

Learning and teaching is at the heart of the education process. Throughout the learning process all children and young people, at some stage, require support. Getting it Right for Every Child (GIRFEC) aims to improve outcomes for all children and young people. It promotes a shared approach which builds solutions with and around children/ young people and their families to enable learners to get the right help when they need it. It involves working together to make things better and to remove the barriers which can prevent children and young people from reaching their full potential.

Additional Support Needs in Highland

“The term Additional Support Needs applies to children or young people who, for whatever reason, require additional support, long or short term, in order to make the most of their education.”

Children in the Highlands Information Point (chip +): A guide to the Education (Additional Support for Learning) (Scotland) Act 2004 and as amended 2009 – Revised 2020

<https://www.thrivingfamilies.org.uk/userfiles/file/education/master-asl-guide-seventh-edition-jan-20.pdf>

Highland Council’s guidelines for Additional Support for Learning are included within the Highland Practice Model. At Cawdor we aim to support learners through following the Highland Practice Model: identifying needs, sharing concerns and implementing support strategies which allow learners to experience success. This is developed through the process highlighted within these guidelines.

STAGED APPROACH (see Appendix 3)

“All children and young people need support to help them learn. Some need more support than others. Staff in Highland schools follow a Staged Approach to assessing the needs of the children and young people in their care to ensure that they receive the help they require at the time that they need it and at the level they need.

In Highland we have a policy called "The Highland Practice Model Approach to delivering Additional Support for Learning" which details the Staged Approach to assessing, identifying and providing for the support needs of children and young people. The stages run from simple classroom strategies to multi-agency assessments and planning.”

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Highland Practice Model Guidance:

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Roles and Responsibilities

Named Person

Every child and young person in school age provision has a Named Person. The Named Person is the first point of contact for children, young people and their families. In Cawdor the Named Person for P1–P7 pupils is the Head Teacher. In the Early Learning and Childcare (ELC) setting the Named Person is the Health Visitor.

Lead Professional

When two or more agencies need to work together to support children, young people and their families, a Lead Professional will be appointed. The Lead Professional for the majority of our pupils will be the Head Teacher or Additional Support Needs Teacher. In the ELC the Lead Professional, most often, will be the Health Visitor, but may be the Head Teacher.

If a child's needs are more complex a Lead Professional will be appointed from within more specialised targeted services, such as a partner within health or social care. Where a child is looked after or at risk of significant harm, the Lead Professional will always be a Social Worker.

Class Teachers/ Early Years Practitioners

Class Teachers (CTs)/ Early Years Practitioners (EYPs) have responsibility for co-ordinating the learning and wellbeing of all children in their care. CTs/ EYPs have the greatest influence and impact on the learning process. CTs/EYPs have a key role in identifying the support learners require, making provision through appropriate differentiation and seeking additional advice and guidance from the Additional Support Needs teacher and school Senior Leadership Team. CTs/ EYPs will ensure there is consultation with all support staff working with pupils in their class/ setting. Through regular self-reflection and the integration of observation and assessment in learning, CTs/ EYPs can monitor learners' progress and the challenges that they face.

Additional Support Needs (ASN) Teacher

See Appendix 1 for the roles and responsibilities of an ASN teacher.

Pupil Support Assistants (PSAs)

See Appendix 2 for the roles and responsibilities of a PSA.

