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|  Camden-logo-2014**B****Special Educational Needs Team****(postal address) Camden Local Authority, Town Hall, Judd St, London WC1H 9JE****Tel: 0207 974 6500 / Fax: 0207 974 6501****Email: use secure email to** **SEN.assessment@camden.gov.uk** **(Please note: this is separate from the general enquiries email address)** |

**STRICTLY CONFIDENTIAL**

**APPENDIX B**

**EDUCATIONAL ADVICE**

**for the statutory assessment of Education, Health and Care needs**

**(EHC needs assessment)**

**advice on a child / young person who may have special educational needs**

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| **Please note that all of the information on this form will be copied to parents and all agencies directly involved with the child/young person.** |

This form should be completed as part of the request for a statutory assessment of special educational needs. If the Authority agrees to this assessment the information contained within it will be used as the Educational Advice as part of the statutory assessment. The school can provide additional information, but this is not essential.

**Guidance and a checklist are attached as appendix 4.1 and 4.2 to help you check that all the relevant information has been included.**

|  |
| --- |
| 1. **CHILD / YOUNG PERSON’S PERSONAL DETAILS**
 |
| **Surname:** |  | **Forename:** |  |
| **Address:** |  | **Postcode:** |  |
| **Date of birth:** |  | **Gender:** | male / female |
| **Name of EY setting, school, college:** |  | **Year group or college group:** |  |
| **Religion:** |  | **Ethnicity:** |  |
| **Care status: LAC?** | yes / no | **UPN reference:** |  |
| **Care status: CIN?** | yes / no | **ULN reference (Y9 or above only)** |  |
| 1. **ETHNIC MONITORING: [This information is confidential to the LA and will not be used in the assessment itself]**
 |

|  |  |  |  |
| --- | --- | --- | --- |
| White British |  | Indian |  |
| White Irish |  | Pakistani |  |
| Traveller of Irish Heritage |  | Bangladeshi |  |
| Greek |  | Any other Asian background |  |
| Greek Cypriot |  | Caribbean |  |
| Turkish |  | Somali |  |
| Turkish Cypriot |  | Nigerian |  |
| Albanian (excluding Kosovan) |  | Congolese |  |
| Kosovan |  | Any other African |  |
| White Other European |  | Any other Black background |  |
| White Other |  | Chinese |  |
| Gypsy/Roma |  | Latin American |  |
| White and Black Caribbean |  | Kurdish |  |
| White and Black African |  | Refused |  |
| White and Asian |  | Information not obtained |  |
| Any other Mixed background |  |  |  |

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| 1. **Attendance details for previous 12 months***:* [Please attach print out if applicable]
 |

|  |
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| Actual Attendance: \_\_\_\_\_\_\_\_ days/half days\* Possible Attendance: \_\_\_\_\_\_\_\_\_\_\_ days/half days\* *[Delete as appropriate\*]*Absences: Mainly authorised  Unauthorised  |

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| 1. **Language details:**
 |

Child’s first language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Language spoken at home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the service of a translator/interpreter essential? Yes □ No □

If yes, is written English understood? Yes □ No □

If yes, is spoken English understood? Yes □ No □

Is a British Sign Language Interpreter required? Yes □ No □

1. **Names of persons with parental responsibility for the child:**

Parent/Carer 1: (*name and address*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number:

(Home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Carer 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*name and address if different*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and address of any other person that has parental responsibility (eg grandparent):

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate all of those whom correspondence relating to the assessment should be sent:

Parent/Carer 1 □ Parent/Carer 2 □ Other □

1. **Please indicate child’s main presenting special educational need. If more than
 one presenting need list in order of priority (1-3 only).**

**SLCN - speech, language and communication needs | ASD - Autistic spectrum disorder | SpLD - Specific learning difficulties | MLD - moderate learning difficulties | SLD - severe learning difficulties |PMLD – profound and multiple learning difficulties | PD - physical disability | VI - vision impairment | HI - hearing impairment | MSI - multi-sensory impairment l SEMH Social, emotional and mental health**

