



**HILL VIEW**  
PRIMARY ACADEMY

*Reach for the Stars!*

# Special Educational Needs and Disabilities

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## Key Staff:

**Miss V Buckland**

Head Teacher

**Mrs L Knapper**

Assistant Headteacher – Inclusion & SENDCO

If you have any concerns regarding your child's learning, please raise it with the class teacher in the first instance. If you would like to discuss any concerns with a member of the SEND team, please use the email address below.

Email: [office@hillview.bournemouth.sch.uk](mailto:office@hillview.bournemouth.sch.uk)



September 2022

HILL VIEW PRIMARY ACADEMY

Written by: SEND Team



# Information Report – 2022/2023

## School Context

Hill View Primary Academy is a large school in an urban suburb of Bournemouth and is part of REACH South Academy Trust. It is a three form entry school catering for pupils aged 4 – 11 with 598 children on role. Hill View Primary provides a happy, secure and stimulating learning environment with children at its heart.

## Values and Ethos

At Hill View Primary School, we follow the ethos values of ASCENT. ASCENT stands for Aspire, Success, Community, Excellence, Nurture and Trust. These values follow us all through our time at Hill View as they are embedded throughout the curriculum to support the children as they 'Reach For The Stars'. The ethos values determine how we behave and respond to one another, what we expect and guide us on a secure pathway of happiness, achievement and fulfilment.

## SEND Statement of Intent

At Hill View Primary Academy, it is our intent to demonstrate our commitment to the equal inclusion of all pupils in our school. We recognise the diverse and individual needs of all our pupils. All pupils are valued equally, regardless of where their abilities lie. All pupils are entitled to have access to a broad, balanced, and relevant curriculum, which is differentiated to meet individual needs in both content and styles of learning. Hill View staff recognise and are committed to fulfilling their responsibility to ensure that every pupil has an equal opportunity to attain good outcomes in their learning, progress and personal development, removing barriers to learning.

It is our underlying belief that every child should feel valued and experience the feeling of success in a wide range of experiences at Hill View both from our bespoke curriculum and beyond. We believe that through providing many ambitious and varied planned learning experiences, we can enable our children to feel positive, resilient and

confident learners. We place a high priority on ensuring we foster children's physical and mental health and wellbeing.

## Implementation

This intent is implemented through the school's engaging, exciting and empowering curriculum that equips children for today and the future. Our ASCENT values are embedded throughout our school curriculum and beyond, and exemplify our commitment to the development of well-rounded, aspirational life-long learners, who strive to be a part of a successful Community of Excellence rooted in Trust and Nurture.

The implementation of the curriculum for SEND children is in-line with the whole school intent, implementation and the SEND Code of Practice; it is supported through the SEND graduated approach, Quality First Teaching and the use of key, measurable interventions, when needed.

In a nutshell, at Hill View, our curriculum is a curriculum for all and is delivered to allow ALL children to access it- irrespective of learning need or difficulty.

This is translated through.

All of the Curriculum Implementation points AND

Early Support Plans for ALL children on the SEND Register,

SEND Quality Standards,

SEND Quality standards for pupil voice.

For more information, please see Appendix 1.

## **What is the definition of SEND?**

- A child or young person has SEND if they have a learning difficulty or disability which calls for special educational provision to be made.

- A child of compulsory school age or a young person has a learning difficulty or disability if they have significantly greater difficulty in learning than the majority of others of the same age or has a disability which prevents or hinders them from making use of facilities of a kind generally provided for others of the same age in mainstream schools.

The SEN Code of Practice states the four different areas of need. These are:

- Communication and interaction
- Cognition and Learning
- Social, emotional and mental health
- Sensory and/or physical

| Area of need                  | Explanation of this need – taken directly from the SEND Code of Practice 2015  |
|-------------------------------|--|
| Communication and interaction | <p>Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.</p> <p>Children and young people with ASD, including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others</p> |
| Cognition and Learning        | Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide  |



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|  | <p>range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where 98 children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.</p> <p>Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.</p> |
|--|--|

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| Social, emotional and mental health difficulties | <p>Children and young people may experience a wide range of social and emotional difficulties, which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorders, attention deficit hyperactive disorder or attachment disorder. All schools will consider the effects of trauma and ACEs (Adverse Childhood Experiences) and how they impact on pupils and their families.</p> |
| Sensory and/or physical needs                    | <p>Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI)</p>  |

