Your Guide to SEND at Penponds School



A series of quick guides outlining strategies for supporting students with specific special educational needs and disabilities in your classroom.

I have ADHD. Here is how you can help.

- Really getting to know me will help you to recognise when to enforce the rules and when not to. A non-confrontational approach, where you value and listen to me will help reduce my heightened arousal. This will lead to better behaviour and help me remain in control.
- Reward me immediately upon task completion, with tangible rewards (tokens, stickers, star charts, certificates) to reinforce my positive behaviour. Ask me which rewards I would like.
- Rules are important to me as they provide structure and predictability, but they need to be consistently implemented and reinforced. School rules need to be differentiated for me.
- I have a hands-on (kinaesthetic) learning style and like teaching methods which meetmy need for activity.

- Using a timer will engage me and provide a focus for my attention.
- I may have a 'time-out' card. Please help me totake responsibility for moderating my own arousal levels and learn when to use it
- Ensure instructions are delivered clearly, concisely and step by step. Ask me to repeatthem back or have them written down for meon a prompt sheet.
- Teach me strategies to improve my listeningskills and encourage me to take notes.
- Allow me to use pictures or diagrams to represent my thoughts and ideas.
- Use subtle, visual cues agreed with me to remind me when I am off task or my behaviour is inappropriate, such as a tap onthe desk to focus my attention.
- Listening to music on headphones while engaging with sedentary tasks, tests or extended writing will help focus my attention.

- I may benefit from using a word processor ifmy work is disorganised and illegible.
- Please sit me at the end of a row or the backof the classroom to minimise distractions.
- A 'stress ball' or other fiddle object (agreedby the SENCO) may help me concentrate.
- Please allow a calming-down period for me when entering the classroom as I find the transitionbetween lessons difficult to manage.
- Provide me with time limited learning breaks toallow me to release excess energy. You could give me an active 'job' to do.
- I am very impulsive, so please raise my awareness of potential danger when using equipment in practical lessons.
- Paired working or support from a positive rolemodel can help me focus.
- I may struggle to work in a group as I am unable to read the signals and cues for successful communication.

I have Anxiety. Here is how you can help.

- Types of anxiety may include Generalised Anxiety
 Disorder, School Phobia, Specific Phobias, Social
 Phobias and Obsessive-Compulsive Disorder.
 Anxiety will often alsoaccompany many Special
 Educational Needs and Disabilities.
- It is really important that you get to know me
 and we can build up a trusting relationship. Learn
 what it looks like when Iam in a heightened state
 of anxiety. I may be particularly quiet,
 withdrawn, avoid eye contact, be tearful or
 shaky. I may show no outward signs at all.
- Ask me where I am most comfortable sitting in class. I may prefer to sit at thefront with my back to the class, or at theback where no one is looking at me.
 I may like to enter the room first before the rest
 - I may like to enter the room first before the rest of the class, or enter quietly afterthe others.
- I may find some rooms easier to enter thanothers.

- Knowing where to sit is important to me, so
 please let me know if you plan to change the
 normal seating plan.
- I am most comfortable if I know who I haveto support me. This may be a particular friend or group of friends or an adult.
- Be mindful of whether I can cope with beingasked questions in class. This may vary on a day to day basis. I may not be comfortable speaking in front of the class.
- I may need to leave class early so that I can go through the corridors when they are quiet. I may not cope with crowds because of noise, jostling and fear of being pushed over.
- I may not be able to use the school toilets asit
 causes me anxiety to do so, or I may need to go
 only when the toilets are empty of other people.
 Having access to toilets at all times is important. I
 may be issued with a toilet pass or Help Card.
- I may not cope with teachers I do not know, especially supply teachers.