1. Cognition and Learning

**SPLD MLD SLD / PMLD**

1. Communication/Interaction

**SLCN ASD (diagnosed)**

1. Social, Emotional and Mental Health

**SEMH**

1. Sensory and /or Physical Impairment

**PD HI VI MSI**

1. **Background (**This should include a record of early years provision, schools , colleges previously attended by the child)
2. **NAMES OF PERSONS WITH PARENTAL RESPONSIBILITY FOR THE CHILD:**
3. **Home factors** (home/care factors, if relevant)
4. **Relevant school factors** (what contextual factors impact on outcomes for the child / young person, such as environmental factors, school size/ range of classes, curriculum)
5. **Educational Attainments**

**For a child who is pre-school age or in the Foundation Stage** please complete one or both of the first two sections below, 7.1 and 7.2

**For other pupils** please provide the most recent information in 7.3, 7.4 or 7.5. Data from an earlier Key Stage should also be provided where that might be helpful.

|  |
| --- |
| **6.1 Pre- school/ Early Years Foundation Stage**  |
| Please give results from any development or standardised assessment. |
| Date of assessment…………Completed by………Child’s age on assessment…………… |
| Subscale Title |  |  |  |  |
| Quotient/ Development age |  |  |  |  |

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| **6.2 Early Years Foundation Stage Outcomes** |
| *You can record 2 assessment points by using two colours or symbols*Child’s age on 1st assessment …………….. Child’s age on 2nd assessment ……………. |
|  | **Age bands** |
|  | 0-11 months | 8-20months | 16-26months | 22-36months | 30-50months | 40-60 months | Early Learning Goals |
| **Personal, Social and Emotional Development** |  |  |  |  |  |  |  |
| Self-confidence and self-awareness |  |  |  |  |  |  |  |
| Making relationships |  |  |  |  |  |  |  |
| Managing feelings and Behaviour  |  |  |  |  |  |  |  |
| **Physical Development** |  |  |  |  |  |  |  |
| Moving and Handling  |  |  |  |  |  |  |  |
| Health and self-care  |  |  |  |  |  |  |  |
| **Communication and Language**  |  |  |  |  |  |  |  |
| Listening and Attention |  |  |  |  |  |  |  |
| Understanding |  |  |  |  |  |  |  |
| Speaking |  |  |  |  |  |  |  |
| **Literacy** |  |  |  |  |  |  |  |
| Reading |  |  |  |  |  |  |  |
| Writing |  |  |  |  |  |  |  |
| **Mathematics** |  |  |  |  |  |  |  |
| Numbers  |  |  |  |  |  |  |  |
| Shape, shape and measures |  |  |  |  |  |  |  |
| **Understanding the world** |  |  |  |  |  |  |  |
| People and Communities  |  |  |  |  |  |  |  |
| The World |  |  |  |  |  |  |  |
| Technology |  |  |  |  |  |  |  |
| **Expressive Arts and Design**  |  |  |  |  |  |  |  |
| Being imaginative |  |  |  |  |  |  |  |
| Exploring media and materials |  |  |  |  |  |  |  |

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|  **6.3 Year 1 and above attainment:** National Curriculum/P Scalesor**,** if national curriculum levels no longer used, list equivalent and provide guidance |
| **Date Assessed** | **Key Stage** | **TA or SATs** | **Sp & L** | **Reading** | **Writing** | **Numeracy** | **Science** |
|  |  |  |  |  |  |  |  |
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| **6.4 Year 1 and above attainment: result of reading, spelling or other assessments** |
| Test used: | Date: / / | Result: |
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| **6.5 FE and post-16 providers: baselines and progress assessments towards  qualification** (attach if necessary) |
| Test / assessment used: | Date: / / | Result: |
|  |  |  |
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| 1. **Monitoring SEN Additional Needs from the school or setting’s resources in local offer:**
 |
| Identify the Plan (eg provision map, IEP, integrated health plan, Multi-agency Plan [MAP], Targeted plan) | Date Initiated | Dates of Reviews |
|   |  |   |
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| 1. **External professionals involved (add rows as required)**
 |
| Name of professional | Agency / role | Date of last Involvement | Report attached Yes/No  |
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1. **Interventions that have been monitored over time, and impact of those intervention (all ages)**

Have Early Years Setting/School/College and other agencies’ interventions been monitored and evaluated over time?