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|--|--|
|  | <p>will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties.</p> <p>Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health.</p> <p>Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers</p> |
|--|--|

### **How does Hill View Primary Academy identify children with Special Educational Needs?**

We have rigorous monitoring in place in the school, following the School's Graduated Approach (Appendix 2), which tracks the attainment and progress made by all children over each school year. We work together to moderate and scrutinise assessment data, which means we can identify children who are not making the expected progress and who may require extra support or interventions. If teachers have any concerns regarding a child in their class, they will initially discuss these concerns with you and also with the Special Educational Needs and Disability Coordinator (SENDCo).

Identification of children with special needs may also come from other areas, including parents and guardians, health professionals, such as the school nurse, a GP or Paediatrician referral, health visitor, the speech and language service or transition information from other schools.

We understand that children may have different needs at different times during their school life and not making expected progress does not always mean that a child has Special Educational Needs.

### **What should I do if I think my child may have Special Educational Needs?**



If you have any concerns about your child, in the first instance, please speak to your child's class teacher or make an appointment through the school office on 01202 514109 to speak to the SENDCo. A meeting will be organised to discuss your concerns in more detail and will include:

- Listening to your concerns
- Gathering information about your child's development
- Planning any additional support your child may need
- If needed, discussing any referrals to outside professions to support your child's learning.

### **How will Hill View Primary Academy support my child?**

At Hill View Primary Academy, we believe firmly in inclusion and support children to engage with a rich and varied, integrated curriculum. The child's class teacher will adapt the environment, pedagogy (teaching styles) and curriculum to meet individual needs, while working closely with the SENDCo throughout. We value the achievements of all children and are committed to ensuring that children feel happy and confident. We aim to inspire them to become independent learners.

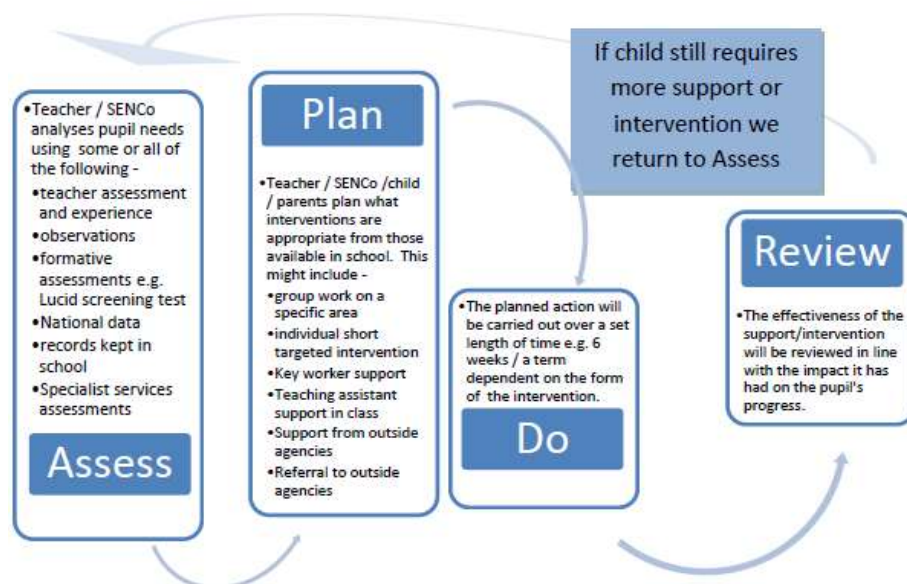
All children in school will get support that is specific to their individual needs. The SEND Code of Practice has two levels of additional support, these are:

- School support
- Educational, Health and Care Plans

Support is available to all children through Quality First Teaching, which includes differentiation and allows for different learning styles. Class work is differentiated according to need so that children are able to access the different areas of the curriculum at their own level. Children will be challenged through effective questioning and differentiation in class. This Quality First Teaching is supported by the school's SEND Quality Standards (appendix 3) that all teachers utilise to ensure consistency of provision.

