SEND banding framework

This banding framework is underpinned by the key legislation of the Children and Families Act 2014 and the Special Educational Needs and Disability Code of Practice: 0-25 years, 2014. It is a model spreading across four levels relating to the four areas of Special Educational Needs (SEN) identified in the SEN Code of Practice: Cognition and Learning, Communication and Interaction, Social Emotional and Mental Health, and Physical and Sensory needs.

Schools Funding

There are three elements of funding that schools receive to support young people who have been identified as having Special Educational Needs and Disability (SEND).

- **Element 1 funding**: this is the general pre-16 core funding included within the funding through the local schools funding formula.
- **Element 2 funding:** this is from the '*notional special needs funding*' within the general funding for mainstream schools. Schools meet the first £6,000 of additional support costs from delegated funds within school budget share and academy grant, calculated under the local schools funding formula.
- **Element 3 funding:** this is the agreed per pupil top up paid by the commissioning local authority and is the amount given to both mainstream and special schools to support individual children with an EHCP.
    - **Special Schools:** receive £10,000 for every place commissioned. This is not funding for individual children but general funding for special schools as all their children will have SEND.

High Needs Block

The High Needs Block (HNB) is the funding provided by the government for the Local Authority (LA) to support pupils with Special Educational Needs and Disabilities (SEND), Alternative Provision (AP) and a range of SEND services. **Element 3 Top-Up funding and place-led funding for special schools and special resource provisions in mainstream schools are funded from the HNB.**

Banding descriptors

For each category of Special Educational Need a set of descriptors ranging from level 1 to 4 have been developed which denote the increasing needs of children/young people. The banding descriptors provide detailed guidance as to relevant SEND that a child/young person may display, and *suggested provision to meet these needs*. The descriptors should be cross-referenced with pupils' EHCPs to help assign an appropriate level.

Definitions of level of need

Level 1 Moderate: Pupils with a moderate level of need experience greater difficulty than their peers in acquiring key skills and understanding concepts. Pupils may experience challenges with for example, communication, cognition and learning, emotional regulation, concentration, social interaction and co-ordination. As result of these difficulties pupils may have attainments well below expected levels in some or all areas of the curriculum despite appropriate interventions. Pupils will require additional adult support which could be made up of a combination of paired, small group and 1:1 support within the classroom, in addition to targeted intervention programmes.

Level 2 Significant: Pupils will experience difficulties in multiple areas of development that are more pronounced than those seen at moderate levels of need. They find it very challenging to acquire key skills and understand concepts, experiencing significant difficulties with for example, communication, cognition and learning, emotional regulation, concentration, and social interaction and co-ordination. As result of these difficulties pupils may have attainments well below expected levels in most or all areas of the curriculum despite appropriate interventions. Pupils will require additional adult support which would usually be required on a 1:1 basis within the classroom, in addition to targeted intervention programmes.

Level 3 Severe: Pupils will have severe difficulties that greatly impact their ability to engage with learning activities across the curriculum. They experience highly substantial challenges in areas such as cognition and learning, emotional regulation, mobility, coordination, communication, social interaction, perception, and self-help. Pupils with severe difficulties usually require substantial support in all areas of the curriculum, including teaching of self-help, independence, and social skills, either 1:1 and/or within a high adult: pupil ratio continually throughout the day.

Level 4 Profound and Multiple: Pupils will have complex and wide-ranging challenges that affect multiple areas of their development and ability to engage with learning at a very early stage. Pupils with profound and multiple needs often have difficulty understanding and responding to communication, may have limited mobility, and may experience complex health needs, physical disabilities or sensory impairments. Pupils are likely to need sensory stimulation and a curriculum broken down into very small steps. Pupils will require intensive adult support continually throughout the day within a high adult: pupil ratio for all areas of development including mobility, communication and personal care.

The following banding descriptors outline suggested provisions for each category of need. However, these are examples, not an exhaustive list. The specific provisions for each case will be detailed in the EHC plan.

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Communication & Interaction

Communication and Interaction includes difficulties in speech, language, and communication that impact social interaction, comprehension, and expression. It also covers conditions such as Autism Spectrum Condition (ASC) where social communication challenges are a key feature.

