Newport C of E Junior School Special Educational Need Offer (SEND offer)

Newport C of E Junior School is an inclusive school and we offer the following range of provision to support children with SEND in line with the Local Authority, to ensure that all pupils regardless of their specific need, makes the best possible progress in school.

We see each student as a 'unique' and valued member of our community and endeavour to enable each child to meet their full potential. We are committed to narrowing the attainment gap between SEND and non-SEND students. This may include after school interventions, short-term intervention learning or other learning interventions developed on an individual needs basis.

If you wish to discuss any concerns you have with your child's Special Educational Needs/Disabilities:

Our Headteacher is Nicola Moody.

Our qualified Special Educational Needs Co-ordinator is Jane Kerr.

Code of Practice

The Code of Practice offers guidance designed to help schools make provision for pupils with special educational needs following Identification and Assessment of Special Educational Needs.

The following pages set out the model of Assessment and Provision that Newport C of E Junior School will provide in line with the new Code of Practice.

Areas of Need

Children will have needs and requirements which may fall into at least one of four areas, many children will have inter-related needs. The areas of need are:-

- communication and interaction
- cognition and learning
- emotional, social development and mental health
- sensory and/or physical

Identification and Assessment

The importance of early identification, assessment and provision for any child who may have special educational needs cannot be over emphasised. The earlier action is taken, the more responsive the child is likely to be, and the more readily can intervention be made without undue disruption to the organisation of the school, including the delivery of the curriculum for that particular child. If a difficulty proves transient the child will subsequently be able to learn and progress normally. If the child's difficulties prove less responsive to provision made by the school, then an early start can be made in considering the additional provision that may be needed to support the child's progress.

Any of the following may trigger a concern. The child and parent/carer are involved throughout.

- Parents/carer
- Child
- Class teacher assessment
- Response/ length of time on SEN register
- Any of the support services mentioned later
- Records transferred from another school
- Base line assessments
- ✤ SAT results
- In-house testing and assessment
- Special needs register
- Pupil tracking

In identifying children who may have special educational needs we can measure children's progress by referring to:

- their performance monitored by the teacher as part of ongoing observation and assessment
- the outcomes from baseline assessment results
- their progress against the objectives specified in the National Literacy and Numeracy Strategy Frameworks
- their performance against the level descriptions within the National Curriculum at the end of a key stage
- standardised screening or assessment tools.

At Newport C of E Junior School support is given to all children through high quality teaching with differentiated activities. If more focused support is required, a child will be supported by school interventions and recognised on class and individual provision maps. Educational Health Care (EHC) plans are applied for and used to support children when the need has been identified. These plans are used to support transition from class to class, as well as when joining the junior school and then from juniors to mainstream or special secondary, dependent on the child's needs. Further meetings, pre-visits and information are passed on to staff or the new school to make the transition as smooth as possible for the child. Parents and the children are involved in the process.

English as an Additional Language

The identification and assessment of the special educational needs of children whose first language is not English, requires particular care. Lack of competence in English must not be equated with learning difficulties as understood in the Code of Practice. We would look carefully at all aspects of a child's performance in different subjects to establish whether the problems they have in the classroom are due to limitations in their command of the language that is used there or arise from special educational needs. Advice would be sought from the EMA unit when necessary.

Interventions offered at Newport Junior School

The interventions are examples of programmes, support and resources used within school; however, we are always striving to further our ability to fulfil children's needs. Therefore it is always a growing and developing list of support.