- I may need a quiet and private place to eat. Imay
 not be able to eat in public (very commonwith social
 anxiety). If I go all day with nothing to eat or drink,
 then my blood sugar levels drop, my metabolic rate
 increases and this suppresses my appetite. This can
 cause loss of weight.
- I may not feel confident to change in front ofothers or feel able to perform. This may applyto PE, Music and other performance arts subjects.
- If I have a Help Card, I may need to use it to go somewhere where I can feel safe and whereI can calm down if I need to.
- There may be certain teachers I cannot cope with. This may be because I find you fierce, overly friendly, strange, unpredictable, loud ortoo demanding. I may not be able to communicate this for fear of saying somethingwrong. If you notice that I am anxious around you, please adapt your behaviour accordingly tomake me feel more comfortable.

I have Autistic Spectrum Disorder (Autism). Here is how you can help.

- Use the recommended strategies here to build a good relationship with me. It takesme a while to trust someone.
- Make learning accessible to me.
 Differentiate where necessary.
- Ask me where I will be most comfortablesitting in the classroom.
- Avoid changing seating plans without consulting me first - change can cause mehuge anxiety.
- Give instructions using tick lists, breakingdown the task into manageable chunks.
- Avoid open-ended questions as these are not focused enough for me to respond to.
- Provide me with some vocabulary, structureor starting ideas for the lesson.
- Use visuals and structured tasks, incorporating my own interests wherever possible. Find out which ones work and use them all of the time even if it doesn't seemthat I need them.

- Give me time to process information anddon't put me on the spot by asking me questions publicly, unless you know I am comfortable with this.
- Prepare me for what is coming and make sure my TA knows what is coming next andwhat the lesson is about so we are ready.
- Allow me to use speech to text technologyso there is less writing or allow me to present my work in an alternative format.
- I am likely to experience sensory processing difficulties where I may be either over-responsive or under-responsive to sensory stimuli.
- Allow me to have planned and unplanned sensory breaks in a break out space or fiddle toys in class.
- I may have rigid thoughts and expectations of the structure of a lesson. If this changes from the norm, I may become anxious and withdrawn.

- If my behaviour becomes challenging, it is important to remember that this is often communicating a need or difficulty. Please look beyond the behaviour. Ask for supportfrom the SEND team if necessary.
- I may struggle to work in a group and prefer to work on my own due to my communication difficulties.
- Be aware that I use a lot more energy justcoping with the day, so completing homework may be a challenge.
- Ensure I understand how to do my homework and am aware of any differentiation you have put in place forme, support me to do the homework in school or give me less homework,
- Make sure it is clear exactly what is expected of me, how long I should spend onthe task and provide me with a clear deadline.
- Please try and pre-warn me of any changes.

I have Dyscalculia. Here is how you can help.

- I will find it difficult to keep up in class.
 Please provide written instructions, printed diagrams and personalised worksheets with a worked example for me to follow.
- I find tracking from the whiteboard to paper difficult. Please share the lesson with me so I can follow it on a laptop. Provide print outs of diagrams for me andprovide visual support for me in lessons,
- I need concrete, physical manipulatives tohelp me understand concepts. Provide me with shapes, Numicon, Unifix, counters, dice etc.
- I need to repeat and repeat an activity to be able to process, store it in my long-termmemory and recall it. I will work slower than my peers. Please do not think I am being lazy.

- I become easily overwhelmed and anxious. Imay shut down and employ avoidance strategies. You can interrupt this cycle by scaffolding my work and supporting me.
- Replace passive teaching methods with experiential learning for me, such as drawing, building, writing and demonstrating.
- Provide hands-on activities with deliberate instruction of the language involved. Ask meto demonstrate the concepts until I can do so competently.
- I will benefit from untimed tests and the provision of reference aids eg: maths facts,rules and vocabulary.
- Help me find my way through operations like long division by providing graph paperto organise my numbers, guides/rulers toisolate rows and columns, highlighters or coloured pens to colour-code operations.