Category	Level 0	Level 1	Level 2	Level 3	Level 4
Needs	Occasional challenges with communication, such as: some difficulties with word retrieval, occasional misinterpretation of social cues. Can engage in conversations and learning with minimal support, though, needing occasional reassurance or small adaptations. Please see **Ordinary Available Provision** document for further details on needs	Moderate difficulties in expressive and/or receptive language skills that impact social interaction and engagement in learning. Moderate difficulties in intelligibility of speech sounds and/or fluency of speech that impact social interaction and engagement in learning Moderate difficulties with social communication, such as poor conversational skills, difficulty interpreting tone of voice, sarcasm, or body language. Moderate difficulties understanding social rules and interactions, leading to peer difficulties. *Several times a day:* ▪ Finds turn-taking in conversations or in whole class activities challenging. ▪ Unable to indicate they're listening or appear disinterested in peers. ▪ Becomes anxious or dysregulated when routines change. ▪ Can become fixated on a particular interest, making it hard to shift attention. ▪ Rigid behaviours ▪ Repetitive behaviours (e.g., hand flapping, echolalia). ▪ Shows heightened sensory sensitivities (e.g., finds noisy and/or busy environments difficult).	Significant difficulties in expressive and/or receptive language that impact social interaction and engagement in learning. Significant difficulties in intelligibility of speech sounds and/or fluency of speech that impact social interaction and engagement in learning Limited use of language (e.g. significant challenge with turn-taking, staying on topic, understanding abstract language). Significant difficulty with maintaining focus and attention for teaching and listening to information and instructions. Shows significant levels of social anxiety and/or inappropriate social responses. *On a regular basis throughout the day:* ▪ Finds turn-taking in conversations or in whole class activities challenging. ▪ Unable to indicate they're listening or appear disinterested in peers. ▪ Becomes anxious or dysregulated when routines change. ▪ Can become fixated on a particular interest, making it hard to shift attention. ▪ Rigid behaviours ▪ Repetitive behaviours (e.g., hand flapping, echolalia).	Severe difficulties with expressive and receptive language that limits social interaction and engagement to learning. Severe difficulties in intelligibility of speech sounds and/or fluency of speech that impact social interaction and engagement in learning Uses very limited verbal language, echolalia, or highly repetitive speech patterns. Severe social communication difficulties due to communication barriers. Severe difficulties with understanding instructions, concepts, and social cues, leading to high levels of anxiety and behavioural dysregulation. *In most lessons and unstructured times:* ▪ Struggles severely with peer interactions and may react with dysregulation if misunderstood. ▪ Difficulty understanding unwritten social rules, leading to conflicts. ▪ Changes to routine can trigger high levels of dysregulation. ▪ Difficulty expressing needs verbally, possibly leading to disruptive behaviours (e.g., shouting, leaving the classroom). ▪ Ritualistic, rigid and obsessional behaviours.	Profound/Multiple communication difficulties that impacts their ability to learn. Non-verbal or has very limited communication, with extreme difficulty in understanding and using language, even with assistive communication tools. Some pupils communicate by gesture, eye pointing or symbols, others by very simple language. Complex and very limited social communication skills which lead to daily, persistently high levels of dysregulation and anxiety. Unable to recognise and understand other people's feelings and managing their own feelings. Finds extremely difficult to predict other people's intentions and behaviours and imagining situations outside their own routine. *At all the times of the day:* ▪ Strong preference for solitary activities, little engagement with peers or staff. ▪ Intense and frequent dysregulation when routines or sensory environments change. ▪ Huge challenges with transitions. ▪ Obsessional rigid and ritualistic behaviour. ▪ Shows heightened sensory sensitivities.