Some children may require further support to work on specific skills. This might be achieved through an individualised intervention to support the child's needs or disability. This could be provided by the class teacher, other school staff or specialist staff from outside agencies. These children will have identified targets or interventions to support their needs.

This additional support involves a cyclical four-stage process as stated in the SEN code of Practice, 'Assess, Plan, Do and Review'. Parents and child will be included in this process as far as is reasonable.



### How is extra support allocated to children?

All schools are required to offer notional funding towards supporting children with SEND out of their overall budget, in the case of an academy, from their General Annual Grant (GAG). During the 'Assess, Plan, Do and Review' cycle, the amount of additional support might increase as the understanding of your child's needs increases. Where, despite the school having taken relevant and purposeful action to identify, assess and meet the SEN of your child without seeing the expected progress being achieved, the school or parents may consider requesting an Education, Health and Care (EHC) assessment through the Local Authority.



*'The purpose of an EHC plan is to make special educational provision to meet the special educational needs of the child or young person, to secure improved outcomes for them across education, health and social care and, as they get older, prepare them for adulthood.'* SEND Code of Practice 2014.

The different types of support available for children with SEND over and above Quality First Teaching at Hill View are:

| For Communication and Interaction  | By                                    | For   |
|--|---------------------------------------|---|
| Improving pronunciation within speech  | Teacher / TA/Learning Mentor          | Children with specific difficulties in pronunciation of words.  |
| Receptive and expressive language programmes   | Teacher / TA/Learning Mentor          | Children highlighted as having a particular difficulty in this area by SALT or specialist teacher.                              |
| Understanding and using social rules of communication using visual communication cards | Teacher / TA / ELSA /Behaviour Mentor | Children who find it difficult to form friendships with their peers / communicate with their peers at an age appropriate level. |

| For Cognition and Learning   | By                           | For  |
|--|------------------------------|--|
| Pre-teaching sessions linked to learning and vocabulary in the classroom.  | Teacher / TA/Learning Mentor | Children who have been identified as needing a short, intensive input to reinforce and embed learning. |
| Small group work in or outside of the classroom linked to specific needs e.g. memory skills, extra phonics work, additional number work. | Teacher / TA/Learning Mentor | Children who have been identified with a specific difficulty in a specific area of learning.           |
| Short individual regular inputs on a specific area of learning e.g. whole word reading, memory activities                                | Teacher / TA/Learning Mentor | Children who have been identified as needing a short, intensive input to reinforce and embed learning. |

|  |                                    |  |
|--|------------------------------------|--|
| Precision teaching   | Teacher /<br>TA/Learning<br>Mentor | Children who have been identified with a specific difficulty in a specific area of learning. |
| <p>SNAP- SNAP-SpLD (Specific Learning Difficulties) and SNAP-B (Behaviour) are online assessments designed to pinpoint specific learning and behavioural difficulties which, unidentified, may limit a child's potential to learn.</p> <p>SNAP is short for Special Needs Assessment Profile.</p> <p>SNAP SpLD includes 86 interventions for children aged 4–6, and 134 interventions for those aged 7–16.</p> | Teacher /<br>TA/Learning<br>Mentor | Children who have been identified with a specific difficulty in a specific area of learning. |
| <p>Dyslexia Gold- Dyslexia Gold goes Beyond Phonics to address the real reason children struggle with reading.</p> <p>We address vision problems like convergence insufficiency and poor tracking as well as auditory problems, like the phonological deficit to build all the skills needed to read.</p>  | Teacher /<br>TA/Learning<br>Mentor | Children who have been identified with a specific difficulty in a specific area of learning. |

| For Social, emotional and mental health difficulties   | By   | For   |
|--|--|---|
| Key worker support – Adult who builds a relationship with the child / young person in order to help them manage the classroom more appropriately and reduce their need to use inappropriate behaviour. This can take the form of short sensory breaks, check ins | Key workers<br>SENDCo/Assistant<br>SENDCo<br><br>Behaviour<br>Mentor | Children whose behaviour demonstrates they are struggling to manage their emotions within the classroom or among their peers and this is directly affecting their learning. |