	• Individual provision map plans.
Planning and assessment:	Differentiated learning activities.
	CAF referrals to external agencies/social care as
	required.
	• Co-ordinated planning between class teachers, TAs and
	allocated TAs for children with Statements of SEN.
	• Referrals for assessment to external agencies as
	required.
	• Incorporation into planning of any advice or guidance
	provided by external professionals supporting individual
	children.
	• Underlying ability assessments and assessments using the
	Dyslexia Porftolio Screening, undertaken by SENCo as
	required.
Social Skills	Intervention from the Targeted Family Support Service
programmes/support including	

strategies to enhance self- esteem:	for children and their parents/carers on referral,
esteent	delivered both in school and in the home.
	• Intervention from the Child and Adolescent Mental
	Health Service (CAMHS) for children and their
	parents/carers on referral, delivered at CAMHS or in
	school as appropriate.
	• Learning/behaviour mentor support, focusing on social and
	emotional development, delivered 1:1, paired or in a group
	as appropriate, either in or out of class.
Access to a supportive	• Extensive and consistent use of visual support both in and
environment - IT	out of class to support understanding and facilitate
facilities/equipment/resources	access to the school environment and learning.
(inc. preparation):	 Pre-teaching of new concepts and vocabulary to enhance
	learning.
	• Use of interactive whiteboards.
	• Regular access to computers.
	• Provision of specialist equipment, eg. a specifically
	designed chair for a child with cerebral palsy and
	adaptation of the environment through the addition of
	grab rails, to promote independence and integration.
	• Provision of individually tailored visual support packages
	for specific children including individual timetables and
	behavioural cue cards.
	• Provision of resources to enhance independent learning
	including sand timers, easy-grip scissors, writing slopes,
	sensory seating cushions and table top writing packs
	containing phonics sound mats and high frequency word
	lists.
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Strategies/programmes to	Assessment by and intervention from a speech and
support speech and language:	language therapist, on referral.
	• Delivery of individual SALT programmes by class
	teachers and teaching assistants.
	• Support for children with EAL status – either 1:1 or in
	groups/in or out of class.
Mentoring activities:	Learning/behaviour mentor support and interventions
	delivered in class 1:1 or in a group, to develop positive
	attitudes to learning, and out of class to address social
	and emotional issues which affect children's learning
	progress.
	Circle of Friends
	Use of peer modelling and mentoring.
	• Use of talk partners during whole class and group learning
	sessions.
	School council.
	Buddy systems for support during playtimes and
	lunchtimes.
Access to	Assessment by and intervention from an occupational
strategies/programmes to support occupational	therapist (OT), on referral.
therapy/physiotherapy needs:	• Implementation of individual OT/physiotherapy support
	and intervention programmes by allocated school staff,
	trained as appropriate, for those children in receipt of
	these services.
	• Training of individual members of staff by the
	OT/physiotherapy services in the delivery of individual
	OT and physiotherapy programmes, eg. handwriting
	development, use of standing frames.
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	• Provision of specific resources and equipments, eg.
	specially designed chair and grab rails.
	• Provision of support resources, such as writing wedges,
	fidget toys and sensory seating cushions, where required.
Strategies to reduce	• Meeting and greeting of parents/carers at the start and
anxiety/promote emotional wellbeing (including	end of each day by all staff.
communication with parents):	• Open door policy by all staff for all parents & carers
	throughout the day.
	• Parent Action group meetings, where parents share ideas
	and thoughts with staff.
	Learning/behaviour mentor implements planned
	programmes of support to children either in or out of the
	classroom, 1:1 or in a group session as required.
	Educational psychologist works closely with referred
	children and their parents/carers, on referral.
	Collaboration and communication with all external
	professionals involved with children, as appropriate, eg.
	hospital consultants, GPs and CAMHS practitioners
	• All staff trained in child protection at regular intervals
Strategies to support/develop literacy including reading:	• Small group reading support in class through guided
	reading, and individual reading support out of class from
	volunteers.
	• Additional small group literacy support in class from class
	teachers and TAs.
	Additional individual and small group literacy support,
	delivered weekly by a specifically trained learning support
	teacher.
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	• Targeted literacy support strategies devised by outside
	agencies and implemented by the learning mentor, SENCo,
	class teacher or teaching assistant as appropriate.
	• Reading club run by a teaching assistant.
	• Handwriting development programme implemented daily
	throughout the school as and where required.
	• Use of Dyslexia Portfolio Screening to assess for SpLD,
	and subsequent investigation and implementation of
	support programme as required.
Strategies to support/modify	Consistent schoolwide implementation of the school's
behaviour:	behaviour policy.
	• SEN registration of those children whose behaviour
	difficulties are persistent and constitute a barrier to
	learning progress; at stage 1 provision will include close
	collaboration with parents/carers on an agreed
	programme of support, home/school books to ensure daily
	communication between home and school, daily behaviour
	oversight by school staff and learning mentor support as
	appropriate.
	• Where a child is moved to stage 2 because of inadequate
	response to stage 1 provision a referral will be made to
	one or more of the following agencies:, the educational
	psychologist, CAMHS or Targeted Family Support.
Strategies to support/develop	• Targeted small group support in class.
numeracy:	• Withdrawal of small groups or individual children for
	additional numeracy support.
	Use of support resources.
	• Implementation by trained teaching assistants of a