Other agencies/ partners

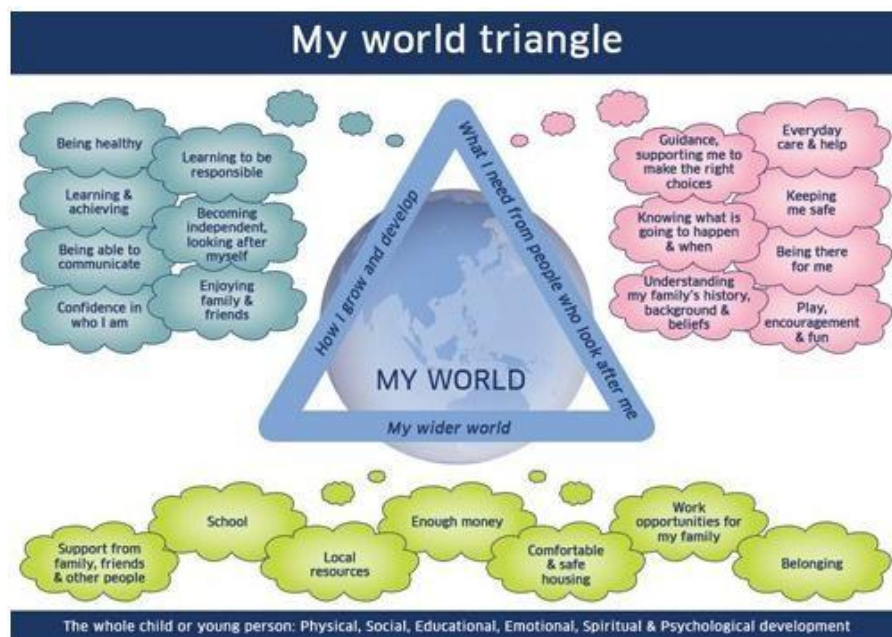
Where specific needs have been identified, agencies may be required to work together to provide additional services or support for learners. These include the Practice Lead for Schools, School Dental Service, School Nurse, Community Paediatrician, Speech and Language Therapist, Occupational Therapist, Dietician, Physiotherapist, Educational Psychologist, Social Work staff, Children's Service Worker, Learning Disability Nurse and other agencies as appropriate.

Request for Service Input

If a request from a support service is required, this should be discussed with the Additional Support Needs teacher/ Head Teacher prior to any referral being made. For Allied Health Professionals, i.e. speech and language/ occupational therapy, there is a universal request for assistance process. CTs/EYPs should copy in the Head Teacher to any referrals made.

The Staged Approach

The identification of needs is central to additional support needs. The “Staged Approach” is a pathway for assessing needs and accessing additional services to support the child or young person. It emphasises early intervention to identify, record and assess children with additional support needs and is based on the philosophy that assessment is ongoing and not restricted to a particular point/episode in a child’s life. When assessing children’s needs, we must be mindful of the complex interplay of factors which influence the ability of a child/young person to reach their potential. *Getting it Right for Every Child* uses the “My World Triangle” at every stage to consider the child or young person’s strengths and pressures.



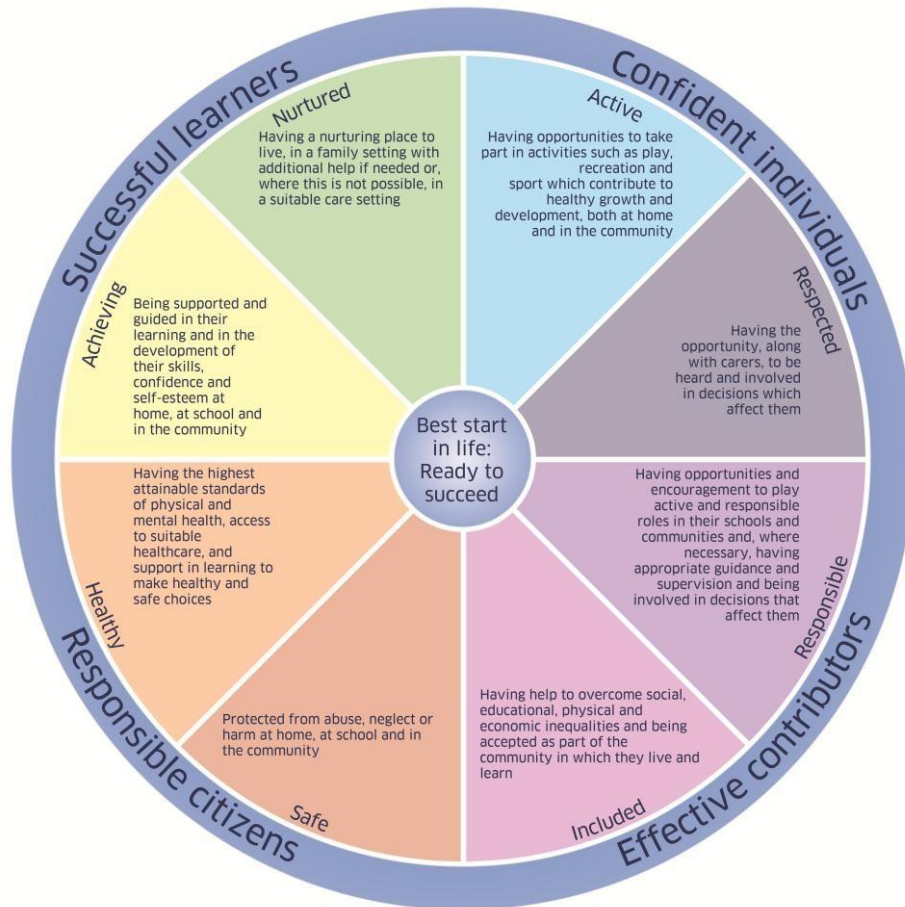
The **My World Triangle** explores key areas of the child or young person’s circumstances:

