



DEVONPORT HIGH SCHOOL FOR GIRLS

SPECIAL EDUCATIONAL NEEDS and DISABILITIES (SEND) POLICY

Named person: Ruth Morgan

Category: Statutory

Review: Annually or when there are significant changes

Date to be reviewed: Summer 2024

This policy has been reviewed with regard to the work/life balance of staff.

Adopted by the Trustees Committee on: 10/07/2023

(In addition to this policy the document "Education, health and care needs assessments and plans: guidance for temporary legislative changes relating to Covid-19" should be consulted via the DfE website where EHCPs are concerned.)

Overview

The DHSG Special Needs Policy is based on the Code of Practice for Special Educational Needs (Sept 2014) applicable from age 0 to 25. It aims to promote a consistency of approach to meeting children's Special Educational Needs, with a focus on preventative work to ensure that those needs are identified as quickly as possible and early action is taken.

The legislation underpinning this policy are The Children and Families Act 2014, The Code of Practice for SEN 2014, Managing pupils with Medical Conditions in Schools 2014, The Equality Act 2010 and Keeping Children Safe in Education 2023.

Aims and Objectives of this Policy

At DHSG we strive to ensure that everyone has an equal opportunity to fully engage in the whole curriculum.

- To adopt a whole school approach to SEND in which responsibility for students with SEND lies with all members of staff
- To ensure that all students have access to a broad, balanced and challenging curriculum that is suitably differentiated to meet their needs
- To provide opportunity for all students to achieve their highest possible level of success in a supportive learning environment
- To promote equal opportunities for all students
- To foster the highest levels of self-esteem amongst all students
- To fulfil the requirements of the 2014 Special Educational Needs Code of Practice

Knowledge and understanding of Special Educational Needs

A student has a learning difficulty or disability if she or he:

has a significantly greater difficulty in learning than the majority of others of the same age,

or

has a disability which prevents or hinders her or him from making use of facilities of a kind generally provided for others of the same age.

There are four broad areas of SEND need:

Communication and Interaction: This can be summarised as speech, language and communication causing difficulty in communicating with others, or social interaction difficulties as caused by conditions such as ASC, Asperger's Syndrome and Autism.

Cognition and Learning: Summarised as students who learn at a much slower pace than their peers even with appropriate differentiation (including moderate and severe learning difficulties: MLD/SLD), as well as specific learning difficulties such as Dyslexia, Dyscalculia and Dyspraxia.

Social, Emotional and Mental Health difficulties: Summarised as students showing isolated, challenging, disruptive or disturbing behaviours or having underlying mental health difficulties such as anxiety, depression, self-harming, substance misuse or eating disorders.

Sensory and/or Physical needs: Summarised as students having a disability that requires special educational provision. These can be age related and can fluctuate. For example, these could be vision, hearing or multi-sensory impairments.

Teachers are responsible and accountable for the progress and development of all students in their class (this includes where students access support from teaching assistants or specialist staff), as such, it is recognised that all staff at DHSG are teachers of Special Educational Needs and Disability. High quality teaching differentiated for individual students is the first step in responding to students who have or may have SEND.

All our teachers require the requisite knowledge and understanding of:

- categories of SEND as set out in the Code of Practice
- ways in which students' individual needs can be met within the 'day to day' remit of planning, teaching, learning and assessment
- how to access SEND related data and to use it purposefully so that it impacts on planning, teaching, learning and assessment
- how to realise more complex and challenging targets
- how best to use/deploy Support staff so that students' individual needs are met
- relational approaches to behaviour that support all students.

Where progress is still less than expected and it has been established that high quality teaching and differentiated support has been applied by the teacher to no effect, the class teacher should, working with the SENCo, assess whether the student has SEND.