 YES / NO (delete as required)

**9.1. Please provide details of the intervention and evaluation of the outcomes of interventions (rate of progress over time in response to interventions) in the table below or provide a copy of the SEN management sheet showing this information.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Identified need** | **Nature of intervention** | **Duration &****frequency (with dates)** | **Details of evaluation & rate of progress as a result of intervention** | **Unit cost of the intervention (pro-rated if a group intervention) –** **£annual cost** |
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**9.2 : Supporting evidence:** *attach relevant plans and reviews that show progress towards planned outcomes; parent / child engagement.*

Details of (at least last 2) relevant education early intervention plans (e.g. provision maps / IEPs) attached? **YES / NO** (delete as required)

For LAC only: Details of Personal Education Plan attached **YES / NO** (delete as required)

|  |
| --- |
| **If you have involved external agencies/services, please attach the visit/record/report of their assessment &/or intervention if available e.g. Education Psychology Service/Early Years Intervention Team/Social Services/Education Welfare Service/Language & Communication Team / CDT/Occupational Therapy Service/Physiotherapy Service/ Others** |
| **Name of external agency** | **Author of report** | **Date of report** | **Do parent/carers, provider and assessing professional agree this is up to date and represents current needs and provision? (yes / no)** |
|  |  |  |  |
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The purpose of the following questions is to identify areas of strength and barriers to learning.

If child is within the EYFS please refer to the EYFS Outcomes document. Please note and copy any additional measures of the child’s development that are relevant to this request.

Please provide summaries under each heading.

1. **Approaches to learning:***self confidence, motivation, child’s own views about receiving support. In early years, please refer to Characteristics of Learning)*
2. **Cognitive development:**
3. **Speech and language communication skills:***summarise below, and please complete communication and interaction checklist attached as appendix 2 if relevant. (See guidance if required****)***
4. **Social communication skills:***summarise below, and please complete communication and interaction checklist attached as appendix 2 if relevant. (See guidance if required)*
5. **Social skills, emotional and mental health development (SEMH):***summarise below, and please complete the behavior checklist attached as appendix 3 if relevant.**(See guidance if required)*
6. **Motor and sensory skills (**Mobility, gross/fine motor skills):
*(See guidance if required)*
7. **Physical and medical / health issues:**
8. **What are the setting’s planned outcomes for the provision that should be made in the future?***Suggest the outcomes that the child should achieve by the end of the next keystage, e.g. CYP will be able to (do what) by the end of the next key stage.*
9. **Educational facilities and resources required:***please state clearly any features over and above what is normally available in the setting that in your professional opinion are necessary to meet needs.*
	1. Curriculum features: does or will the child require any of National Curriculum
	modifications or disapplication? YES / NO (delete as required)

 *If yes, give details.*

* 1. Teaching strategies and approaches- describe and quantify provision currently being from Additional Needs resources in the Local Offer made to support child/young person, that will be required to achieve outcomes.
	2. Any differentiation of class or curriculum organisation that will be required to achieve outcomes – e.g. any environmental modifications made under advice from professionals, such as specialist equipment or auditory environment, or as part of the anticipatory duties required by the Equalities Act.
	3. Specific programmes /activities/materials/equipment/staffing that will be required to achieve outcomes.
	4. Need for staff advice/training/support that will be required to be able to support child / young person achieve outcomes.
1. **Please describe a record of collaborating with parent to agree provision for child / young person, or explanation of action taken to secure it.**
2. **Please attach child/young person’s and parent / carer views and aspirations in Appendix 1 (‘All About Me’)** ( Please note: child’s views should only be written in the first person if they have written it themselves, or had their own words scribed).
3. **Referrer Details:**

To be completed by the Head [or manager or owner] of referring Early Years Setting/School/ College:

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Designation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of school/setting \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed: ­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**22. Professionals who should contribute to a statutory assessment:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Designation** | **Name** | **Location/phone number** | **Confirmed email address** |
| Educational Psychologist |  |  |  |
| College/School/Early Years Setting |  |  |  |
| Health Services includingCAMHS |  |  |  |
| Social Care |  |  |  |
| *Please add any other relevant professionals:* |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**23. Signed parental / carer consent***(please refer to Information Sharing Guidance DFE publication -00128-2015)*

**In submitting this application to request an Education, Health and Care needs assessment, I consent for Camden Local Authority to seek and share advice on my child with professionals relevant to this process including Educational Psychology Service, health provider services, education setting, Family Services and Social Work, and any other professionals and services identified in this request.**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed: ­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed: ­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**24. On completion, please submit to the Camden SEN team as follows:**

**Please email (by secure email) this document to:** sen.assessment@camden.gov.uk

*and*

**Please return a signed hard copy to:**

**Special Educational Needs Section**

**Camden Local Authority**

**Town Hall**

**Judd St**

**London WC1H 9JE**

**Tel: 0207 974 6500 / Fax: 0207 974 6501**

|  |
| --- |
| All about me: child or young person’s views**Appendix 1: ‘All About Me’) -** the views and aspirations of child / young person / family |
|  |
| **All About Me** is an opportunity to bring the child or young person’s views to the understanding of their educational, social, emotional, health strengths and needs. It is essential to the **Person Centred approach** that the young person’s views are the starting point of identification, aspirations and support**.***Use this format to record the views, interests and ambitions of the child or young person where possible. Please show where the child or young person is speaking directly using “I” or mark clearly when the views of the child or young person are being represented by parents, carers or professionals.**‘All about me’ will inform Part A of an EHC plan if one is agreed. Please be aware that information about named individuals or organisations may not be included in an EHC plan if one is agreed.*  |
| **If anyone helped write this, who was it and how did they help?** |

|  |
| --- |
| **About me and what helps me to learn***There are some prompts below to help you write this section.* |

**Who is in my family? Who is important to me?**

**My history**: this could include: my early childhood; my education so far; my friendships and relationships; other people who are important to me; pets

**My interests.**

**What is important to me?**

**What is important for me?**

**What I like about me and what I am good at.**

**How I communicate.**

**How to communicate with me so I understand.**

**My health needs.**

**How independent am I? What would help me to be more independent?**

**What support do I already get that is working well?**

**What’s not working? What would I like to change?**

**New things I would like to try.**

|  |
| --- |
| **My aspirations and goals for the future**e.g. the sort of person I would like to be and what I would like to do in the future. Long-term goals might include: health and wellbeing; friendships and relationships; community inclusion; education and employment; independent living. |

My views:

|  |
| --- |
| All about me: my family’s or carers’ views |
| This section is for the **parents/carers and other family members** to record their views and ambitions in relation to the child or young person.*All About Me is an opportunity to bring the child or young person’s views to the understanding of their educational, social, emotional, health strengths and needs. It is essential to the Person Centred approach that the families views are considered. Please be aware that information about named individuals or organisations may not be included in an EHC plan if one is agreed.* |
| **If anyone helped the parents or carers write this, who was it and how did they help?** |
| **About my child and what helps them to learn: essential information you need to know** *There are some prompts below to help write this section.* |

**History: This could include: early childhood; education so far; friendships and relationships**

**Who are the important people in their life?**

**What are their interests?**

**What is important to them?**

**What is important for them?**

**What do others like and admire about them?**

**How do they communicate with others?**

**How do others communicate with them?**

**What are their health needs?**

**How independent are they? What would help them to be more independent?**

**What support do they have from family and others that is working well?**

**What is not working? What would you like to change?**

**What new things they would like to try?**

**What support do you need as a family?**

|  |
| --- |
| **Our aspirations and goals for the future**e.g. the sort of person I would like my child to become and what I would like them to do in the future. Long-term goals might include: health and wellbeing; friendships and relationships; community inclusion; education and employment; independent living. |