|   |   |   |
|---|---|---|
| after playtimes and specific support for certain lessons which children find more challenging.  |   |   |
| Individual/small group sessions on self-esteem, understanding emotions etc.   | ELSA  | Children whose behaviours demonstrate a need in this area e.g. becoming withdrawn, angry, overly anxious  |
| Counselling – Trained adult who works with a child who is finding it difficult to identify, voice or cope with issues within their lives – usually associated with grief, loss or separation  | Counsellor  | Children who have been identified as having difficulties coping with personal issues that are directly affecting their ability to learn.                                    |
| Use of the 5-point scale and visual communication cards to develop an understanding of different emotions and how to manage them to self-regulate and where needed manage own behaviour choices.  | Teacher/TA<br><br>SENDCo/Assistant<br>SENDCo<br><br>Behaviour<br>Mentor               | Children whose behaviour demonstrates they are struggling to manage their emotions within the classroom or among their peers and this is directly affecting their learning. |
| Use of the PACE approach (Playfulness, Acceptance, Curiosity and Empathy) and the phoenix room to build relationships with the child/young person to help them manage the school environment and reduce inappropriate behaviours or anxieties.  | Teacher<br><br>Keyworker<br><br>SENDCo/Assistant<br>SENDCo<br><br>Behaviour<br>Mentor | Children whose behaviour demonstrates they are struggling to manage their emotions within the classroom or among their peers and this is directly affecting their learning. |
| Place 2 be- Our therapeutic service delivery approach: Is underpinned by an evidence-based and integrative therapeutic method. It has three broad strands of therapeutic influence – Person-Centred, Psychoanalytic and Systemic – that are brought together in everyday practice to inform and guide Place2Be practitioners in their work. It also has as elements of Cognitive Behavioural Therapy and Solution Focused Therapy | Place 2 Be<br>counsellor  | Children whose behaviour demonstrates they are struggling to manage their emotions within the classroom or among their peers and this is directly affecting their learning. |

| For Sensory and or Physical Needs                                | by                              | for  |
|--|---------------------------------|--|
| Sensory support/sensory box                                      | Teacher / TA / Behaviour Mentor | Children who have been identified as requiring sensory support to either energise or relax them. |
| Enlarged text/Individual text/Coloured overlays etc.             | Teacher                         | Children with visual difficulties  |
| Pencil grips, special scissors, etc.                             | Within class                    | Children with identified motor skills difficulties   |
| Small group or individual session on fine and gross motor skills | Teacher / TA                    | Children with identified motor skills difficulties   |
| Alternative recording sources e.g. Ipads, voice recorders etc.   | Teacher / TA                    | Children with identified needs related to motor skills or hearing / visual needs                 |

### **What support will there be for my child's overall well-being?**

At Hill View Primary Academy, children are treated as individuals and cared for as individuals. As well as the school's ASCENT Ethos Values (Aspire, Success, Community, Excellence, Nurture and Trust) that every member of Hill View subscribe to and follow, we also teach throughout the curriculum, emotional intelligence, collaboration and independence. In addition, the school uses 'SCARF' in order to deliver health, emotional, social and moral education.

For children who need additional social and emotional support, staff would make use of the SEMH graduated response process, that includes the use of different techniques as part of a structured intervention or holistic approach (appendix 4). We currently have a Teaching Assistant who is trained as an Emotional Literacy Support Assistant (ELSA). Their role is to support children in school to manage their emotions, confidence and friendships. This is always discussed and agreed with parents/ guardians.

Additionally, we have Learning Mentors, who work closely with staff and pupils to promote the school ethos values and improve learning outcomes for identified children. This could be those who are not making expected progress or who may require additional support to moderate and understand their own emotions and behaviours.

We have a designated mentor for Children in Care, who carries out more specific interventions. The designated Mentor has received specific additional training from Educational Psychologists. Her role is to become a key attachment figure and secure base for the pupils they work with. Through attachment based mentoring she supports pupils to develop their self awareness, understanding of relationships and increase their ability to engage in school. Designated Mentors meet with a pupil on a daily basis to provide support. Mentors use solution focused child centred coaching and therapeutic techniques to identify and work on goals. Sessions can be used to help prepare pupils for their day, problem solve difficulties, debrief and draw out learning from their day.

