|  |  |  |  |
| --- | --- | --- | --- |
| **Name:**  **Date of Birth:**  **Current Year Group:**  **Date completed:** | | | |
| **Identification Criteria** | | | |
| When identifying that a pupil has a special educational need (SEN), consideration must be given to whether the support required by the pupil in order for them to access the curriculum and make sufficient progress is different from or additional to that which would normally be available to pupils of the same age.  For each area where a need has been identified, record how often this difficulty is evident.  Rare/never – Only on the odd occasion i.e. once a term, maybe when distracted or not in the right frame of mind.  Occasionally – Maybe once or twice a week  Frequently – Every day or every time the subject is taught  In the comments/evidence box, outline the support required by the pupil in that area. This support should not be Universal Provision but should be additional, targeted provision e.g. targeted adult support, 1:1 or small group targeted interventions or specific adaptations to the curriculum. | | | |
| Physical and Sensory  **Hearing Impairment** | | | |
| Indicate using a cross, or the date the frequency of support required: **Frequent**, **Occasional** or **Rare/Never**.  Add comments, including the support required and links to evidence and assessments used in space below each descriptor.  Any specialists involved and date referred: | **Rarely/Never** | **Occasionally** | **Frequently** |

| **Listening Skills** | | | |
| --- | --- | --- | --- |
|  | **Rarely/Never** | **Occasionally** | **Frequently** |
| Does the pupil ask you to repeat instructions/do they say ‘what?’ frequently? |  |  |  |
| Comments/evidence | | | |
| Does the pupil complain about/become upset by loud sounds? |  |  |  |
| Comments/evidence | | | |
| In a quiet place do they fail to respond to a familiar voice or to their name the first time you call when they can’t see your face? e.g. do they turn their head, look up, respond verbally? |  |  |  |
| Comments/evidence | | | |
| Do they appear to hear you/respond to voices better some days than others? |  |  |  |
| Comments/evidence | | | |
| Do they often rub their ears/complain of pain in their ears/have discharge from their ears? |  |  |  |
| Comments/evidence | | | |
| Are they unable to locate where a sound is coming from easily (do they turn to the right direction when called?) |  |  |  |
| Comments/evidence | | | |
| Are they frequently congested, heavy breathers, snore in sleep? |  |  |  |
| Comments/evidence | | | |
| Does the pupil report hearing noises which aren’t present in the environment? |  |  |  |
| Comments/evidence | | | |
| **Listening skills for pupils who wear hearing aids/cochlear implants/Bone conduction aids** | | | |
|  | **Rarely/Never** | **Occasionally** | **Frequently** |
| Is the pupil able to tell you when their hearing aid/processor isn’t working? |  |  |  |
| Comments/evidence | | | |

| **Curriculum Access** | | | |
| --- | --- | --- | --- |
|  | **Rarely/Never** | **Occasionally** | **Frequently** |
| After instruction, does the pupil have difficulty in starting the task (e.g. looks at other pupils or asks for help)? |  |  |  |
| Comments/evidence | | | |
| How often does the pupil become distracted/lose focus in comparison to peers? |  |  |  |
| Comments/evidence | | | |
| Are they making less than expected progress in any area? |  |  |  |
| Comments/evidence | | | |
| Is the pupil able to tell you when they haven’t understood what you have said? |  |  |  |
| Comments/evidence | | | |

| **Communication** | | | |
| --- | --- | --- | --- |
|  | **Rarely/Never** | **Occasionally** | **Frequently** |
| Does the pupil regularly speak more loudly than necessary? |  |  |  |
| Comments/evidence | | | |
| Do they have difficulty expressing their needs clearly (as appropriate to their age)? |  |  |  |
| Comments/evidence | | | |
| Is their speech difficult to understand if the context is not known? |  |  |  |
| Comments/evidence | | | |
| Is their speech slushy/ does it have a nasal or monotone quality? |  |  |  |
| Comments/evidence | | | |
| Do they use alternative means to speech to try and express themselves e.g. gestures, taking and pointing? |  |  |  |
| Comments/evidence | | | |
| Is their speech grammatically immature for their age? i.e. ‘me want car’? |  |  |  |
| Comments/evidence | | | |
| Is their language non-specific i.e. ‘that one’, ‘over there’? |  |  |  |
| Comments/evidence | | | |

| **Social and emotional wellbeing** | | | |
| --- | --- | --- | --- |
|  | **Rarely/Never** | **Occasionally** | **Frequently** |
| Do they withdraw from social situations? |  |  |  |
| Comments/evidence | | | |
| Does the pupil have issues with friendship groups or issues with socialising with peers? |  |  |  |
| Comments/evidence | | | |
| Are they very quiet in group situations? |  |  |  |
| Comments/evidence | | | |
| Do they have difficulty joining in appropriately with playground games? |  |  |  |
| Comments/evidence | | | |