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			▪ Shows heightened sensory sensitivities (e.g. finds noisy and/or environments difficult).	▪ Shows heightened sensory sensitivities (e.g., finds noisy and/or busy environments difficult).	
Examples of Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within **Ordinarily Available Provision.**	Requires small-group evidenced-based interventions for speech and/or language skills (e.g. Word Aware, Colourful Semantics). Requires additional adult support within the classroom to support listening and understanding of language across the curriculum. Requires small-group evidenced-based interventions for social communication (e.g. role-playing, comic strip conversations). Needs explicit teaching of social rules and appropriate communication strategies. Planned activities for structured social interaction practice.	Requires regular 1:1, paired and/or small-group evidenced-based interventions for speech and/or language skills. Requires regular additional support and substantial adaptations for communication skills, such as communication boards and/or Signalong. Requires structured social communication interventions o*n a regular basis* (e.g. Lego Therapy, Talkabout). Requires direct teaching of social communication skills, with regular reinforcement to support ongoing development. Requires structured, predictable interactions and visual supports to engage.	Requires regular tailored and individualised interventions for speech, language and communication skills (e.g. Curiosity Programme). Requires tailored and individualised strategies and approaches for communication skills, such as communication boards, Signalong and/or Intensive interaction. Highly structured daily routine with minimal unexpected changes. Requires Augmentative & Alternative Communication (AAC).	Requires a consistently modified school environment with substantial timetable adaptations and a high adult-to-pupil support ratio. Highly individualised, intensive, and multidisciplinary support, including Augmentative & Alternative Communication (AAC) such as eye-gaze technology, Signalong, high-tech communication aids. Intensive interaction approach to supporting language and communication needs. Total Communication Approach (sign, symbols, communication books, mats with layout of grids), signing. Highly structured, low-arousal environments. Requires a high adult: pupil ratio for all aspects of the school day.

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Cognition and Learning

This category covers general and specific learning difficulties, including profound learning disabilities and conditions such as dyslexia, dyspraxia, and dyscalculia.

Category	Level 0	Level 1	Level 2	Level 3	Level 4
Needs	Occasional challenges with new concepts but can engage with learning independently. Some concerns about attention, working memory, or academic confidence. Please see **Ordinary Available Provision** document for further details on needs	Literacy and/or numeracy approximately 3 years below Age-Related Expectations (ARE), due to underlying difficulties with cognition and learning. Moderate difficulty with abstract thinking and problem-solving. Moderate challenges with organising materials and managing time to complete tasks efficiently. *Several times throughout the day:* ▪ Finds whole class learning difficult ▪ Finds it difficult to attempt tasks/take risks in learning ▪ Finds it difficult to engage independently with learning tasks.	Difficulties in literacy, numeracy, or across the curriculum due to underlying difficulties with cognition and learning. Approximately 4 years below Age-Related Expectations (ARE). Significant difficulties with working memory, processing speed, problem solving, sequencing, abstract thinking and organisation of information. Significant difficulties retaining skills and information, generalising skills and staying on task. *Regularly throughout the day:* ▪ Finds whole class learning difficult ▪ Finds it difficult to attempt tasks/take risks in learning ▪ Unable to independently engage in learning.	Severe cognitive delay and functioning across all areas of the curriculum. Approximately 50% below the standard expected for their age (5 years below ARE). Severe challenges with basic literacy and numeracy. Severe working memory, problem-solving and processing difficulties. Cannot generalise learning. *In most lessons:* ▪ Finds whole class learning difficult ▪ Finds it difficult to attempt tasks/take risks in learning ▪ Limited ability to engage in learning.	*PMLD:* profound, complex and multiple learning difficulties and needs. In addition, they have significant difficulties in other areas, such as physical disabilities or a sensory impairment. Presents extremely limited cognitive abilities and working at early stages of development. Profound memory, processing, and executive function challenges. *In every lesson:* ▪ Finds it very difficult to engage within learning situations as an individual or as part of a group ▪ Shows limited awareness or interest in the learning environment.
Examples of Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within Ordinarily Available Provision	Requires specific strategies designed to address and support individual challenges, several times throughout the day. Requires additional adult support to scaffold/mediate learning tasks within the classroom. High quality, evidenced-based Literacy and/or numeracy interventions, several times per week. High levels of repetition, reinforcement and opportunities to practice.	Pre-teaching is required regularly throughout the day. Adaptive teaching methods and strategies applied across most subjects. Requires consistent overlearning and alternative teaching approaches. Requires regular modelling of tasks prior to starting, to support understanding.	Requires needs tailored instructions and focused teaching approaches. Highly structured learning environment, with visual, sensory, and interactive elements. Requires substantial adaptations to effectively support his severe learning difficulties. Requires highly individualised curriculum.	Requires a consistently modified school environment with substantial timetable adaptations and a high adult-to-pupil support ratio. Pupils require a high level of adult support, both for their learning needs and also for personal care. They are likely to need sensory stimulation and a curriculum broken down into very small steps. Requires multi-agency involvement. High level of adult support with specialist strategies and intervention.