Half a day a week we have a member of the Mental Health Support team, who comes in to work with; children either 1;1, in small groups/whole class, parents and carers' and staff. MHSTs have three core functions: to deliver evidence-based interventions for mild-to-moderate mental health issues; support the senior mental health lead and inclusion team in each school or college to introduce or develop whole school or college approach and; give timely advice to school and college staff, and liaise with external specialist service to help children and young people to get the right support and stay in education.

**Our school is committed to educational practices which Protect, Relate, Regulate and Reflect:**

**Protect**

- Increased 'safety cues' in all aspects of the school day; 'meet and greet' and an open door policy for informal discussions with parents/ carers.

- Staff trained in 'PACE' modes of interaction (Hughes 2015); being warm empathic, playful and curious (proven to shift children out of flight/fright/freeze positions).
- Staff ensure that interactions with children are socially engaging and not socially defensive, to decrease likelihood of children relating defensively (flight/fright/freeze).
- A whole school commitment to cease all use of harsh voices, shouting, put downs, criticism and shaming (proven to be damaging psychologically and neurologically).
- Staff 'interactively repair' occasions when they themselves move into defensiveness.
- Pedagogic interventions that help staff to get to know children better on an individual basis
- School staff adjust expectations around vulnerable children to correspond with their developmental capabilities and experience of traumatic stress. This includes removing vulnerable and traumatised children in a kind and non-judgmental way from situations they are not managing well (e.g. children who are continually triggered into alarm states in the main playground can access a calmer, smaller areas with emotionally regulating adults).

### Relate

- A whole-school commitment to enabling children to see themselves, their relationships and the world positively, rather than through a lens of threat, danger or self-blame.
- Vulnerable children provided with repeated relational opportunities (with emotionally- available adults)

### Regulate

- Relational interventions specifically designed to bring down stress hormone levels in vulnerable children, enabling them to feel calm, soothed and safe. This is to support



learning, quality of life and protect against stress-induced physical and mental illness, now and in later life.

- Evidence-based interventions that aim to repair psychological damage and brain damage caused by traumatic life experiences, through emotionally regulating, playful, enriched adult-child interactions.

### Reflect

- Staff training and development and training in the art of good listening, dialogue, empathy and understanding (instead of asking a series of questions/ giving lectures) given by the SENDCo.
- Provision of skills and resources to support parents and staff
- PSHE (Personal, Social and Health Education) and SCARF content enables children to make informed choices about how they relate to others, how they live their lives, and how they treat their brains, bodies and minds.

For children who may need specialist support we can refer children to the 'The provision of Specialist Child and Adolescent Mental Health Services', (CAMHs).

### **How does the school seek specialist advice / assessments?**

As part of the 'Assess, Plan, Do, Review' process and in discussion with yourselves, we may make referrals to specialist services when the interventions we are using in school are not making a significant enough difference to your child's progress. The specialist professionals may work with your child to understand their needs and make recommendations, which may include:

- Making changes to the way your child is supported in class e.g. some individual support of changing some aspect of teaching to support them better.
- Support to set better targets which will include their specific expertise. The following services are available to our school –

| Name of service                          | What they provide   |
|--|---|
| Educational Psychologist (EP)            | This service will assess your child's cognitive ability – their ability to learn. They will look at their overall skills and the way they are likely to learn best e.g. through listening, verbalising or doing.  |
| BOOST<br>Bournemouth<br>Outreach Service | Education Outreach Service For Bournemouth, Christchurch and Poole Schools, provided by Tregonwell Academy for Social, Emotional and Mental Health (SEMH) needs and by Linwood School for Autism (ASC) and Speech Language and Communication Needs (SLCN). They work in partnership with schools to support High Quality Teaching and Learning by BOOSTING skills and strategies to improve outcomes for pupils with SEND in schools. |

|  |  |
|--|--|
| Speech and Language Therapist (SALT)               | This service assesses your child's speech, their pronunciation of words, their understanding of language, how well they understand the information being given to them in the classroom/home and their ability to use vocabulary to express themselves.  |
| Child and Adolescent Mental Health Service (CAMHS) | This service provides support for children who have mental health difficulties. This can include specific mental health illnesses and also support during life changing situations that have a mental health impact on a child.  |
| Community Pediatrician                             | The community pediatrician provides access to a variety of services within the medical profession. They will assess a child's needs and could make a diagnosis of a specific disorder. They can also provide access to Occupational Therapy and Physiotherapy, who in turn will provide advice to schools of how best to support your child's needs. |
|  | The school nurse will provide hearing tests for your child. They can also work with parents in relation to sleeping patterns, toilet   |