- I will be unaware when I have made a mistake copying numbers or writing dictatednumbers. A partner can correct my errors or I could use assistive technology to provide immediate feedback.
- Let me create something that communicates the concepts, such as a picture or a diagram.
- Let me teach the concepts successfully and enthusiastically to others, discussing key vocabulary, using rich verbal explanations, and with visual demonstrations that use manipulatives or examples
- I lack basic skills such as number sense, place value, and math facts. Please ensure Ihave time to regularly practice these basic concepts. I will really benefit from using concrete resources as well as a Place Value chart and times table square.

I have Dyslexia. Here is how you can help.

- Please check my reading age and ensure anywork is differentiated appropriately.
- Use pastel shades of paper (cream is a good alternative to white) and matt paper which reduces 'glare'.
- Avoid black text on a white background andlight text on a dark background.
- I prefer text at font size 12 or above.
- I prefer fonts which are clear, rounded andhave a space between letters, such as: Century Gothic,
 Comic Sans, Arial or Verdana.
- Use 1.5 or double line spacing and wide margins and lower case rather than capitalletters.
- Numbered or bullet points are easier for me to follow, rather than continuous prose.
- Keep paragraphs short dense blocks of text are difficult for me to read.

- The use of background graphics with textover the top is too visually confusing.
- Use text boxes or borders for headings orto highlight important text.
- Underlining and italics makes words 'run together' for me and is difficult to read.
- Use bold text for titles & sub-headings or to draw attention to important informationor key vocabulary.
- Colour-code text for example, information in one colour, questions in another.
- Include flow charts, illustrations and diagrams to break up large sections of textor to demonstrate a particular procedure.
- Ensure that data, charts and diagrams are logical and easy to follow.
- Sentences and written instructions should be short and simple for me to read.

- Avoid too much text on the page. Makesure that it isn't too cluttered.
- Remember to leave plenty of space for meto write my response. I will struggle to write in a small space.
- I will need help to learn and understand vocabulary.
- Read through questions with me.
- In Maths encourage me to write down the steps during calculations, help me use a calculator and use concrete examples wherepossible to illustrate a topic.
- I may not like reading aloud in class.
- It may help me to use a ruler or my fingerto track the words as I read.
- I may use a personalised coloured overlay or ruler. Please check I have this availableto me.
- I may use text to speech technology.

I have Dyspraxia. Here is how you can help.

- Consider alternatives to writing word processors, dictaphones, scribe etc.
- I will need a large space to work in.
- I may need to use special equipment eg:.
 looped scissors, rulers with handles etc
- Provide a lesson breakdown and tick list tohelp me to organise my time.
- Write instructions out for me, using different colours for each line.
- Provide templates with headings to help me work through an activity.
- Prepare diagrams for me to label as I find copying and drawing neatly challenging.
- Provide part-prepared handouts to reduce unnecessary writing and lists of key concepts or vocabulary.

- Provide me with an equipment list and encourage me to only get out what I need.
- Clarify rules and expectations, using unambiguous language.
- Let me know if plans are likely to change from the norm.
- Allow me extra time to complete work, with movement breaks when needed and please don't keep me in at break time.
- Allow me to move around whilst working.
- Allow me time to settle. Transitions are challenging for me.
- Allow me to stand up when handling equipment.
- Allow me to pack up and leave lessons early.
- Suggest suitable time limits for homework.I am
 a slow worker

- In PE and Dance, allow me to start getting ready before the other students. Provide aquiet area for me to change.
- Don't ask me to go first. I will pick up cuesfrom others about what I need to do.
- Pair me up with someone who is sensitiveand knows what they are doing.
- Watch for signs of stress due to noise and allow me to have time out if needed.
- Demonstrate how to handle equipment, orask a sensitive peer to help demonstrate.
- Don't draw attention to the awkwardness ofmy movements.
- Break down activities into component partsand teach these separately.
- Be aware that my performance will deteriorate during the lesson as I tire easily.

I have a Hearing Impairment. Here is how you can help.

