staff with support from SENDCO and/or the PMN QT (if involved). • Flexible use of classroom support to access curriculum and develop skills in recording. • Furniture and equipment assessed jointly by the 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 school 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 MN QT:</p> <p>Bespoke training may be offered around creating a PMN Friendly Environment with CPD offer extended to whole setting as appropriate.</p>

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP 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 CYP 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 CYP is unable to or has difficulty in using verbal and/or signing to communicate.</p> <p>The CYP needs assistance to participate in physical activities and requires a modified access to these.</p> <p>The CYP'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"> • 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 CYP and other agencies. • Common targets are distributed to all educators and reviewed regularly. • CYP 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 (if involved), and health professionals/therapists. • Modified planning for outdoor activities is likely to be needed. • The school must ensure that all staff are aware that the CYP is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. • Risk assessments carried out by school if necessary with referral to Health & Safety if required. • A PEEP (Personal Emergency Evacuation Plan) is in place to ensure the CYP is safe. 			

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP has some of the necessary</p>	<ul style="list-style-type: none"> • 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 CYP 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. • Care plan in place, if appropriate, written in conjunction with specialist nurse/ school nurse and LINT-PMN (if involved). • Co-ordination between school, Health and LINT-PMN (if involved) is required to provide successful Careers Advice and Guidance for the CYP and their families. • Co-ordination between school, Health and LINT-PMN (if involved) 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)

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP 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>Health care inputs and therapies are intensive and on a regular basis i.e., weekly/daily.</p> <p>The CYP requires daily use of specialist equipment that require operational assistance or preparation in order to access all areas of the curriculum.</p> <p>The CYP requires support during mealtimes.</p> <p>The CYP may be an Augmentative Alternative Communication (AAC) user.</p> <p>The CYP may have a degenerative condition which impacts on independence.</p>	<p>Assessment</p> <p>IF involvement from the PMN QT the PMN Assessment has identified that:</p> <ul style="list-style-type: none"> The CYP remains on active caseload and the 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. The CYP requires specialist intervention throughout the year to embed across school 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 CYP may require an environmental assessment re accessibility. <p>Planning</p> <ul style="list-style-type: none"> SENDCO and the PMN Team (if involved) continually monitor and evaluate the need for the increased intensity of input from Speech and Language, Occupational Therapy, Physiotherapy as appropriate. CYP s can contribute to their EHC Plan and/or school targets. 	<p>As Thresholds 1 to 4 plus:</p> <ul style="list-style-type: none"> School 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 school. 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. Attention is given to persistent difficulties in mobility around the building. Accessibility of the whole school site, with facilities and practices that maintain the dignity of each CYP. 	<p>Specialist programmes are integrated within the day i.e., gross and fine motor, dressing and undressing, independent life skills.</p> <ul style="list-style-type: none"> 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 of P.E. and other physical activities. Delivery of physiotherapy programme/postural management by trained school staff. The curriculum is modified in some or all areas. Schools have regular liaison with the PMN QT (if involved) to support the CYP and themselves in understanding the impact of the PMN, promote independence and specialist equipment training. 	<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 school during all or the majority of tasks. School 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 in which therapies can be carried out with appropriate hoisting facilities, therapy bench, parallel bars, and height adjustable writing table, if appropriate. 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.

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

CYP'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"> • Communication between school and the PMN Team (if involved) is frequent to ensure there are knowledgeable and empowered educators around the CYP. • 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 school must ensure that all staff are aware that the CYP is experiencing barriers related to their PMN and provide support to enable teachers to plan appropriately. • Risk assessments carried out by school if necessary with referral to Health & Safety if required. 	<ul style="list-style-type: none"> • Some CYPs are likely to require specialist support in communication with peers with an emphasis on developing the CYP's independent use of ICT, recording skills and communication through AAC as appropriate. • Communication is embraced between the CYP and others. • Use support techniques to experiment with autonomy and curiosity. • The PSHE programme is adapted to reflect the unique needs of the CYP. 	<ul style="list-style-type: none"> • Interventions should be incorporated across all activities throughout the school day. 	<ul style="list-style-type: none"> • May need a rest area for periods where CYP 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. • School meets the need for high level support for all personal care, mobility, daily routines and learning needs. • May need individual adult support for mobility and personal care needs as advised by the PMN Team (if involved) /OT and Healthcare Professionals. • Access to specialist resources to meet the personal care and mobility needs of each CYP. <p>IF involvement from the PMN QT:</p> <ul style="list-style-type: none"> • Bespoke training may be offered around Manual Handling in liaison with physiotherapist. • Peer Awareness Training. • Bespoke Training around creating an accessible environment.

