



Step 1

As part of our graduated approach to SEND we begin from the child.

Home visits

Building relationships with parents and families

Getting to know the unique child and understanding their interests

All children will receive quality first teaching.

The **SEND code of practice** states that high quality teaching that is differentiated and personalised will meet the individual needs of the majority of children and young people.

This will be provided by:

Ensuring multisensory teaching approaches

An accessible and engaging learning environment making reasonable adjustments where necessary

Differentiation/ inclusive teaching practice

Sharing of best practice/ ongoing CPD

Step 2

All staff look listen and note **(Observation)**- What is this assessment telling us about this child? All children's progress is regularly assessed. This information is shared with parents and carers and ensures partnership working.

Children are discussed regularly during fortnightly planning for progress meetings. This ensures that we are planning clear next steps for children to include: **Enhancements to learning environment/ experiences and opportunities/ routines (Quality first teaching)**

If a child is identified as having difficulties, we would share these concerns with parents/carers. To include them in planning for progress.

Staff will undertake additional assessments to inform target setting / enhanced provision e.g. wellcomm.

The SENCO will add children to the School provision map which details any support being given.

Classroom staff and SENDCO work closely together to observe and assess which informs a plan do review cycle.

Step 3

Implement plans

Assess impact of the plans

Gather views of the parent/child

Revise plans

Progress may mean that no further SEN support is required

If Child isn't making the progress we would expect SENCO, Staff and parents consider why.

V-send tools

SENCO Co-ordinates and collaborates with outside agencies and specialist services where appropriate. These include SALT, Paediatrics, Educational Psychologists, outreach support, Health visitors and social workers.

It is important to note that for some children the cycle may be a slower process and in other cases special educational needs or disabilities may be identified sooner.