- how the child or young person is growing and developing
- what the child or young person needs from the people who look after them
- the impact of the child or young person’s wider world of family, friends and community on their development.

Through analysis of the strengths and pressures in these dimensions, the child’s needs are identified and summarised using the well-being indicators. There are eight (Respected and Responsible joined in Highland Practice Model) well-being indicators which are used during the assessment and planning process; these are illustrated in the well-being wheel.

- Safe
- Healthy
- Achieving
- Nurtured
- Active
- Respected
- Responsible
- Included.

Wellbeing Indicators



“The well-being indicators are an essential feature of the practice model and are used at three points during the assessment and planning process.

- To provide a context for identifying and recording concerns.*
- As a framework for*
 - analysis of further information gathered around the My World Triangle*
 - setting goals*
 - identifying the actions to be taken to bring about the desired outcomes.*
- To provide clear objectives against which the plan can be reviewed.*

The five questions

- 1. What is getting in the way of this child’s well-being?*
- 2. Do I have all the information I need to help this child?*
- 3. What can I do now to help this child?*
- 4. What can my agency do to help this child?*
- 5. What additional help, if any, may be needed from other agencies?”*

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Identifying and Responding to Additional Support Needs

“Stage 1 Most children and young people’s needs will be met at the classroom level by the class teacher’s observations, assessments and planning for her/his class as a whole, for groups and for individuals.

Stage 2 Where a child or young person has needs identified which cannot be met wholly by the class teacher’s planning then assistance from support staff within the school will be requested. Observations and further assessment will help staff plan for and monitor how the child is achieving and overcoming the barriers to his/her learning.”

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English as an Additional Language (EAL) – Profiles of Competence Early Years Practitioner/ Class Teacher

1. EAL Profiles of Competence will be set up by the Early Years Practitioner/ Class Teacher. The English as Additional Language team can be contacted for support and guidance. Within the Primary Profile, the next steps within the Profile will be the targets. These should be used alongside the accompanying strategies to support the learner.
2. EAL Profiles of Competence should be updated by Early Years Practitioners/ Class Teachers twice per year (suggested November and May).
3. EAL Profiles should be sent to the HT/ ASNT to update SEEMiS, as appropriate.

Form 1 – Identifying Initial Concerns Early Years Practitioner/ Class Teacher

1. Identify the stage that the learner is at using the ASN Matrix.
2. Highlight where the learner is on the Matrix. For a Form 1, you would expect the learner to be broadly within ‘ASN Level 1’; however, some elements will likely be Level 2 on the grid.
3. Save a copy of the highlighted Matrix into their ASN folder on the server.
4. Read any previous Form 1s to review any previous interventions which have been tried out. Dialogue with the previous Early Years Practitioners/Class Teacher/Additional Support Needs Teacher (ASNT)/ Head Teacher (HT) would be considered good practice at this point.
5. Use the ‘My World Triangle’ to identify the child’s strengths and pressures.
6. Complete the new Form 1 indicating strengths and the aspects that they’re experiencing difficulty with. (SHANARRI)
7. Identify possible strategies that can be used within the ELC setting/ classroom/ home environment to support the learner. This should include realistic timescales (e.g. 6-8 weeks) which allow the strategies to be effectively implemented.
 - Early Years Practitioners/ Class Teachers may at this point liaise with the ASNT/ HT in terms of strategies that can be used within the classroom.
8. Save a copy of the Form 1 into their ASN folder on the server.
9. Strategies to be discussed with parents/carers.
10. The Form 1 should be emailed to the Head Teacher to sign and copying in the ASN Teacher to read.
 - HT will add the child to the ASN overview spreadsheet and update the information on SEEMiS.
 - HT will print a copy of the Form 1 for the clerical to put in the child’s paper ASN folder. In ELC this will be stored in the child’s Care Plan.