The SENCo at DHSG is: Miss J Ricks

The SLT lead for Inclusion is: Mrs R Morgan

The Trustee for SEND is: Ms Roni Jay

On deciding that a student may need SEND support a teacher can complete a Student Support Team referral (see appendices). Where appropriate and agreed by the SLT link for Inclusion the teacher will be linked to the SENCo who will provide advice and guidance for the teacher in gaining appropriate support for the student. The following process will be followed:

- the teacher will complete a post referral form that seeks to identify the "Assess, Plan, Do Review" process that assists in the identification of difficulties.
- the teacher, with support from the SENCo should meet with the parents/carers to look at strengths and difficulties. An agreement about next steps should be made, a review date set and a note placed on the student's record and given to the parents/carers
- the student may or may not be identified as having SEND at this stage, however where it is agreed that a student does have SEND, this process must be followed and parents/carers must be formally informed in writing of what provision is being made
- the SENCo will update the Pupil in Need (PIN) List and this information is inputted onto the School Information System (SIMS and Edulink) accordingly, either 'K' (receiving SEN Support) or 'E' Statement/ Education Health and Care Plans (EHCP)
- a Pen Portrait will be compiled for the student.

SEND Support at DHSG

SEND support will take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the student's needs and of what supports the student in making good progress and securing good outcomes. This is known as the graduated approach and consists of a four-part teacher led cycle of: Assess – Plan – Do – Review.

All teachers of a student receiving SEND support will be made aware of the students plan. Where a student is receiving SEND Support the parents/carers will meet with the school at least three times over the year, this will usually be coordinated by the SENCo.

Where students are still making less than expected progress we may involve external specialists or request an Education, Health and Care needs assessment. We will always involve parents/carers and students where this is the case.

We have published a detailed SEND School Information Report itemising our SEND offer. Please see the appendices for this and copies of the Literacy Intervention procedure, ICT support for SEND and the Student Support Team structure and offer.

Admission Arrangements

Students with SEND follow normal admissions procedures. The only criterion for priority is a student with an Education, Health and Care Plan that names DHSG.

Partnership with parents/carers

At DHSG we work in partnership with parents/carers to provide an education of the highest quality, which celebrates everyone's success in a stimulating and caring environment where all our differences are valued. We believe that the relationship between DHSG and its parents/carers is a partnership which involves a two-way process. DHSG provides an open door policy where parents/carers are encouraged to contact the school whenever they have a concern and a convenient time will be made for them to visit the school to discuss the matter further. We recognise and value the input of the family and believe that this has a crucial bearing on a student's educational progress and on the effectiveness of any action the school may take. By working with parents/carers we aim to provide the best opportunities for our students in a nurturing and safe environment where they feel listened to and respected.

We aim to ensure that parents/carers of students at DHSG are open and confident in working in partnership with us and with other professionals and we aim to ensure that we support parents/carers in this process.

Involvement of students

We recognise that all students have the right to be involved in making decisions and exercising choice (SEND Code of Practice). At all times students are engaged in their education and encouraged to develop sustainable skills and strategies that enable them to overcome the barriers to their learning successfully. All students who receive SEND support, EHCPs are fully involved in their planning and review process.

Leadership and Management of SEND within school

The Head Teacher and the Trustees have delegated the responsibility for the day to day implementation of the policy to the SENCo and Assistant Head Teacher for Inclusion.

In line with the SEN Code of Practice (2014) all staff in school have a responsibility for students with SEND. Current Teaching and Learning protocols within school promote Quality First Teaching.

SEND support forms part of the Student Support Team offer at DHSG and is managed through a single point referral system coordinated by the Senior Leadership Team (SLT) lead on Inclusion. Please see the appendices for an overview of the team structure.

Roles and Responsibilities

Trustees should ensure that:

- there is a designated, qualified SENCo and that sufficient time is allocated to execute the role
- there is a named governor that has specific oversight of SEND
- the school meets its' statutory obligation to publish a School Information SEN Report and that this is available on the website and updated annually
- the school cooperates fully with the Local Authority in creating the Local Offer and managing personal budget planning
- all staff are aware of students with SEND
- teachers in the school are aware of the importance of identifying and providing for those students who have special educational needs and are accountable for their progress
- staff are provided with opportunities for SEND CPD.
- a student with SEND or medical condition participates fully in the activities of the school so far as is reasonably practical and compatible in line with the Equalities Act 2010 and Children and Families Bill 2014