- Please talk to me in private about where I would like to sit and any other considerations I may need to be put in place. Do not ask me in front of my peers asI am unlikely to admit to any problems.
- If I wear a hearing aid, please discreetly check I am wearing it in your lesson.
- Be aware if I have hearing loss in one earonly and seat me with my good ear facingoutwards into the classroom
- Even if I only have partial hearing loss, I may be very reliant on lip reading and gesture to help me understand what is said.
- Seat me toward the front of the classroomwhere I
 will have an unobstructed line of vision. This is
 particularly important if I
 lip-read, rely on visual clues or use a hearingaid
 which has a limited range.
- Please discreetly check in with me regularly to check I am hearing and understanding.

- Ensure that any background noise is minimised
- Repeat clearly any questions asked by otherstudents in class before giving a response asI may not have heard these.
- Do not speak when facing the blackboard. Be aware that face masks, moustaches, beards, hands, books or microphones in front of yourface can add to my difficulties when lip- reading.
- It is very hard for me to lip-read in darkenedrooms.
 You may need to adjust the lighting inyour teaching environment.
- Assist me with lip-reading by having me sit directly opposite you and ensure, if possible, that I can see anyone else who is talking.
- Any videos or films used should be captioned. When
 this is not possible, you will need to consider
 alternative ways for me to access the information.

- It is difficult for me, if I rely on lip reading, to also take notes from a whiteboard or writewhilst you are talking. It is important that youprovide me with written materials to supplement all lessons.
- Announcements made regarding class times, assemblies, homework, visits etc, should begiven in writing as well as verbally.
- Please share your lesson with me if I use a laptop and allow me to use headphones to usethe built-in assistive technology.
- Control any discussions so that only one personis speaking at a time.
- If I have associated speech issues, I may be embarrassed to speak out loud. Please read outmy work for me if I ask you to.
- If I acquired my hearing loss early in life, I may have literacy issues. Please provide support for me with reading and interpretinginformation.

I have Toileting Issues. Here is how you can help.

- Toileting issues can be caused by a range of factors including sensory differences, anxiety and other medical conditions including Inflammatory bowel disease (IBD) (Ulcerative Colitis and Crohn's disease.)
- Let me leave and return to the classroom discreetly and without having to get permission whenever I need the toilet. Letme use my Toilet Pass if I have one.
- Sit me close to the door so that I can leavethe classroom discreetly.
- Appreciate that I may arrive late at schoolor for lessons because of an urgent need touse a toilet.
- Be aware that I may need to take medication during school hours and/or needextra meal breaks.
- Be mindful of other students teasing meabout my lack of stamina or my need forextra rests.

- Respect my' need for privacy. I should decidehow much teachers and other pupils are told about my condition.
- Try to be alert to my psychological needs and relationships with other children. Let me judge for myself if I wish to join in sport/ PEor after-school activities on a day today basis
 - but don't stop me trying whatever I want totry.
- It is important to bear in mind that strenuous
 physical exercise can trigger an urgent need to go
 to the toilet or cause jointpains. Even mild activity
 may be too much at times if I am feeling
 exhausted, suffering severe stomach pain, or if I am
 recovering from surgery.
- Bending and stretching may bring on pain ormake pain worse. Team games can be particularly problematic.
- Be aware that I may try to push myself so asnot to let anyone down.

- I may need an extended deadline for homework assignments if I am suffering from a flare up.
- When a school trip is coming up, talk to me and/
 or my parents about my needs and try and
 arrange to meet these, e.g. with an aisleseat at the
 theatre or cinema and using a coach with a toilet.
- If I am unwell at school, consider giving me time to rest rather than sending me home. Imay be able to return to lessons later in theday.
- If I have a diagnosed medical condition I willhave an Individual Healthcare Plan. Please make sure that you are familiar with this document. The SENCO can give you access tothis.
- If I have ongoing toileting issues I will have an
 Intimate Care Plan. Please make sure that you are
 familiar with this document. The SENCO can give
 you access to this.