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

CYP'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 CYP 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 CYP 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. • Emergency Health Care Plan in place, if appropriate, written in conjunction with community nurses/ school nurse, LINT-PMN (if involved) and parents/carers. • Co-ordination between school, Health and LINT-PMN (if involved) is required to provide successful Careers Advice and Guidance for the CYP and their families. • Co-ordination between school, Health and LINT-PMN (if involved) is required to provide successful volunteering/work experience opportunities, searching for and applying for jobs, disclosing disabilities and preparing for interviews. 			

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The CYP 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 CYP has been assessed by LINT PMN specialist teacher).</p> <p>The CYP 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 CYP'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 CYP may require regular/daily/24-hour supervision/monitoring (continuing care due to intrusive procedures).</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 CYP requires long-term, significant and intensive intervention from the LINT-PMN QT which is expected to take at least a year to embed across setting and home with at least fortnightly visits 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. <p>Planning</p> <ul style="list-style-type: none"> Risk assessments for: moving and handling, movement around school and outside to be in place. An Emergency Health Care Plan is in place as appropriate. A PEEP (CYP Emergency Evacuation Process) is in place in collaboration with the LINT-PMN QT (if involved). OT assessment for postural management, feeding, toileting, fine/gross motor needs in collaboration with 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 school 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 CYP'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 CYP'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 CYP to communicate their expressive and receptive needs. 	<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. May have access to sensory room.

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The CYP's disability/condition directly affects the ability to communicate verbally and/or record work/ideas.</p> <p>The CYP uses specialist equipment/aids that require daily operational assistance or preparation.</p> <p>The CYP requires a high level of support from specialist health professionals.</p> <p>The CYP 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 CYP 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> <p>The CYP a medical/medication regime that requires adult assistance e.g., changing catheter, tube medication/feeding, epilepsy management etc.</p> <p>The CYP has a life threatening/limiting or degenerative condition.</p>	<ul style="list-style-type: none"> • School 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 and other agencies as appropriate. • The CYP 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 school is frequent (minimal of fortnightly) to ensure that there are knowledgeable and empowered educators around the CYP. • All outcomes from EHCP reflect the PMN specialist curriculum 'above and additional to' interventions for the CYP to learn to access (if LINT-PMN is involved). • School works closely with LINT-PMN QT (if involved) to create a bespoke education offer to meet unique needs based on the school and specialist curriculum. • Assessment and monitoring will be bespoke. • Policies reflect reasonable adjustments and are written in collaboration with LINT-PMN QT (if involved). • 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. 		<ul style="list-style-type: none"> • A specialist/differentiated physical curriculum to ensure that the CYP can access this aspect of learning. • 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. • 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). 	<ul style="list-style-type: none"> • A suitable space may be needed for CYPs with emotional and/or behavioural difficulties including regular periods of withdrawal, disaffection and ongoing reluctance to attend school. • 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

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

CYP's Presentation (Following specialist assessments by LINT)	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>NC Level Attainment levels will range from P scales in Primary to NC levels in Secondary.</p>	<ul style="list-style-type: none"> • Behaviour care plans in place if appropriate • Plans in place for Egress, moving and handling. • The CYP requires a high level of support from a multi-disciplinary team to make successful transitions between rooms. • School takes responsibility for the organisation of access arrangements for statutory assessments based on the last LINT-PMN Assessment Report (if applicable). • Co-ordination between school, Health and LINT-PMN (if involved) is required to provide successful Careers Advice and Guidance for the CYP and their families. • Co-ordination between school, Health and LINT-PMN (if involved) 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"> • Schools have regular liaison with the LINT-PMN QT (if involved) to support the CYP and themselves in understanding the impact of the PMN, promote independence and specialist equipment training. 	