- the school reports to parents/carers on the implementation of the school's policy for students with SEND, this is carried out as part of the normal annual review process for students with an EHCP
- parents/carers are notified of a decision by the school that SEND Support is being made for their child – parents/carers should be involved from the outset in discussing their child's difficulties and notification of any provision being made should not come as a surprise to any parents/carers and this should be demonstrated through the SEND Policy
- the school is making reasonable adjustments for students with SEND
- they are fully involved in developing and monitoring the school's SEND policy
- they are up to date and knowledgeable about the school's SEND provision, including how funding, equipment and personnel resources are deployed
- SEND provision is an integral part of the school development plan
- the quality of SEND provision is continually monitored

Assistant Head Teacher for Inclusion

The Assistant Head Teacher for Inclusion coordinates the work of the Student Support Team and will:

- work closely with the SENCo as part of this team
- act as a single point of referral for the team
- analyse whole school inclusion and progress data to monitor significant groups and vulnerable students
- use this information to drive team decisions
- hold regular team meetings
- through team consultation, allocate referred students for appropriate support programmes
- liaise with the Head Teacher and Trustees concerning statutory responsibilities, resources and student outcomes

SENCo

The SENCo has day-to-day responsibility for the operation of the SEND policy and co-ordination of specific provision made to support individual students with SEND and medical conditions, including those who have EHC plans. They also provide professional guidance to colleagues and will work closely with staff, parents/carers and other agencies. In addition they will:

- engage with Collaborative Quality Assurance for SEND
- manage the day to day deployment of the Nurture Base Manager, Teaching Assistants and Higher Level Teaching Assistant
- lead on planning for supporting students with medical conditions, meeting with parents/carers and health professionals to produce a Health Care Plan to disseminate to staff
- advise on the graduated approach to providing SEND support
- lead with EHCP: requesting assessments, coordinating meetings and meeting statutory deadlines
- produce, review and update the School Information SEND Report annually
- work with the Local Authority on the Local Offer
- ensure that all records of students with SEND are accurate and up to date
- produce Pen Portraits for all teachers of those with SEND to guide differentiation
- contribute to staff training on SEND
- take a specific lead role with students who have ASC, ADHD, eating disorders or literacy difficulties/dyslexia
- administration of access arrangements and screening for specific learning disabilities
- analyse progress data after every Progress Review to identify patterns and implement targeted support for staff and students where progress patterns dictate
- meet regularly with the Assistant Head Teacher for Inclusion and contribute to the smooth running of the Student Support Team
- advise on the deployment of resources to meet students' needs effectively
- liaise with parents/carers of students with SEND
- liaise with external bodies, agencies and specialists being a key point of contact
- be a key point of contact and support for transitions of students with SEND providing enhanced arrangements as required
- work with the Head Teacher and school Trustees to ensure that the school meets its responsibilities under the Equality Act (2010) with regard to reasonable adjustments and access arrangements

- liaise with the Designated Teacher for LAC/PLAC where students also have SEND
- be responsible for producing a SEND self evaluation and development plan

Class Teacher

- be aware of the school's policy and procedures for SEND
- be accountable for the progress of all students in their classes, teaching students with SEND via appropriately adaptive teaching to meet their individual needs
- be responsible for seeking CPD for SEND where required
- where progress is less than expected despite quality teaching, make a referral to the Student Support Team
- work with the support of the SENCo, to decide the action required to assist students and meet with parents/carers
- work in partnership with parents/carers
- work with the SENCo to develop targets for students in their subjects
- work with the SENCo to collect all available information and be responsible for monitoring the impact of interventions with students, including those delivered by Support Team staff
- ensure they are always familiar with Pen Portraits of those SEND students that they teach.

Special Provision

The school building complies with current legislation; adaptations occur to meet individual needs. See section 'A' of the appendices for the DHSG Disability and Accessibility plan.

Identification and Assessment

DHSG staff will liaise carefully with all feeder primary schools as part of our transition processes. The Head of House with responsibility for transition works in collaboration with the SENCo concerning SEND, enhanced transition arrangements are planned and coordinated by the SENCo for vulnerable students where necessary (for example additional induction days as required). The SENCo can also attend Annual Reviews and multi-agency reviews of students in Year 6 where appropriate.

The Code of Practice provides clear and accessible guidelines for the identification of students with SEND. We recognise that the assessment of students with SEND must be carried out as early and promptly as possible, and that staff who carry out these assessments need to have the requisite level of knowledge and expertise in order that these assessments are accurate.