Form 1 – Evaluating Concerns and Moving On **Early Years Practitioner/ Class Teacher/ ASN Teacher/ SMT**

1. The Form 1 should be reviewed on, or shortly after, the date set in the timescale given. The Early Years Practitioner/ Class Teacher should evaluate the effectiveness of the strategies.
 - **A new Form 1 should be created each session, transferring any outstanding targets from the last session to the new Form 1. Form 1s should be completed as a rolling process throughout the session (or earlier if signed off).**

Signing Off a Form 1

2. If the Class Teacher is satisfied with the progress of the learner, the updated Form 1 should be saved within their ASN folder and the Early Years Practitioner/ Class Teacher should send to the ASN Teacher/ Head Teacher.
 - ASN overview spreadsheet and SEEMiS to be updated by the HT.
 - Clerical to file the signed-off Form 1 in child's paper ASN file. In ELC this will be printed by the EYP and stored in the child's Care Plan.

Next Steps: Continuing a Form 1

3. If the Class Teacher is not satisfied with the progress of the learner, the Form 1 should be updated with secondary strategies. The Early Years Practitioners/ Class Teacher may feel it is appropriate to liaise with the ASNT/ HT to support the development of further strategies as part of the Form 1.
 - **NB – No Child's Plan should have been created at this stage. If this is the case, the learner has moved onto Stage 2 – 4 – the Matrix therefore needing updated with the relevant ASN Level.**
4. Any updates to the Form 1 should be sent to the HT to sign/ ASN Teacher to read. The learner and their parents/carers should be part of the review process.

Next Steps: Moving to a Child's Plan

5. If it is deemed by the team around the child that the child is making little or minimal progress with the identified strategies, and further liaison with other agencies is required, they should move onto the next stage in the process.

“Stage 2 Where a child or young person has needs identified which cannot be met wholly by the class teacher's planning then assistance from support staff within the school will be requested. Observations and further assessment will help staff plan for and monitor how the child is achieving and overcoming the barriers to his/her learning. This plan will be recorded on a Universal Child's Plan with an educational focus.

Stage 3 Should a child continue to have difficulties in moving forward with his/ her learning then help, advice and direct involvement may be requested from Education Services available to the school . . . Help from these services would be requested at this stage, to give advice on the individual needs of the child or young person. This plan will be recorded on a Child's Plan. Where the curriculum needs to be individualised an Individualised Educational Programme (IEP) may be drawn up.

Stage 4 A few children and young people may need more help from wider services within Care & Learning and help from these services would be requested at this stage.”

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Child’s Plan – A Staged Process

Early Years Practitioner/ Class Teacher/ ASNT/ HT

1. In consultation with ASNT/ HT, the learner should be tracked in line with the ASN Matrix. This should be updated and saved within their ASN folder.
**For children in the Early Learning and Childcare setting, staff should liaise with the Health Visitor who will be the Named Person for the child.*
2. Early Years Practitioners/ Class Teacher should complete the ‘My World Triangle – Notes from Teacher’ in preparation for consultation with the ASNT/ HT.
3. The Early Years Practitioner/ Class Teacher will share the main strengths and pressures for the child ahead of the Child’s Plan meeting. Through consultation between the Early Years Practitioner/ Class Teacher and the Additional Support Needs Teacher, it may be appropriate at this point for the ASNT to observe the child across their areas of learning.
4. A Child’s Plan Core Group meeting or a Child’s Plan Solution Focused Meeting should be held by the ASNT and/or HT, inviting all relevant parties. The Child’s Plan format should be used to create an agreed Action Plan within the Child’s Plan.