I have Cognition & Learning Challenges. Here is how you can help.

- I need carefully planned & differentiatedwork, broken down into small manageable tasks.
- Give me time to consider questions, process& formulate an answer. Slow down and/or reduce the number of words that you use.
- Plan self-checks for me at each stage of atask with the use of a tick list.
- I have problems understanding instructions and the requirements of tasks. You can support me with this by using visual timetables and prompt cards with pictures to remind me what I need to do to complete task you have set me.
- Provide me with a word bank with key vocabulary and go over this with me to check my understanding.
- Provide key words with pictures/symbols tohelp me remember them.
- Provide me with a writing frame to help me structure my work.

- Keep slides in Powerpoint simple and uncluttered. Highlight key information forme.
- I struggle with my visual and auditory memory for information, processes and instructions. Please check my understanding of questions and tasks. If I appear off task, it is very likely that I do not understand whatis expected not because I haven't listened.
- Use structured questioning to support me andhelp me answer by scaffolding my response.
- Get me to make a mind map or other visual representation of what I already know and use that as a starting point to teach me thenext steps.
- Physically demonstrate tasks to me ratherthan relying on verbal instructions.
- Repeat information in different ways, varyingthe vocabulary you use. If I didn't understand what you said, please rephrase it for me.

- Provide me with a work 'buddy'.
- I find my personal organisation over the short, medium and long term difficult. Please help meby providing me with clear instructions for homework, including a submission date and a list of equipment for each lesson.
- I have difficulties with sequencing skills and this can lead to me becoming confused when Iam given too many instructions at once. Pleasekeep instructions simple and provide me with achecklist for the lesson so I can complete all the tasks required of me.
- I may appear immature and find it difficult tomix with my peer group. Please be vigilant forbullying that I may experience as a result and encourage paired working or group work.
- I may appear needy with an over-reliance onadult help and support. Please promote my independence by making the curriculum accessible to me.
- Give me specific, targeted praise.

I have Speech, Language and Communication Needs (SLCN). Here is how you can help.

- Be aware of the specific communication difficulties that I have. It may not be obvious as it may be a processing disorder.
- Be aware of the level of language I am using
 use a similar level to ensure I understand.
- Please do not rush or interrupt me as I haveto begin processing all over again from the beginning. This will frustrate both of us!
- Slow down your rate of speech by using pausing and give me lots of time to processand reply – be prepared to wait for an answer.
- Allow time for me to finish what I have to
- say, dont finish it for me.
- Create a relaxed, safe and friendly environment with lots of opportunities totalk.
 Not too noisy.
- Keep language simple by breaking long sentences into short separate ideas.

- Use signs, symbols and visual timetables to support my communication.
- Use visual displays (objects and pictures) tosupport my understanding.
- Give me a visual guide to the lesson, eg: a check list or pictures to aid understanding.
- I will benefit from lots of repetition eg: of activities and vocabulary
- Use non-verbal clues to back up what you are saying eg: gesture.
- Give me a clear language model and expand what I say by repeating my words back to mecorrectly without pointing out my errors.
- Provide plenty of opportunities for me to communicate in a small group. I will be less confident working in a big group and will beless involved.
- Include good communication role models in asmall group for me to copy.

- Respond positively to any attempt I make at communication – not just speech.
- Listen carefully to what I say. I may be too embarrassed to repeat myself, especially infront of the class.
- Provide a low distraction/quiet area for mygroup to work so I can focus on my communication.
- Reduce the number of questions that you askand make sure you give me time to answer.
- If you do need to ask questions in front of theclass, try to use closed questions, as these require me only to answer yes or no which will reduce my anxiety.
- Please do not make fun of me or use sarcasm when I
 am struggling to communicate. This willmake me less
 likely to try to communicate.
- Regularly check my understanding and identifywhat I can/cannot understand

I have Tourette Syndrome. Here is how you can help.