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>CYP is able to access all areas of the curriculum using specialist equipment and/or assistive technology to help record their work.</p> <p>CYP is able to access resources within reach and at the right height.</p> <p>CYP is able to cooperate with self-care routines and medical routines, including those associated with any physical and/or medical conditions/diagnoses.</p> <p>CYP is able to access regulatory activities to support them to concentrate and maintain focus in the classroom.</p> <p>CYP is able to confidently ask for help when there are barriers to accessing educational resources.</p> <p>CYP 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>CYP is able to cooperate with self-care routines, medical routines including those associated with any physical or medical conditions/diagnoses e.g., self-catheterisation.</p> <p>CYP is able to navigate all areas of the environment either by physical means or by using a self-propelled wheelchair, a powered wheelchair, a walking frame or walking sticks.</p> <p>CYP is able to be independent within the classroom e.g., CYP is able to reach resources for all activities and is included in group activities including physical education.</p> <p>CYP is able to confidently negotiate the environment independently during class activities, dinner times and break times, understanding their own limitations physically.</p>	<p>CYP is able to access visits/day trips as appropriate. These should be planned in advance, to consider the accessibility and transport needs.</p> <p>CYP is able to develop appropriate relationships with caregivers/ support workers.</p> <p>CYP is able to be supported to re-establish friendships after a term of absence.</p> <p>CYP is able to wait their turn and feel confident that their needs will be met.</p> <p>CYP is able to understand the importance of polite language, saying please and thank you.</p> <p>CYP is able to begin to develop an understanding of when to use an appropriate range of greetings (handshakes, hug, kiss on the cheek).</p> <p>CYP is able to begin to develop an understanding of the principle of queuing and waiting for services.</p> <p>CYP is able to begin to develop an understanding of the importance of gathering with family and friends for various occasions.</p> <p>CYP is able to begin to develop an understanding of the importance of communicating confidently and effectively.</p> <p>CYP is able to begin to develop an understanding of the meaning and importance of being assertive.</p> <p>CYP is able to begin to understand that different people have different needs and abilities and are beginning to understand how/when to offer assistance.</p> <p>CYP is able to begin to understand when and how to use humour effectively and appropriately.</p> <p>CYP is able to build skills and independence to enable them to build and sustain positive friendships.</p>	<p>CYP is able to attend relevant health, dental, optical, and hearing checks as required to promote good physical health.</p> <p>CYP is able to cooperate with self-care routines and medical routines including those associated with any physical or medical conditions/diagnoses. For example, self-catheterisation.</p> <p>CYP is able to participate in sport and physical exercise in accordance with their physical/ medical capabilities.</p> <p>CYP to able to begin to have an understand of own physical and/or medical need and identity with their own equipment.</p> <p>CYP is able to be supported emotionally to engage in missed work due to absences through illness, appointments or therapy time/ medication needs that take them out of class.</p> <p>CYP is able to identify their own feelings and emotions and share them with a familiar adult.</p> <p>CYP is able to read body language, facial expressions and behaviour of others to read if they are feeling a range of emotions.</p> <p>CYP is able to make a decision and give a reason of why an impact behind this decision to a familiar adult.</p> <p>CYP is able to engage in conversation and interactions with peers and familiar adults and begin to resolve conflict when it may occur.</p>

Physical and/or Medical Needs: PfA Outcomes and Provision

Y3 to Y6 (8-11 years)