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AAC and assistive technology.

Social, Emotional, and Mental Health (SEMH)

These needs can vary greatly in how they present. This section includes as much detail as possible, but please use the descriptors as guidance rather than fixed criteria.

Category	Level 0	Level 1	Level 2	Level 3	Level 4
Needs	Experiences short-term distress (e.g. due to life events) but recovers with guidance. Usually able to understand how others feel and respect their feelings and ideas, but not wholly consistent. Occasional difficulties with emotional regulation. Please see **Ordinary Available Provision** document for further details on needs	Moderate emotional dysregulation that impacts learning, progression across the curriculum and/or daily school routines. Moderate levels of anxiety, low mood, or social difficulties. Finds it challenging to manage conflict. Low self-esteem and finds it difficult to take pride in achievements. Unable to focus and pay attention, or to keep going when challenges occur. Finds it difficult to appropriately express how they feel. Unable to cope when change occurs and take little responsibility for their actions. *Several times per day:* ▪ Distracted from tasks ▪ Inattentive to staff ▪ Disorganised	Significant and regular emotional dysregulation impacting learning, progression across the curriculum and daily school routines. Chronic and significant levels of anxiety. Regularly demonstrates intense emotional dysregulation. Significant and regular difficulties with peer relationships due to emotional instability. Often gives up when challenges occur and shows very limited ability to bounce back after difficulties. Does not feel safe enough to take part in work activities because they have not learned how to trust others. Often finds it difficult to start tasks due to low self-esteem. Is often significantly challenged with change and transitions. Does not take responsibility for their actions. *Regularly throughout the day:* ▪ Distracted from tasks ▪ Inattentive to staff ▪ Disorganised	Severe and persistent emotional dysregulation learning, progression across the curriculum and daily school routines. Severe levels of anxiety, depression, or attachment difficulties that prevent learning. Complex trauma affecting emotional regulation and relationships. Risk-taking behaviours (e.g. running away, throwing things at others). Consistently displays intense emotional dysregulation, underpinned by feelings of insecurity and/or anxiety. Unable to share their ideas and shows no pride in their work. Does not accept praise or help from others. Unable to follow the classroom rules and does not have any of the skills required to rebuild relationships when something goes wrong. Unable to cope with change independently, does not take responsibility for their actions. High tendency to feel anxious or frustrated, leading to frequent, and	Profound and complex enduring mental health difficulties (e.g. psychosis, severe PTSD, high-risk self-harm). High risk of harm to self or others. Minimal engagement with adults or peers due to extreme trauma-related responses. Displays complex needs resulting in an inability to engage in learning activities independently. Unable to show any respect to others, they consistently challenge the school rules and never follow them. Does not understand or have any concept of feeling safe or safety. No concept, understanding or experience of self-esteem and confidence. Extremely limited concept, understanding or experience of any positive relationships with others. Extreme dysregulation and anxiety when faced with change, making transitions highly challenging. Completely unable to take responsibility for their actions. *In every lesson:*

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				unpredictable and unsafe behaviours. *In most lessons:* ▪ Distracted from tasks ▪ Inattentive to staff ▪ Disorganised	▪ Sensory behaviours prevent sustained engagement in the curriculum ▪ Oppositional ▪ Avoidant of demands/difficult to direct/rigid behaviours prevent engagement in the curriculum.
Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within **Ordinarily Available Provision.**	Small-group evidenced-based interventions to support SEMH needs (e.g. CBT-based programmes, social skills groups, ELSA, Lego Therapy) several times per week. Individual interventions to support confidence, self-esteem and sense of belonging. Check-ins to support emotional regulation (e.g. meet & greet). Personalised support to support attention, and concentration and task completion. Support from school-based counselling where appropriate.	Requires adult intervention multiple times daily to regulate emotions. Daily check-ins to support emotional regulation (e.g. meet & greet). Small-group evidenced-based interventions to support SEMH needs (e.g. CBT-based programmes, social skills groups, ELSA, Lego Therapy) several times per week. Restorative approaches to support conflict resolution.	Daily support throughout the day for emotional regulation. Small, highly structured environment with low-stimulation areas. Personalised emotional co-regulation strategies (e.g. sensory rooms, de-escalation plans). High staff-to-pupil ratio, with a focus on relationship-building.	Requires a consistently modified school environment with substantial timetable adaptations and a high adult-to-pupil support ratio. Highly structured, small group learning with support in every lesson. Multi-agency collaboration (social care, mental health, education). Sensory and emotional co-regulation interventions embedded into daily routines.