**My family / carers’ views:**

**Appendix 2 (Delete if not relevant to child/YP’s needs)**

**Specific Criteria: Communication and Interaction**

**Please refer to guidance notes before completing this form.**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Age:** | **Date:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Observed behaviour*** | **Not at****all** | **Rarely** | **Some-times** | **Fairly****often** |
| ***SOCIAL COMMUNICATION*** | **0** | **1** | **2** | **3** |
| *1. Responds when called by name.* |  |  |  |  |
| *2. Follows verbal instructions in 1:1 setting.* |  |  |  |  |
| *3. Follows verbal instructions in small group setting.* |  |  |  |  |
| *4. Follows verbal instructions in whole class setting.* |  |  |  |  |
| *5. Takes turn in conversations.* |  |  |  |  |
| *6. Initiates conversation.* |  |  |  |  |
| *7. Changes topic of conversation.* |  |  |  |  |
| *8. Maintains an appropriate conversation.* |  |  |  |  |
| *9. Shows awareness of the listener’s needs.* |  |  |  |  |
| *10. Gives appropriate non-verbal signals as a listener.* |  |  |  |  |
| *11. Changes the topic or style of a conversation to suit the listener.* |  |  |  |  |
| *12. Changes appropriately the volume and tone of voice.* |  |  |  |  |
| *13. Recognises and responds to non-verbal cues eg: a frown.* |  |  |  |  |
| *14. Understands implied meanings.* |  |  |  |  |
| *15. Tells or writes an imaginative story.* |  |  |  |  |
| *16. Relates a sequence of events.* |  |  |  |  |
| *17. Gives a simple sequence of instructions.* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SOCIAL INTERACTION | **0** | **1** | **2** | **3** |
| *18. Uses gesture, body posture, facial expression and eye-to-eye gaze in 1:1 situation.* |  |  |  |  |
| *19. Uses gesture, body posture, facial expression and eye-to-eye gaze in group interaction.* |  |  |  |  |
| *20. Follows social cues in 1:1 situation with adults.* |  |  |  |  |
| *21. Follows social cues in 1:1 situation with other children.* |  |  |  |  |
| *22. Follows social cues in group interaction.* |  |  |  |  |
| *23. Shares an activity with other children.* |  |  |  |  |
| *24. Shares an activity with an adult.* |  |  |  |  |
| *25. Develops peer friendships.* |  |  |  |  |
| *26. Seeks comfort/affection when upset.* |  |  |  |  |
| *27. Offers comfort/affection to others.* |  |  |  |  |
| *28. Shares in others’ enjoyment/pleasure.* |  |  |  |  |
| *29. Imitates other children.* |  |  |  |  |
| *30. Imitates adults.* |  |  |  |  |
| *31. Shows different responses to different people in different situations.* |  |  |  |  |
| *32. Responds appropriately to social praise.* |  |  |  |  |
| *33. Responds appropriately to criticism.* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Observed behaviour*** | **Not at****all** | **Rarely** | **Some-times** | **Fairly****often** |
| SOCIAL IMAGINATION & FLEXIBLE THINKING | **0** | **1** | **2** | **3** |
| *34. Has varied interests.* |  |  |  |  |
| *35. Shares interests.* |  |  |  |  |
| *36. Changes behaviour according to the situation.* |  |  |  |  |
| *37. Accepts changes in rules, routines or procedures.* |  |  |  |  |