PfA Outcomes and Provision

Employability/ Education	Independence	Community Participation	Health
<p>CYP is able to access careers information, opportunities to meet role models/talks from visitors to school through adaptations and formats which consider physical and/or medical needs as appropriate to individual circumstances.</p> <p>CYP is confident to ask for help when there are barriers to accessing educational resources.</p> <p>CYP is 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>CYP is able to move around the school environment as required.</p> <p>CYP is developing age-appropriate life skills to include basic cooking skills, awareness of transport and requirements for travel (tickets, timetables etc.), money in accordance with their physical and medical capabilities.</p> <p>CYP is confident to negotiate the environment independently during class activities, dinner times and break times, understanding their own limitations physically.</p>	<p>CYP is able to access after-school clubs, youth groups, sports teams, community-based groups in accordance with their physical and medical capabilities.</p> <p>CYP is developing an awareness of social norms and awareness of nonverbal cues which may be missed and confidence to interact with others independently.</p> <p>CYP is beginning to feel confident with meeting up with friends in age-appropriate settings and/or keeping safe online.</p> <p>CYP understands when to use an appropriate range of greetings (handshakes, hug, kiss on the cheek).</p> <p>CYP understands of the principle of queuing and waiting for services.</p> <p>CYP understands the importance of gathering with family and friends for various occasions.</p> <p>CYP understands the importance of communicating confidently and effectively.</p> <p>CYP understands the meaning and importance of being assertive.</p> <p>CYP is beginning to make polite small-talk (around weather, wellbeing, day-to-day etc.)</p> <p>CYP understands it is okay to refuse assistance sometimes.</p> <p>CYP is beginning to reflect of the specific needs of other people and is developing an awareness of when/how to offer assistance.</p> <p>CYP is developing their understanding of when and how to use humour effectively and appropriately.</p> <p>CYP understands the essential benefit benefits of employment.</p>	<p>CYP is able to manage minor health needs.</p> <p>CYP is able to make healthy eating choices and will engage in physical exercise in accordance with their physical/medical capabilities.</p> <p>CYP is supported emotionally to engage in missed work due to absences through illness, appointments or therapy time/ medication needs that take them out of class.</p> <p>CYP is able to read body language, facial expressions and behaviour of others to read if they are feeling a range of emotions and begin to respond appropriate to the emotions of others.</p> <p>CYP can access specialist support, such as mentoring or counselling as appropriate.</p> <p>CYP is able to make a decision and give a reason of why an impact behind this decision to other.</p>

PfA Outcomes and Provision			
Employability/Education	Independence	Community Participation	Health
<p>CYP is able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and formats which consider physical and/or medical needs as appropriate to individual circumstances.</p> <p>CYP is able to access all levels of activity including science labs e.g., using different height seating.</p> <p>CYP is able to confidently to ask for help when there are barriers to accessing educational resources.</p> <p>CYP 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>CYP is able to understand supported employment options e.g., Access to Work.</p> <p>CYP is able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.</p> <p>CYP is able to understand the essential benefits (salary, sense of worth etc.) and challenges of employment (self-organisation, self-discipline etc.).</p> <p>CYP is able to begin to understand the basic principles of wages, National Insurance, pension contributions and tax.</p>	<p>CYP is able to move around the school or work-based environment as required.</p> <p>CYP is able to demonstrate age-appropriate independent living skills to include cookery, access to local transport, money, and time management in accordance with their physical and medical capabilities.</p> <p>CYP is confident to negotiate indoor and outdoor environments independently during activities, dinner times and break times, understanding their own limitations physically.</p>	<p>CYP is able to access transport options within their physical and medical capabilities to facilitate independence and community participation.</p> <p>CYP is able to access community-based groups/ activities in accordance with their physical and medical capabilities.</p> <p>CYP is able to make and maintain relationships, beginning to understand the interrelation with sex education as appropriate.</p> <p>CYP is able to safely access online communities.</p> <p>CYP is able to utilise specialist input into careers education, information and guidance, including supporting volunteering/work experience opportunities.</p> <p>CYP is able to develop their ability to express own needs and make clear requests of members of the public and professionals (bus driver, shop assistant etc.).</p> <p>CYP is able to begin to give carer instructions and is in control of the situation.</p> <p>CYP is able to begin to understand how to refuse assistance appropriately, both verbally and nonverbally.</p> <p>CYP is able to reflect of the specific needs of other people and knows when/how to offer assistance.</p>	<p>CYP is able to be more independent in managing more complex health needs in accordance with their physical and mental capabilities.</p> <p>CYP is able to attend their annual health check with their GP if registered as having a learning disability.</p> <p>CYP is able to access specialist support, such as mentoring or counselling as appropriate.</p>