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Physical and Sensory

Physical and Medical

Physical challenges and medical needs can present in many different ways. We have included as much detail as possible in this section, but please use these descriptors as guidance rather than rigid criteria.

Category	Level 0	Level 1	Level 2	Level 3	Level 4
Needs	No significant physical or medical needs impacting learning or participation. Independently uses walking aids or orthotics. Has Mobility issues affected by fatigue Presents with varying responsiveness to sensory input which may lead to anxiety/distress or unexpected behaviour Please see **Ordinary Available Provision** document for further details on needs	Moderate physical disability such as a neurological condition affecting coordination and stamina. Moderate difficulties with physical tasks such as handwriting and PE. Fatigue or pain interferes with participation in learning and social activities. Has an unpredictable long-term condition which sometimes affects their ability to access normal activities. They may experience fluctuating levels of pain and their school attendance may be affected. Needs some assistance with personal care, positioning or getting around. Presents with varying responsiveness to sensory input, easily distracted and upset by noise/touch light leading to distress/unexpected behaviour. .	Physical disability needing significant support with transfer or use of walking aids. Still developing independence in managing personal care, including dressing and toileting (from Year 2 onwards). Fine motor difficulties significantly impact classroom tasks such as using tools. Mobility is significantly impacted. Have some independent mobility e.g. assistance with transfers, use a power chair Have a physical disability that creates a barrier to interacting with others. Has a medical condition that has a noticeable and ongoing impact on their physical health or well-being. The condition causes periods of difficulty, affecting energy levels, comfort, or ability to engage in daily activities. There are fluctuating symptoms that require attention, but the condition remains generally stable over time. Significantly limited in their ability to engage with the curriculum.	Severe physical disability, such as severe cerebral palsy or advanced muscular dystrophy, affecting severely any engagement to learning and independence. Extremely limited fine motor control. Unable to accomplish personal care, self-help and independence skills throughout the school day (from Year 2 onwards). Or needs hoisting for care needs and changing. Has a medical condition that impacts on personal hygiene (catheter, colostomy bags). Has physical or medical needs which require active management by adults to keep them safe and able to access education Is unable to feed self, may be unable to chew food or take food orally. Has very limited fine motor skills e.g. is unable to: mark make; wipe own nose; lift a drink to mouth; grip clothing to readjust it; do/undo buttons; turn over pages of a book The individual has a persistent medical condition that significantly	Profound and multiple physical disabilities, such as tracheostomy dependency, ventilator use. Be profoundly limited in their ability to engage in learning. Has profound and multiple needs affecting mobility, personal care, positioning, movement, transfers and eating/drinking. Is unable to move the majority of their body independently. Limited to non-verbal communication methods. Have additional needs in one or more other area, e.g. EBD, PD. Has a highly complex, life-limiting, or degenerative medical condition that affects all aspects of their functioning. The condition involves complex and ongoing physical challenges, such as neurological, respiratory, or metabolic difficulties. Health is often fragile, with a high level of dependency. The condition may be associated with significant pain, discomfort, or risk of medical complications. Extreme Sensory Challenges on a daily basis.