| *38. Plays imaginatively when alone.* |  |  |  |  |
| *39. Plays imaginatively with others.* |  |  |  |  |
| *40. Accepts others’ points of view.* |  |  |  |  |
| *41. Generalises learning.* |  |  |  |  |
| *42. Transfers skills across the curriculum.* |  |  |  |  |
| *43. Plans an event or task.* |  |  |  |  |
| *44. Suggests possible explanations for events.* |  |  |  |  |
| *45. Uses inference and deduction.* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  RECEPTIVE LANGUAGE | **0** | **1** | **2** | **3** |
| *46. Listens 1-1.* |  |  |  |  |
| *47. Listens in a small group.* |  |  |  |  |
| *48. Listens in classroom context without visual cues.* |  |  |  |  |
| *49. Follows instructions to carry out an activity step by step without visual cues.* |  |  |  |  |
| *50. Is able to retain information from one lesson to another.* |  |  |  |  |
| *51. Shows understanding of an age-appropriate story/text told to a large group of pupils.* |  |  |  |  |
| *52. Shows understanding of where/when/how questions.* |  |  |  |  |
| *53. Shows ability to predict outcomes.* |  |  |  |  |
| *54. Shows ability to make inferences.* |  |  |  |  |
| *55. Understands abstract concepts of time and sequence.* |  |  |  |  |
| *56. Shows an appropriate understanding of words.* |  |  |  |  |
| *57. Can understand how words are linked in categories.* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| EXPRESSIVE LANGUAGE (including speech production) | **0** | **1** | **2** | **3** |
| *58. Uses intelligible connected speech.* |  |  |  |  |
| *59. Uses familiar vocabulary appropriately.* |  |  |  |  |
| *60. Uses phrases and statements to comment on ongoing activities.* |  |  |  |  |
| *61. Finds words and joins them together with appropriate word order.* |  |  |  |  |
| *62. Uses appropriate grammatical structures, taking into account local dialect.* |  |  |  |  |
| *63. Recalls and describes in sequence activities that have been recently completed.* |  |  |  |  |
| *64. Asks appropriate questions to obtain information.* |  |  |  |  |
| *65. Gives meaningful instructions.* |  |  |  |  |
| *66. Tells/retells a story or imagined events in chronological order.* |  |  |  |  |
| *67. Contributes to discussion about behaviour or feelings in different situations.* |  |  |  |  |
| *68. Gives an explanation of why events occur and predicts alternative endings/outcomes.* |  |  |  |  |
| *69. Uses language appropriately in a variety of situations.* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  ***MOTOR & ORGANISATIONAL SKILLS*** | **0** | **1** | **2** | **3** |
| *70. Finds way around classroom.* |  |  |  |  |
| *71. Finds way around school.* |  |  |  |  |
| *72. Sits still.* |  |  |  |  |
| *73. Sits amongst a small group.* |  |  |  |  |
| *74. Sits amongst a large group eg: assembly.* |  |  |  |  |
| *75. Finds and organises the equipment needed for a given task.* |  |  |  |  |
| *76. Writes legibly and draws accurately.* |  |  |  |  |
| *77. Gets changed without help eg: for PE.* |  |  |  |  |
| *78. Organises movements for PE and games.* |  |  |  |  |