|   |  |
|---|--|
| School nurse                            | training and diet. The school nurse provide support to schools when creating 'Health care plans' for your child and providing necessary training in how to manage particular medical diagnoses.  |
| Hearing and Visual Difficulties Service | This service supports children with specific hearing or visual difficulties within school and will come into school to assess their classroom and resources available to them. They will suggest ways the school can improve the offer to the child in order for your child to be able to learn. |

### **How will I know how my child is doing?**

We have a rigorous assessment system that tracks attainment and progress against National expectations and age related expectations every term, from Year 1 through to Year 6. In Reception, assessments are formally recorded in line with the Early Years Foundation Stage Profile. Alongside this, all class teachers continually assess each child in the classroom, noting areas in which they may need some further support. If your child is not making expected progress, this will be discussed with you by the teacher at parents' evenings or during extra meetings arranged by your child's teacher.

If your child is in the category of 'SEN Support', targets and outcomes for their individual provision will be recorded and shared with you, using an Early Support plan. If your child has an 'Education, Health and Care Plan' your child's outcomes and targets will be written with you and reviewed with you annually. Progress will be shared with you at parent consultations at least twice a year although you can make an appointment to speak to your child's classroom teacher, the SENDCo at any point during the year.

### **What training have the staff supporting SEND had?**

At Hill View, we believe in professional development and aim to ensure all our staff have the understanding they need in order to support your child. When a new member of staff joins the school, we ensure they understand the systems within school and

they are given information about the children they are working with. Advice and support comes from year teams, other staff and the SENDCo within school and specialist advice is sought from the Specialist services available to the school. Should further training be necessary, this will be organised as soon as is possible to ensure they have the skills necessary.

Some members of staff have had specific training to support children with specific needs, such as children with ASD, Attachment Difficulties, Physiotherapy, Speech, Language and Communication difficulties, as well as children with social and emotional needs.

If your child needs specialist support from an outside agency, such as the Speech and Language Service (SALT), BOOST, Educational Psychologist (EP), Occupational Therapist (OT) or school nurse, we will always discuss this with you first.

The senior leadership team within school are constantly moderating needs within the school and, where an area of concern is highlighted, whole school training could be organised to ensure all staff understand specific learning difficulties and appropriate teaching or support strategies that could be utilised.

### **How will you support my child when they are leaving the school or moving on to another class?**

At Hill View we understand the importance of preparing children for all types of transitions, including from school year to school year and, especially, when changing Key Stage or school. In order to do this we:

- Provide opportunities for your child to visit their new class/school before most children have this opportunity.
- Create a visual social stories to take home about their new teacher/class / school for you to share with them, especially if the change happens after a holiday.
- With our ELSA and learning mentors, provide opportunities for them to talk through their feelings, both fears and expectations.

- Arrange Transition Meetings between yourself, old and new class teachers and the SENDCo, if needed, to discuss your child.
- For Year 6 children with SEND, the SENDCo and will attend a transition event run by the authority to pass on information and discuss SEND children with the secondary school SENDCo.
- Arrange opportunities to visit the new school with you or provide information about who to contact if you would prefer.
- The class teacher/SENDCo will provide information about the successful strategies, interventions, equipment needed for your child to have the best opportunity at success in their new class / school.

### **How have we made this school accessible to children with a disability?**

At Hill View we want to ensure all children feel part of the school community and can access all opportunities given. At present we have:

- Wheelchair accessible entrances and doors around school.
- Accessible toilets.
- Acoustically adapted classrooms and hall to support children with hearing loss.
- Differentiated worksheets, books, activities and resources as recommended by specialist services.
- Medical advice and support when appropriate.
- A full Accessibility Plan can be found on the school website.