- Common vocal tics are: coughing, grunting, sniffing, throat clearing, shrieking, whistling, spitting, animal sounds and echolalia (repeating others' words or phrases).
- Common motor tics are: eye blinking
 (excessively or in an unusual pattern),
 echopraxia (imitating others' actions),
 self-injurious behaviours involving touching, biting,
 hitting, pulling out eyelashes/hair,
 smelling/sniffing things.
- My tics can be triggered, or increased by stress, excitement or relaxation. Please filter out your emotional reaction and instead listen and respond with support andunderstanding.

- Ignoring tics avoids drawing any unnecessary attention towards them.
- It is not helpful to ask me to stop my ticsas
 they are involuntary. Being asked to suppress
 them is stressful and will cause me to tic more.
 I will also be unable to engage with what is
 going on around me.
- Try not to ask me not to do something. It will
 instantly become the very thing that I have to do
 and turn into a compulsion.
- Motor tics of my eyes, head or neck may interfere with reading and affect my handwriting or the ability to write for prolonged periods of time.
- Motor and vocal tics may make me reluctant read aloud, ask or answer questions or ask for help. Please be understanding of this.

- Thought tics inhibit auditory processing. Please do not assume I am intentionally notlistening.
- I may have a poor attention span, fail to complete tasks, be easily distracted, unableto listen, fidgety and impulsive.
- Provide a structure (schedule/tick list) to assist me
 with planning, organisation, time management,
 and initiation of tasks.
- Because Tourette Syndrome can be suggestible, if classmates discover 'the trigger', they may use this to make me tic.Please try and prevent this happening.
- I am likely to experience sensory processing difficulties where I may be either over- responsive or under responsive to sensory stimuli, eg: noise, clothing, textures.

I have experienced Trauma. Here is how you can help.

- It is important to understand my behaviour in the context of my past experiences.
- I need a non- confrontational, trauma informed approach. I will respond best to adiscreet, understanding and reassuring approach from adults.
- The PACE approach should be used, using playfulness, acceptance, curiosity and empathy to understand my emotions and behaviour
- Slow yourself down when talking to me as this will appear non-threatening: talk slower, use a lower pitch for your voice, don't use complex sentences, don't use lotsof body movements.
- Teach and model positive self-talk to me to encourage self-belief. Help me to see that making a mistake is considered a necessarypart of learning and that minor mistakes will not incur adult anger or punishment.

- Incorporate more opportunities for humourand laughter in the curriculum (laughter reduces the traumatic response in the brain).
- I need a predictable environment with clear expectations for behaviour and structure during the school day.
- I will need adults to support and coach mein ways to calm myself and manage my emotions as well as opportunities to practise de-escalating when I feel overwhelmed.
- Help me to settle down when something inthe classroom triggers an emotional outburst. When I am escalating, try and connect with what I am trying to tell you about what I am feeling. It can work evenif you just make a guess you don't haveto be right, I can correct you.

- Allow me to go to a breakout space when Iam feeling overwhelmed or emotionally dysregulated.
- Practice active listening with me and demonstrate empathy.
- Use the 10:1 rule when interacting with me.(Ratio of positive to negative statements for traumatised children)
- Actively ignore my negative behaviour.
- Have consistent expectations and behaviourplans that are based on reward systems, not punishment. Use collaborative problem- solving with me, I need to have some control.
- I need access to exercise through regularlearning breaks.
- For further information on types of trauma, see the following link: https://www.nctsn.org/what-is-child-trauma/trauma-types

I have a Visual Impairment. Here is how you can help.