Following the creation of the Child’s Plan:

- The child’s plan should be sent to the Head Teacher and the ASN Overview Spreadsheet and SEEMiS to be updated by the HT to reflect the child’s current level of need, and any appropriate support.

Guidance on creating a Child’s Plan can be found in the Highland Practice Model Guidelines:

Highland Practice Model Guidance:

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“Core to the effective co-ordinated provision of appropriate support to a child is the principle that any and all services supporting the child are working to a single agreed plan. The Plan is the means by which requests for other services are made and the basis on which the role and value of these services is considered.

The plan may be short and simple or complex and detailed – but it must always be proportionate to the child’s needs and circumstances.”

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Progress must be monitored and reviewed regularly to ensure that the planned actions are achieving the desired outcomes, and to determine whether any changes need to be made.

Reviewing begins as soon as actions are agreed. Arrangements for monitoring and reviewing the plan should be proportionate and comply with statutory requirements.

Practitioners must be vigilant about any new information that changes a child's circumstances and should respond quickly, appropriately and flexibly making relevant changes to the plan without undue delay.

The core group must identify when the level of change to the plan is such that the formal Child's Plan review meeting should be brought forward.

When reviewing a plan, the essential questions for consideration by the Named Person and Lead Professional along with others, including the child and family are;

- *How well the child is doing, and is there any new information or change of circumstances?*
- *What is the progress toward the outcomes?*
- *Is there anything in the plan that needs to be changed?*
- *Does the child still need a multi-disciplinary or single service plan?*
- *What needs to happen next?"*

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Child's Plan – Review Process **Early Years Practitioner/ Class Teacher/ ASNT/ SMT**

1. When the plan is written and reviewed, a timescale should be identified by the Named Person/ Lead Professional/ ASNT for further review.
2. Solution Focused Meetings/ Core Group Meetings should be co-ordinated, as appropriate, by the Named Person/ Lead Professional/ ASNT to support the needs of individual learners.
3. During Review Meetings the Named Person/ Lead Professional/ ASN Teacher should co-ordinate the agreed Action Plan moving forward which all parties agree to.
4. If a child has an Individualised Education Programme (IEP):
 - The long term targets will be reviewed by the Class Teacher/ ASN Teacher annually with the parent and the child and shared/ agreed at the child's plan.
 - The short term IEP targets will be reviewed termly by the class teacher, parent and child, in consultation with the ASN Teacher where appropriate.

Individual Educational Programmes (IEPs)

“Where the curriculum needs to be individualised an Individualised Educational Programme (IEP) may be drawn up . . . This will be to record needs, the supports required to meet these needs, the learning outcomes and the planning needed for the programme to be as robust as possible . . .

INDIVIDUALISED EDUCATIONAL PROGRAMME (IEP) *Robust and effective IEPs are the key planning documents for meeting the Additional Support Needs of children and young people. Parents, children and young people should be involved in drawing up and reviewing their IEP.”*

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“Consideration of whether an IEP is appropriate for a pupil, should be placed within the context of a staged approach with various support strategies being implemented within the classroom in relation to differentiation of materials, groupings or classroom environment before considering the need to individualise the curriculum.

IEPs are required for those pupils whose needs cannot be met by normal classroom differentiation, or those who require significant elaboration to their curriculum provided by another service e.g. Speech & Language Therapy, Occupational Therapy etc. It is for the part of the curriculum that has to be individualised for the pupil. It is not a complete curriculum plan. IEP targets should be reviewed on a termly basis.”

Highland Council (2015): Individualised Educational Programmes

http://www.highland.gov.uk/downloads/file/228/individualised_educational_programme_general_guidance

The IEP is for the aspect of the curriculum that requires an individualised plan, as opposed to a whole curriculum plan. The long term targets will be reviewed by the Class Teacher/ ASN Teacher annually with the parent and the child and shared/ agreed at the child’s plan. The short term IEP targets will be reviewed termly by the class teacher, parent and child, in consultation with the ASN Teacher where appropriate.

Transitions

During key transition points – Nursery/P1 and P7/S1 – relevant staff from centres, schools and agencies will be invited to review meetings for individual learners. This will be coordinated by the Named Person/ Lead Professional or the Additional Support Needs teacher.