### **Where can I get further information?**

The information in this report feeds into Bournemouth, Christchurch and Poole Council's local offer, which details support, opportunities and services available to children and young people in their area who have SEND. Information about the BCP Local Offer can be accessed through the local offer website at:

<https://www.bcpfamilyinformationdirectory.com/kb5/poole/fis/localoffer.page>

## **Appendix 1: SEND Intent, Implementation & Impact Statement**

### **SEND Statement of Intent**

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The implementation of the curriculum for SEND children is in-line with the whole school intent, implementation and the SEND Code of Practice; it is supported through the SEND graduated approach, Quality First Teaching and the use of key, measurable interventions, when needed.

In a nutshell, at Hill View, our curriculum is a curriculum for all and is delivered to allow ALL children to access it- irrespective of learning need or difficulty.

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Early Support Plans for ALL children on the SEND Register,

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SEND Quality standards for pupil voice.

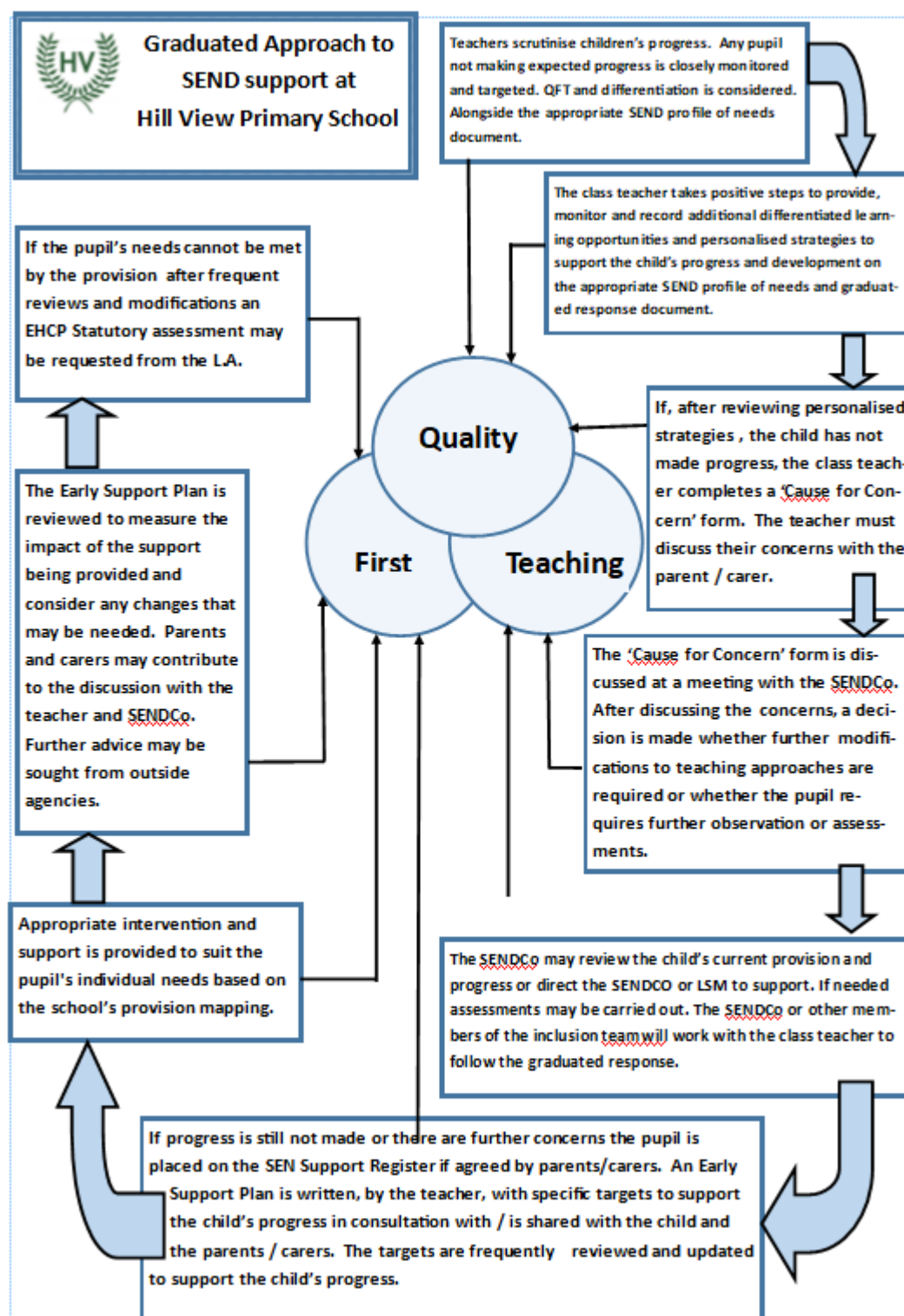
These lead to:

- Good educational outcomes in the basic skills of Reading, Writing & Maths.
- A foundation & development of character to help develop confident, successful and respectful citizens.
- A taster of 21st Century skills through memorable and meaningful learning.
- Learning behaviours that provide a readiness for the next stage of their education.





## Appendix 2: Hill View Primary Academy Graduated Approach



### Appendix 3: Hill View Primary Academy SEND Quality Standards

| Area                     | Standards   |
|--------------------------|---|
| Learning Environment     | <p><b>At Hill View, we will ensure that ALL learning environments include:</b></p> <ol style="list-style-type: none"> <li>1. A visual timetable appropriate to the age and phase of the children,</li> <li>2. Visual support resources,</li> <li>3. Resourcing for all (C.P.A, words mats, etc.),</li> <li>4. Appropriate displays used to supplement learning.</li> </ol>  |
| Teaching and Learning    | <p><b>At Hill View, we will ensure that ALL teaching and learning includes:</b></p> <ol style="list-style-type: none"> <li>1. Clear use of Quality First Teaching strategies,</li> <li>2. Clear instructions, broken down with acceptable processing time,</li> <li>3. All children taking an active role in the learning, alongside their peers,</li> <li>4. Clear differentiated questioning to support ALL learners,</li> <li>5. High expectation for ALL learners, demonstrated through inclusive differentiation (by outcome<sup>(1)</sup>, not task),</li> <li>6. Varied and appropriate use of additional resources and forms of recording learning, to allow ALL children to demonstrate understanding.</li> <li>7. Clear, explicit modelling of new concepts, using the Rosenshine approach,</li> <li>8. Cut-away teaching, led by high quality questioning for Afl,</li> <li>9. Emphasis on positive behaviour and praise to support SEMH,</li> <li>10. Mixed ability groupings/pairings to allow high quality learning discussion,</li> <li>11. A variety of teaching and learning strategies,</li> <li>12. SMART targets, referenced to and used to support learning,</li> <li>13. Language and terminology modelled and corrected, where appropriate.</li> </ol> |
| Additional Adult Support | <p><b>At Hill View, we will ensure that ALL additional adult support will:</b></p> <ol style="list-style-type: none"> <li>1. Add value to the learning taking place,</li> <li>2. Allow for ALL pupils (including those with SEND) to receive appropriate support from a qualified teacher,</li> <li>3. Support the development of independence in learning through the use of independent learning strategies.</li> </ol>   |
| Intervention             | <p><b>At Hill View, all interventions will be:</b></p> <ol style="list-style-type: none"> <li>1. Delivered in a timely manner,</li> <li>2. Measureable and run for a short time, allowing clear progress and evaluation,</li> <li>3. Selected or designed to support the needs of the children,</li> <li>4. Embedded or supplemented through classwork.</li> </ol>  |

## Appendix 4:

| Level of Need              | Interventions  |
|----------------------------|--|
| Wave 3                     | <b>Play Therapy, Thinking Bricks &amp; Mosaic</b><br>External profession support – please see individual referral systems and costings.  |
| Wave 2                     | <b>ELSA &amp; Lego Therapy</b><br>Class Teacher/Adult to complete referral forms (see appendix 1 & 2)  |
| Wave 1                     | <b>Check-ins &amp; Social Groups.</b><br><u>Check-ins:</u> Email SEND Team to ensure all are aware. Used as a time-limited approach with a scaled evaluation throughout.<br><u>Social Groups:</u> Class teacher to complete a referral form (per child) – please see appendix 3. |
| Universal/Initial Concerns | TA and Class Teacher check-ins and use of Graduated Response Documents.  |

**Wave 3 can include support from the designated mentor for Children in Care, Place 2 be or further support from the Mental Health Team in Schools (CAMHS).**