	specialist SEN numeracy intervention programme,
	WAVE3.
	Advancement of more able pupils through provision of
	opportunities such as the inter-school Maths Challenge.
	• Continuous staff training in the delivery of maths, use of
	images and models and support for learners.
Provision to facilitate/support access to the curriculum:	• Small group support in class from class teacher/TA.
access to the curriculum:	• 1:1 support from an allocated TA for children with
	Statements of SEN.
	• Facilitating access to learning through the appropriate
	differentiation of tasks and activities.
	• Provision of specialist equipment or modified resources.
	• Extensive use of visual support.
	Implementation of specifically tailored support
	strategies and programmes, eg. devised by the
	educational psychologist, occupational therapist or
	physiotherapist.
Strategies/support to develop	• Provision of individual/visual timetables and checklists.
independent learning:	• Provision of sand timers where appropriate.
	 Pre-teaching of new concepts and vocabulary.
	Implementation of specifically tailored support
	strategies and programmes, eg. devised by the
	educational psychologist, occupational therapist or
	physiotherapist.
Support/supervision at	 Trained midday meals supervisor and TAs supporting in
unstructured times of the	the lunch hall.
day including personal care:	 Play leaders, Jumping Jaxx, initiating and supporting

	activities during morning and lunch breaks.
	• Buddy system for children new to the school.
	• Individual lunchtime supervision where specified, eg. in
	Statements of SEN.
	• Provision of specialist equipment, eg. provision of disabled
	toilet facilities in a full wet room.
	• Support by individual members of staff for children with
	special toileting requirements.
	• Targeted support and supervision in the outdoor areas
	for children with disabilities.
Liaison/communication with	Early identification of needs requiring referral to
professionals/parents, attendance at meetings and	external professionals.
preparation of reports:	TAC/TAF meetings convened where a child's/family's
	needs are assessed as significant.
	Regular communication and information sharing with an
	extensive range of external agencies.
	• Regular progress meetings with parents/carers for which
	detailed reports are prepared.
	• Sharing of professional reports with parents.
	Implementation by school staff of recommendations
	made and strategies devised external professionals to
	support children and/or their families.
	SENCo attends multi-disciplinary assessments as
	required.
Access to Medical	• Initial meetings with school nurse and parents of children
Interventions:	with medical issues to establish child's needs in school
	and, where appropriate, draw up care plans.
	• Staff training in the administration of support and/or
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medication for conditions including epipen use.
• Liaison with medical professionals, eg. GPs, hospital
consultants and mental health practitioners, providing
ongoing treatment to children in the school.
• Posters with photographs of child and detailing the child's
condition and, where relevant, required medication
displayed in staffroom.
• Individual protocols for children with significant medical
needs.
• Implementation of risk assessments.
• Strategic staff trained in First Aid.

For children with complex SEND, the frequency of such provision may result in the school applying for additional funding to support a child, known as Exceptional Needs Funding.