Appendix 1: Additional Support for Learning Teacher – Roles and Responsibilities

The Additional Support Needs Teacher will:

- Participate in collaborative approaches to meeting pupils' needs.
- Together with the head teacher (or designated person with responsibility for Additional Support Needs in the school), consult and liaise with professionals from other agencies.

THE ROLE OF AN ADDITIONAL SUPPORT NEEDS TEACHER IS TO:

- ❖ Act as a consultant on additional support needs.
- ❖ Jointly identify and assess additional support needs.
- ❖ Collaboratively plan learning and teaching using the staged approach.
- ❖ Together with school staff, work in partnership within integrated services, using the Highland Practice Model.
- ❖ Contribute to professional development
- ❖ Maintain a high level of knowledge of best practice and the legislative framework relating to additional support needs.

KEY TASKS

- ❖ Participate in a child centred, whole school approach to meeting pupils' learning needs through:
 - Ensuring the pupil is heard and involved in decisions which affect them.
 - Using solution focussed approaches.
 - Acting as consultant to other members of staff by offering advice on a full range of learning and teaching strategies, methods and resources.
 - Teaching co-operatively with class teachers to offer the most effective combination of class, group and individual work.
 - Developing/differentiating curriculum for pupils with additional support needs.
 - Assessing, recording and reporting on the needs of pupils to help identify appropriate approaches to learning and teaching.
 - Working in partnership with parents and other professionals.
 - Ensure pupils have access to impartial information, advice and guidance relating to their needs.
- ❖ Undertake appropriate and agreed professional development.
- ❖ Participate in and contribute to staff development to support inclusion through overcoming barriers to learning.
- ❖ Consult with and guide Pupil Support Assistants in their work.
- ❖ Advise on the deployment of Pupil Support Assistants.
- ❖ Assist in promoting and safeguarding the health, welfare and safety of pupils and other staff using a risk assessment framework.

ASN Teacher Job Spec – LNCT 32

<http://www.highland.gov.uk/downloads/file/12929/lnc232-asn-teacher-job-spec>

Appendix 2: Pupil Support Assistants – Roles and Responsibilities

Organisation and Preparation of Resources

- Classroom administration and clerical tasks e.g. photocopying, laminating, filing and displaying pupils' work, creating classroom displays, taking dinner money etc.
- Resource Management e.g. setting up the classroom for specific tasks, clearing away and tidying resources, cataloguing, retrieving and preparing materials for learning and teaching, setting up ICT equipment and various forms of media, preparing homework folders etc.

Curriculum Support

- In-class generic support e.g. general support while pupils are processing new information and ideas, contributing to a positive classroom climate and positive school ethos in building positive relationships with pupils and colleagues etc.
- Individual and group support e.g. reading, scribing, supporting Highland Literacy and Numeracy Programmes, supporting the use of ICT etc.
- Listening to children and using praise and encouragement to support the development of self-esteem, communicating appropriately e.g. using appropriate language and nonverbal supports, using specialist communication systems e.g. signing, Makaton etc.
- Support for pupils for whom English is an additional language.
- Additional individual support e.g. observation and contributing to the assessment and planning for individuals and groups, providing nurture and emotional support, supporting language programmes and/or movement programmes as recommended by specialist children's services etc.
- Support outwith the classroom e.g. supporting pupils to achieve the desired outcomes while involved in activities outwith the classroom or on visits and trips. Supporting pupils in practical activities e.g. swimming, horse riding, art, science etc.