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			Presents with varying responsiveness to sensory input causing regular distress Regularly exhibit active sensory seeking behaviour such as running or shouting or the need for eating or chewing. With regular sensory breaks and input the CYP is often significantly dysregulated and/or showing signs of high sensory alert	affects multiple aspects of their learning. Symptoms are unpredictable or have a substantial impact on their physical state, limiting their ability to maintain consistent activity levels. The condition may cause sustained and regular periods of dysregulation or discomfort and can have a severe effect on overall health and functioning. Severely limited in their ability to engage in learning. Extreme sensory challenges on a daily basis. With regular sensory breaks and inputs the CYP is extremely dysregulated.	Even with regular sensory breaks and input the CYP is still profoundly dysregulated
Examples of Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within **Ordinarily Available Provision**	Adaptive PE and alternative sports options with rest breaks needed (to manage fatigue). Planned interventions for motor skill development, such as handwriting programmes, fine motor skill groups. Provide Assistive Technology to build independence and develop alternative methods of recording (e.g. keyboarding skills to enhance word processing). Will need one person support for some transfers, for some changes of position. Will need one person support for some personal / self-help needs. Will need the use of an agreed suitable environment for personal care / self-care needs.	Regular (more than twice a week) input from a member of staff to follow physiotherapists and occupational therapists' programmes. Personalised assistive technology (e.g., use of a device for recording) Specialist equipment needed e.g. seating for postural support. Structured sensory plans developed by OT. Fatigue management strategies. Staff trained in manual handling. Will need one person support for all transfers, change of position, support to eat, etc. Will need support for all personal care / self-help needs.	Needs high levels of individual support because of their severe needs. Mobility support (wheelchair, orthotics, hoisting). Assistive technology (eye-gaze, adapted software, or haptic feedback devices). Personalised sensory and therapy programmes (hydrotherapy, rebound therapy). Staff trained in manual handling. Specialised trained staff in sensory regulation and in supporting YP with disabilities in engaging with the curriculum (e.g. use specialist equipment and resources). Will need support for most changes of position.	Bespoke mobility and therapy programmes set by physio, OT, SALT. Highly assistive technology and AAC devices. Complex medical care management within the school setting by trained staff. Able to engage with information using braille/tactile methods which require training to produce resources and equipment. Will need support with every change of position. Will require two trained staff for hoist and sling transfers. Will need two-person support for all personal care/self-help needs.

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Will need to use a low-tech communication aid occasionally to support verbal communication. May require specialist transport and higher staff ratios when being transported or when working off site. Needs frequent sensory breaks and input to regulate.	Will need the use of an agreed suitable environment for personal care / self-help needs. Will need the use of high/low tech alternative methods of recording for some of the time with adult support. Require specialist transport and higher staff ratios when being transported or when working off site. Need some support to engage with the curriculum.	Will require two trained staff for hoist and sling transfers. Will require two-person support for most personal care /self-help needs. Will need the use of specialist equipment and environment for personal care routines. Be communication aid users e.g. 4talk4. Will need specialist equipment and adult support to use alternative methods of recording for most of the time, including use of a scribe. Require specialist transport and higher staff ratios when being transported or when working off site. Any medical procedures necessary can be carried out by an educational professional.	Will need the use of specialist equipment for hoist and sling transfers. Requires close supervision at all times in setting to monitor health and well-being. Will need the use of an agreed suitable equipment and environment for personal care routines. Be users of complex communication aids, e.g. Tellus/ Dynavox. Will need specialist equipment and adult support to use and engage with alternative methods of recording at all times, including use of a scribe. Require specialist transport and higher staff ratios when being transported or when working off site. Needs specialist teaching support across the whole curriculum because of their substantial and complex medical needs.

Physical and Sensory

Visual Impairment

- A visual impairment is caused by an ocular or cerebral condition that cannot be corrected to within the normal range using spectacles or contact lenses.
- Children and young people (CYP) with the same visual condition may experience different levels of functional vision.
- Not all CYP will have a Certificate of Vision Impairment (CVI), as this is a parental choice.
- Functional vision can vary in some conditions, such as Cerebral Visual Impairment (CVI) and Nystagmus.
- Teaching staff should be informed of a student's visual condition and its impact on engaging with learning, independence, and mobility.