- Please keep your classroom uncluttered.
- If I am sensitive to light and glare, pleasecontrol the light in the classroom using blinds, sit me with my back to windows andreduce the glare on surfaces.
- I may need to wear a hat/visors or sunglasses even when staying indoors.
- I may need more light and need to position myself near natural light when possible.
- I may need to use a lamp. This should be placed behind my shoulder on the oppositeside of my writing hand and/or the same side as my stronger eye.
- I may benefit from high contrast objects and pictures.
- Please warn me of changes in lighting as thiscan cause extreme eye strain and headaches.
- I will be able to read my own writing betterif I use a thicker black pencil/pen/marker.
- Please produce resources in the correct font size and type-face for me to access.

- Black & white give the highest contrast. Donot use dark colours together (like blue andgreen).
 Avoid using white & grey with otherlight colours.
 Avoid pastel colours next to each other.
- Please avoid the use of red and green pens onthe whiteboard. These are hard for me to see.
- I may need a typoscope when reading. This is a
 reading shield made of a black material witha
 rectangular cut out. It reduces extra light reflected
 from the surface of the paper and helps me to stay
 on the correct line while reading.
- Please ensure I wear any prescribed glassesto reduce visual fatigue.
- I will benefit from my work being magnified.
 Provide me with enlarged pictures, images, maps and print. The VI team will have assessed my vision and recommended a fontsize and typeface to use. The SENCO will advise on this.

- Simply enlarging worksheets on a photocopiermakes the letters or edges of diagrams lose their sharpness and reduces the contrast.
- I may prefer to work at close distances. Moveme
 closer to the object, such as sitting closerto the
 board or the object can be moved closer to me, such
 as people getting closer when talking.
- Please reduce the visual clutter in the classroom and reduce the number of objects inthe immediate working area,
- Please allow me to take a break from my workas this enables me to be visually focused for shorter periods of time and prevents fatique.
- Allow me more time when visually exploring a material and when completing a visually challenging task.
- If I have central visual field loss, I may experience incomplete images or a central "blind spot" when looking. I will appear not tomaintain direct eye contact.

Name of agency	Professionals Involved	How they support SEND
CAMHS Child and Adolescent Mental Health Services	Psychiatrists Social workers Nurses Occupational therapists Psychologists Counsellors Family therapists Arts therapists Primary mental health workers Outreach workers	Cornwall and Isles of Scilly CAMHS has multidisciplinary teams that offer a service to allyoung people up to the age of 18 who are experiencing difficulties with their mental health. Their priority is to work quickly to provide an effective assessment, treatment plan andtherapeutic support for individuals and their families.
SLT Speech and Language Therapy	Speech and Language Therapists Specialist Speech and Language Therapists Speech and Language Therapy Assistants	The Speech and Language Therapy team work with children and young people who have speech, language and communication needs. This includes children and young people on the Autism spectrum.
EHCP assessment Education and Health Care Assessment	The child's parent The young person Headteacher Teachers SENCO Health care professional Speech and Language therapist Occupational therapist, Physiotherapist CAMHS	The local authority (LA) must seek information and advice on a child or young person's needs, the provision required to meet those needs, and the outcomes expected to be achieved by the child or young person. This advice must come from a range of differentpeople. The LA has the legal duty to carry out the assessment process. They must seek psychological advice, advice and information in relation to social care and health and adviceand information from any other person the local authority thinks appropriate.