|  |  |
| --- | --- |
|  | ***SCORE*** |
| ***SOCIAL COMMUNICATION*** |  |
| ***SOCIAL INTERACTION*** |  |
| ***SOCIAL IMAGINATION & FLEXIBLE THINKING*** |  |
| ***RECEPTIVE LANGUAGE*** |  |
| ***EXPRESSIVE LANGUAGE*** |  |
| ***MOTOR & ORGANISATIONAL SKILLS*** |  |

**Appendix 3 (Delete if not relevant to child/YP’s needs)**

**Camden Behaviour Questionnaire (CBQ)**

**Please refer to guidance notes before completing this form.**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Age:** | **Date:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***OBSERVED BEHAVIOUR*** | **Not at all** | **Rarely** | **Some- times** | **Fairly****often** |
|  *CONDUCT BEHAVIOUR* | **0** | **1** | **2** | **3** |
| ***1. Behaves respectfully towards teacher/practitioner***Eg respects teacher/practitioners and answers teacher/practitioners demonstrating age appropriate understanding of behavioural expectations, does not interrupt or deliberately annoy, does not show verbal aggression. |  |  |  |  |
| ***2. Shows respect to other children/young people***Eg interacts with other children/young people demonstrating age appropriate understanding of expected behaviour and does not tease, call names, swear, use psychological intimidation. |  |  |  |  |
| ***3. Only interrupts and seeks attention appropriately***Eg behaves in ways warranted by the classroom/setting activity. Does not disrupt unnecessarily, or distract or interfere with others, does not pass notes, talk when others are talking. Is not attention-seeking. |  |  |  |  |
| ***4. Self-regulates behaviour*** Eg is not physically aggressive, avoids fights, is pleasant to other children/young people, is not cruel or spiteful, does not strike out in temper. |  |  |  |  |
| ***5. Respects property***Eg values and looks after property, does not damage or destroy property, does not steal. |  |  |  |  |
|  ***EMOTIONAL BEHAVIOUR*** | **0** | **1** | **2** | **3** |
| ***6. Has empathy***Eg is tolerant of others, shows understanding and sympathy, is considerate. |  |  |  |  |
| ***7. Is socially aware***Eg interacts appropriately with others, is not a loner or isolated, reads social situation well. |  |  |  |  |
| ***8. Is happy***Eg has fun when appropriate, smiles, laughs, is cheerful, is not tearful or depressed. |  |  |  |  |
| ***9. Is confident***Eg is not anxious, high self-esteem, relaxed, does not fear failure, is not shy or afraid of new things, is robust. |  |  |  |  |
| ***10. Is emotionally well-regulated and shows self control***Eg moods remain relatively stable, does not have frequent mood swings. Patient, not easily flustered, able to maintain emotional regulation |  |  |  |  |
|  ***LEARNING BEHAVIOUR*** | **0** | **1** | **2** | **3** |
| ***11. Is attentive and has an interest in schoolwork/activities***Eg not easily distracted, completes work, keeps on task and concentrates, has good motivation, shows interest, enjoys schoolwork/activities. |  |  |  |  |
| ***12. Good learning organisation***Eg works systematically, at a reasonable pace, knows when to move onto next activity or stage, can make choices, is organised. |  |  |  |  |
| ***13. Is an effective communicator***Eg speech is coherent, thinks before answering. |  |  |  |  |
| ***14. Works efficiently in a group***Eg takes part in discussions, contributes readily to group tasks, listens well in groups, works collaboratively. |  |  |  |  |
| ***15. Seeks help where necessary***Eg can work independently until there is a problem that cannot be solved without the teacher/practitioner’s intervention. |  |  |  |  |

|  |  |
| --- | --- |
|  | **SCORE** |
| ***CONDUCT BEHAVIOUR*** |  |
| ***EMOTIONAL BEHAVIOUR*** |  |
| ***LEARNING BEHAVIOUR*** |  |
| **TOTAL** |  |

**Appendix 4.1 check list:** ensure all relevant evidence has been included – please include this document as an encrypted WORD document. The panel cannot consider unsigned requests, and incomplete requests may result in a request being declined for lack of evidence.

All sections should be completed - please attach the following evidence and tick to indicate that it has been included.

Please do NOT include raw data sheets – summarise, and attach one as an example if you think it will help.

Section 23 completed - signed consent of parent / carer (please scan hard copy of this page so we have confirmation of signed consent and if assessment is agreed we can immediately request any additional reports).

Section 10 - At least two ‘plan, do, review’ cycles of assessment, planned outcomes, provision delivered and evaluation of progress over time (e.g. SEN plans, provision maps, IEPs, including reviews at SEN Additional Needs stage). These need to include clear targets, strategies, support arrangements and outcomes. They also need to show how external advice has been incorporated. Planning and strategies need to be appropriate to the child’s type and level of SEN. *At early years, at least one of two cycles submitted should be reviewed)*

Section 10 .1 - Reference should be made to relevant threshold criteria as appropriate, *including the costs of interventions provided by the school or setting* which demonstrate that costed interventions over and above what the school can provide within resources (allocated High Needs Block support in early years settings / first £6,000, plus devolved element 3 top-up funding in Camden primary and secondary schools).

Section 10.2 - Relevant reports from external specialist(s) at Additional Needs which
indicate the degree and complexity of difficulties.