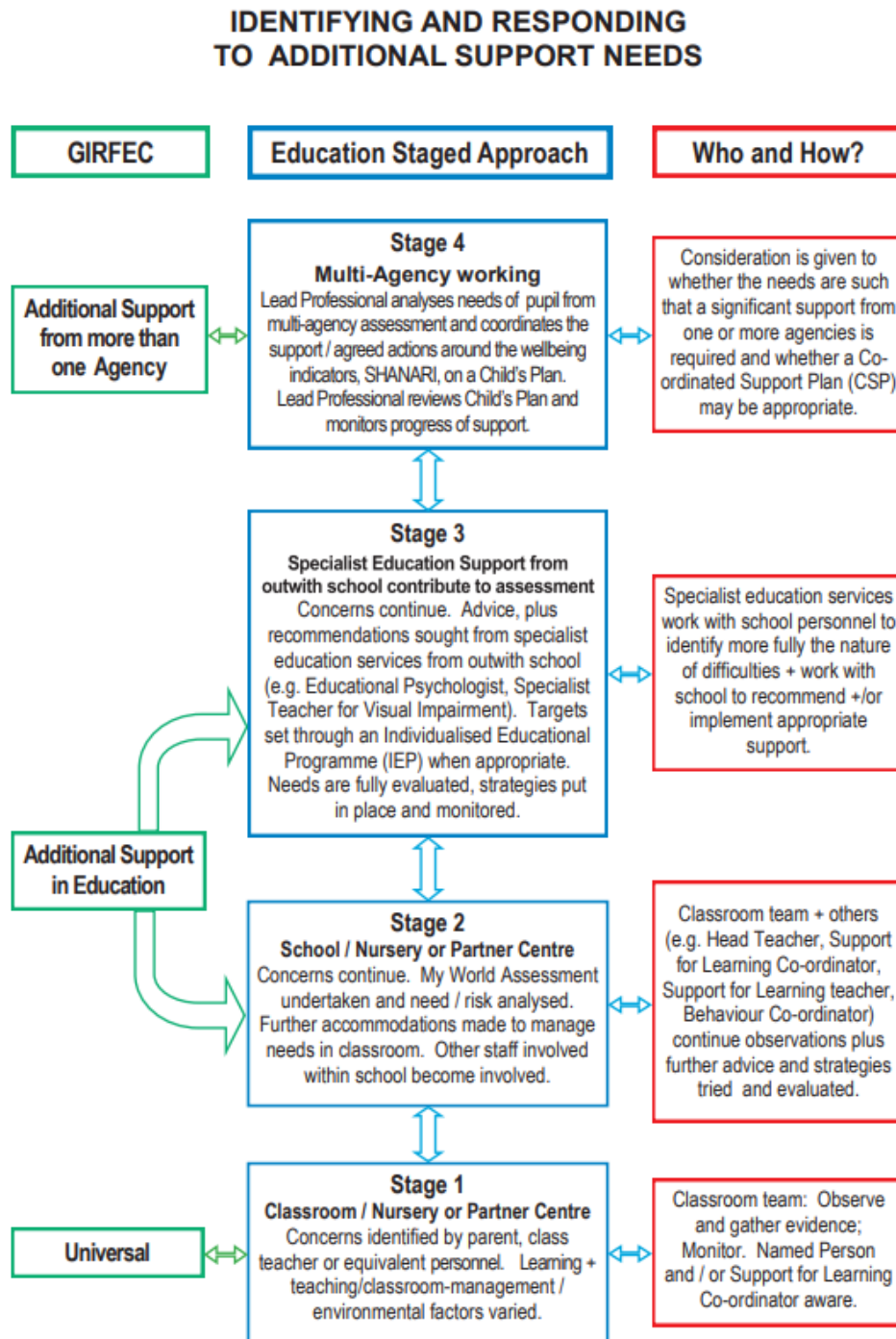
Personal Care and Development

- Supervision outwith the classroom e.g. in cloakrooms, corridors, dining area, playground etc.
- Providing reassurance, comfort and first aid for minor ailments and playground accidents etc.
- Providing personal care to pupils requiring intimate care e.g. toileting, feeding, intimate medical care etc., in line with agreed protocols and the child's plan, maintaining dignity and enabling independence as far as possible.
- Providing personal care to pupils requiring moving and handling, in line with agreed protocols and the child's plan, maintaining dignity and enabling independence as far as possible.
- Administration of medicines, in line with medical protocols and the child's plan.
- Supporting the development of mobility, language and emotional literacy by following programmes and activities recommended by specialist support services within the child's plan e.g. speech and language therapy, occupational therapy, behaviour support etc.

Pupil Support Assistant Handbook

http://www.highland.gov.uk/downloads/file/205/pupil_support_assistant_handbook

Appendix 3: IDENTIFYING AND RESPONDING TO ADDITIONAL SUPPORT NEEDS



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