	Educational Psychologist Social Care	Where the child or young person is in or beyond year 9, advice and information in relationto provision to assist the child or young person in preparation for adulthood and independent living must be included. It must also include advice and information from any person the child's parent or young person reasonably requests that the local authority seekadvice from. If a child or young person is hearing impaired and/or visually impaired the educational advice must come from a suitably qualified person. The LA must decide, on the basis of the evidence from the EHC needs assessment, whether it is necessary for the child or young person to have an EHC plan.
EHCP Education and Health Care Plan	Local Authority	An EHC plan is a legal document that describes a child or young person's special educational, health and social care needs. It explains the extra help that will be given to meet those needs and how that help will support the child or young person to achieve whatthey want in their life. EHC plans are drawn up by the local authority after an education and health care assessment has taken place.
AST Autism Spectrum Team	Autism Advisers Specialist Practitioner Highly Specialist Speech and Language Therapist and AST workers The team is line managed by a Senior Educational Psychologist	This Local Authority team works with children and young people with a diagnosis of Autistic Spectrum Condition aged 4-16. Their aim is to shape positive futures for youngpeople with ASD and to inspire, challenge and advise parents and professionals to find shared solutions. The majority of the work undertaken by the Autism Spectrum Team in Cornwall promotes the inclusion of young people with Autism in an educational setting through work set in both the home and at school. Professionals within the Autism Spectrum Team will support multi agency working, promote a joint problem solving approach and promote interventions that are evidence based. On occasion the team will work in the home with the young personand/or their family.
EP Educational Psychologist	Educational Psychologist	Educational Psychologists use their training in education and psychology and their knowledge of child development to assess difficulties children may be having with theirlearning. The EP will produce a report giving an overview of the child's strengths and weaknesses. The report will give recommendations for teaching strategies or additional materials to beused with the child, or advice on suitable school types for the child.

CIC Child in Care (supported by the Virtual School)	Social worker Designated Teacher from child's school Foster carer Child	The role of the virtual school is to promote education in the lives of children and young people in care, monitor, challenge and support the termly Personal Education Plans for children in care, allocate and monitor the use of the Pupil Premium Grant for children in care, which is intended to help remove emotional barriers to learning and raise attainment nearer to that of their peers and advise, support and challenge designated teachers, otherprofessionals and carers on educational issues
MARU Multi Agency Referral Unit	Police Domestic Abuse Services Health Services Mental Health Services Education Social Care Housing Youth Offending Services Probation Early Years ServicesFire Services	The Multi-agency Referral Unit (MARU) is the central resource for the whole of Cornwalland Isles of Scilly receiving all safeguarding and child protection enquiries. The MARU is able to trigger a response, the emphasis being on interventions to the child or young person and their family to prevent harm.
EHH Early Help Hub	Child and Adolescent Mental Health (CAMHS) Early Support - Supporting Change in Partnership (SCIP) Early Years Service Family Group Conferencing Family Support	The 'front door' to Early Help services led by Cornwall Council and Cornwall FoundationTrust. Staff within the Early Help Hub will decide whether the child / young person is eligible forsupport and which service is most appropriate. This is usually in discussion with the person making the request and/or young person/family. Who is eligible for early help services?

Children and young people who are aged pre-birth to 18. If a young person has a special Health Visiting (over 2 educational need or disability, who have a need for early help care and support, this is extended up uears) (including ASD, ADHD, Tics, to age 25. and learning, sensory and coordination difficulties) Parenting Who can request Early Help services? Support Portage Professionals, parents and young people can request early help. School Nursina Parents/carers must have Parental Responsibility (PR) if requesting a service for a child. Young people Speech and Language Therapy must be old enough to consent for support themselves (aged 13 or above). Professionals must gain Supporting Change in Partnership consent from a parent or competent young person to make a request for help. (SCIP) Taraeted Youth Support Some Early Help services can only be requested by a professional. Professional request only: Children's Community Nursing/Diana Nurses and **Psuchologists** Early Support - Team Aroundthe Child (TAC) Neurodevelopmental Assessment (including ASD, ADHD, Tics, and learning, sensory and coordination difficulties) Paediatric Epilepsy Nurse Specialists Video Interactive Guidance Parent(s) A meeting between the family and different professionals to find support and help for a family where a TAC referral has been made for Early Support/Early Help This is a stage belowChild In Need status or Child Carers Team Around the child Protection and is not a statutory process. Child Whichever other agencies are involved. (eq: Family Worker, Health Visitor, School Nurse, Teachers, SENCO, Speech Therapist, CAMHS and/or any other support worker who mightbe working with the family or able to offer extra support.)