(*A medical report is required for any child for whom the request is been made on grounds of a medical diagnosis, which demonstrates the impact on the child’s access to learning and on attainment; follow-up therapy progress reports as appropriate.)*

Sections 11 – 17 - Concise description of the child’s relative strengths, barriers to learning and rate of progress in response to intervention. This should be no more than one or two paragraphs which give a summary overview of the child.

Sections 13 – 15 - For children with speech and language difficulties or social, emotional and mental health difficulties, the appropriate additional information *must* be completed and included as evidence (see appendices C – E). These are only required if a child has needs in that area.

Any other relevant specific and objective up-to-date information about the child’s attainments and social development, including information about the child’s attendance, where relevant.

Appendix 1 - *‘All About Me’* child and parent views and aspirations should be
 submitted with this request for all children in Reception and above – this is important
 to support the principle of ‘telling the story once’, and informing assessing
 professionals at the beginning of the process if an assessment is agreed. Best
 practice is to complete this together with the parent / carer, and scribe if required.

**Appendix 4.2:**

**supporting guidance for submitting an Education, Health and Care needs assessment:**

**Please read these notes carefully before completing the Statutory EHC needs assessment form**

Please follow & use the headings provided in the guidelines for writing professional advice.

Professional advice should be typed and written in straightforward language avoiding the use of jargon so that it can be clearly understood by both parents and other professionals.

The advice must not be influenced by consideration of the name of a school at which the child might eventually be placed. Specific schools must not be mentioned. Parents may indicate preferences for a type of school in their own advice, and this information will be sought during the process if an assessment is agreed.

Each page of advice should be headed with the child’s name and author’s details.

Child or young person’s details:

Please check your safeguarding lead if you are unsure of social care status.
Schools issue Unique Learner Numbers for young people in Y9 and above, and this should be included on page 1.

Factors taken in to account:

The local authority will require clear information to use as the basis for a decision about whether or not a statutory Education, Health and Care assessment is required. The decision will take in to account:

* Evidence of *significant difficulties*
* All the evidence must combine to *demonstrate purposeful and relevant action* by the
 school(s) or settings over a sustained period of time.
* Evidence that the *resources required to meet need exceed those already available*
 through the Local Offer

Further information is set out in the booklet ‘Guidance criteria for additional needs and statutory assessment for children and young people with special educational needs and disabilities’.

Evidence of significant difficulty

Evidence that the degree of difficulty is exceptional, beyond the majority of his or her peers, and is likely to need provision made for them that would not normally be available to children and young people without a plan. This will include young people over 19 who require longer to complete their post-16 course than the majority of other young people the same age.

Evidence of intervention

Evidence that the setting has carried out relevant and purposeful intervention to address the child or young person’s difficulty, working towards clear and appropriate planned outcomes. This will normally have been monitored and evaluated over time, describing progress towards planned outcomes. Intervention can include specialist advice at any stage and evidence should be given of how the advice / involvement of outside agencies has informed planning and intervention. Such advice will be considered if there is evidence of monitoring and evaluation of impact over time.

The involvement of the child or young person and/or their parent / carer in planning and carrying out interventions should also be documented.

In rare circumstances, described in the guidance, a child or young person’s circumstances may warrant an Education, Health and Care needs assessment without the evidence accumulated over time in a ‘assessment, plan, do, review’ cycle described in the guidance.

Evidence for non-statutory health and social care support

For children and young people who require support in health and social care domains, but do not reach statutory thresholds, please make reference to needs that impact on education and which can be accessed through the Health and Care elements of the Local Offer. For example: it might be that a child who is socially isolated may benefit from accessing after school provision, or a community based social group, and this is available in the local offer.

Evidence that additional resources are required for the child or young person to make sufficient progress

The decision will take in to account the resources that have been accessed through the local offer (including devolved element 3 top-up in Camden schools) and whether or not the resources available are considered sufficient to ensure the child or young person’s progress.

Decision making

All requests received by the local authority will be considered by a group of local authority officers together with education, health and care professionals. The parent / carer and/or young person over the age of 16 will be informed of this decision, with reasons given. When there is insufficient evidence to proceed, the form will be returned to the referrer and reasons given.