Category	Level 0	Level 1	Level 2	Level 3	Level 4

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Needs	No vision impairment but may wear spectacles due to refractive errors which can be corrected. Please see **Ordinary Available Provision** document for further details on needs	Moderate vision loss. May be registered as partially sighted. Daily difficulties due to functional vision, e.g. standard text size; reading for prolonged periods, recognising facial expressions, low-light environments, slow visual processing, visual fatigue towards the end of the day.	Significant vision impairment and / or deteriorating condition. May be registered as partially sighted/significant sight impaired. Cannot read standard text and diagrams. Independent mobility may be limited, especially in unfamiliar environments. Visual fatigue is a significant barrier throughout the day.	Severe vision impairment. May be registered as severely sigh impaired or blind. No useable vision to read and engage with text and diagrams or navigate environments.	Profound vision impairment, and multiple disabilities Visual difficulties cannot be addressed using standard tactile and/or auditory strategies. Cannot be independent with navigating the environment safely.
Examples of Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within **Ordinarily Available Provision.**	Requires daily moderate adaptations such as large print materials or use of magnification tools. Assistive technology may be needed occasionally to support with large quantities of text, to produce and engage with work efficiently and/or to read and understand information on boards. Adaptations to classroom materials (bold line paper, different exercise books to others, own set of information on board). Involvement of QTVI, possibly Contact on request after initial assessment.	Relies on assistive technology and/or require significant adaptation of learning materials: text-to-speech software, word processing, screen sharing. Requires input from Qualified Teacher for Vision Impairment, QTVI, to develop skills and ensure coverage of additional curriculum. Fatigue management strategies needed. Orientation & mobility training required to attain independence. Habilitation and reviews needed at least at the end of each key stage followed by 6–10-week interventions. Personalised assistive technology, such as profile usability settings, to ensure tools are adaptable to individual needs. Adapted PE and physical activity programmes.	Relies primarily on technology, braille or tactile learning. Requires substantial curriculum adaptation and mobility support. Requires resources and equipment (embossed materials, tactile maps, science and food tech equipment). Interventions needed to meet requirements of the additional curriculum, e.g. to support social inclusion. Needs on-going structured habilitation interventions. Substantial adaptations to PE and physical activity programmes.	Requires alternative communication methods and highly specialised learning support. Total sensory support programme. Permanent mobility and communication support in addition to support from vision support service.

Physical and Sensory

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Hearing Impairment

- The Hearing Support Team (HST) uses the NATSIP Eligibility Criteria Matrix to give guidance about the level of support recommended to meet the CYP's current needs. This will be reviewed at least annually.
- All CYP's will have a formal diagnosis from audiology and the Hearing Support Team will use the matrix to support their individual needs, this is provided by the LA.
- In partnership with the school, the CYP will be able to fully engage with the curriculum. This will include the use of appropriate equipment, teaching and learning strategies and advice on promoting a good listening environment.
- Annual training will be offered to each educational setting.
- Assistive Listening Devices (ALDs) such as radio aid systems will be supported and maintained by the Hearing Support Team.
- All CYPs should attend regular audiology appointments and wear hearing technology prescribed.
- Advice and support from a Teacher of the Deaf is offered when required.

Category	Level 0	Level 1	Level 2	Level 3	Level 4
Needs	No significant hearing impairment. No formal diagnosis from Audiology. Please see **Ordinary Available Provision** document for further details on needs	Moderate hearing loss. Difficulty processing spoken language, particularly in group settings or noisy environments. Experiences listening fatigue.	Significant hearing impairment. To understand spoken language, the child can communicate via a combination of speech, sign language, and lip-reading.	Severe hearing impairment, profoundly deaf and using BSL as the primary mode of communication.	Profound hearing impairment. Only able to communicate via sign support: BSL, SSE or alternative methods of communication.
Examples of Provision	Universal support for all children, ensuring entitlement to high-quality teaching, covered within **Ordinarily Available Provision**	Subtitles on videos and the use of real-time speech-to-text technology. Small group and adult support in noisy environments. Requires hearing aids technology. Have a listening break pass card.	Pre-teaching: Language and communication interventions reinforced daily - 3 times a week – by school staff. Personalised speech and language therapy input. Structured sign language support (British Sign Language (BSL), Signed Supported English (SSE). Communication partner strategies and peer training. Multi-sensory resources to support practicing and developing skills.	The child requires adaptations for all areas of the curriculum. Adult support for most parts of the day for BSL/SSE users. High-tech AAC systems (speech-generating devices, text-based communication). Bespoke communication support programmes tailored to individual needs. Language and communication interventions to establish and develop skills for learning, dedicated sessions. Lots of repetition and overlearning. Activities are planned and identified to regularly complete short listening	The use of a total communication programme (tactile signing, BSL, braille communication, communication boards). Permanent adult support throughout the school day. Personalised technology and training. Staff trained in communication strategies. Bespoke curriculum. CYP will engage with very short, focused adult-directed learning tasks for approximately 3- 5 minutes.

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		and attention activities at school to develop these skills. Staff trained in communication strategies.

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