All students complete screening assessments including reading and spelling on entry to DHSG. There are also classroom observations where necessary.

The progress of all students receiving SEND Support is reviewed termly and their level of support adjusted accordingly.

Identification of Specific Learning Difficulties

Assessments for specific learning difficulties (literacy and numeracy) will be undertaken by the SENCo. In order for the assessment process to take place the SENCo requires evidence of a 'history of need', this is evidence over time of an ongoing and significant barrier to learning.

In order to collate the necessary information and ensure the most effective support is put in place, the following process should be followed;

- teaching staff should provide evidence of a 'history of need' via a portfolio, for example; examples of work, academic assessment data, reports from previous assessments (standardised or in house assessments), correspondence from parents/carers or the students' previous educational establishment outlining concerns.
- concerns regarding literacy should be raised initially with the students' English teacher following the process outlined in the 'literacy intervention order of referral' (page 17).

- where a teacher remains concerned about a students' progress they should undertake the 'assess, plan, do review' process to establish strategies and processes that can help the student overcome potential barriers to learning. Should the student's difficulties persist, the teacher should submit a Student Support Team referral form to the Assistant Head Teacher for Inclusion via RM Launch Pad in the SEN Shared area..
- following this referral, the teacher that submitted the referral will be required to complete the post referral form, which documents the 'assess, plan, do, review' process used to identify this potential learning difficulty.
- following the collation of this information, the SENCo will work with the student to establish a holistic understanding of the situation and perceived difficulty.
- where appropriate, a series of screening assessments will be undertaken by the SENCo.
- all screening assessments used by the SENCo are recognised, standardised assessments that will provide high quality data required to establish specific learning needs and inform future support and, where necessary, any examination access arrangements for public examinations.

Curriculum Access and Provision

All staff receive advice, guidance and training to support SEND students (and those with medical conditions) in accessing the curriculum and ensuring the most effective provision. Students are supported in developing appropriate social skills and positive relationships enabling them to become more independent through bespoke, time focused interventions. Specific interventions are put in place to address student's SEND, helping to remove the barriers to their learning and enabling them to make progress across the curriculum.

Some students, due to their needs, may require modification to their curriculum and a small percentage qualify for access arrangements to support them when taking external examinations.

The SENCo liaises with the Head of Sixth and external post 16 provision (where applicable) to ensure that students with SEND have effective and efficient transitions.

Monitoring and Evaluation

The class teacher is responsible for the monitoring and evaluating of the effectiveness of interventions with their students. Pre and post intervention data is analysed. Annual Reviews and multi-agency meetings provide evidence for those students with SEND. This is in addition to the tracking and reporting systems already used by the whole school. The SENCo in line with all other areas of the school has an annual evaluation and improvement plan.

Multi agency working

DHSG makes full use of local specialist agencies who can offer support and advice on special educational needs. With the agreement and support of parents/carers, referrals are made to relevant agencies. Detailed reports and data are gathered from staff which is included on the referral form and a student may be assessed within the classroom or individually by a specialist. The recommendations made by the agency will be shared with parents/carers and the staff at DHSG. All staff will ensure that strategies are adopted to help the student.

CPD

All staff undertake induction and on-going professional learning opportunities, CPD is available to support staff in their role in supporting students with SEND. CPD and expertise is cascaded throughout the school to enable all staff to work with a diverse range of needs, working in collaboration with outside agencies to maximise the support offered to students.

Resources

Staff are deployed to maximise the support for students with SEND. Effective, time limited and personalised programmes of support for both individual students and groups are offered. These are regularly reviewed and analysed to ensure all interventions are appropriate in meeting the needs of students.

Medical Conditions

DHSG is an inclusive community that aims to support and welcome students with medical conditions. We will ensure that arrangements are in place to support students who have medical conditions so that they have full access to school life. We will consult with health and social care professionals, students and parents/carers to ensure that we effectively support the unique needs of individual students with medical conditions to meet their full potential. We recognise that our students health needs can change over time and in ways that cannot always be predicted, and that extended absences might result. We will work closely with all involved in the care of our students to find suitable solutions to limit impacts on their education and emotional wellbeing.

The Children and Families Act 2014, places a duty on schools to make arrangements for children with medical conditions. Students with special medical needs have the same right of admission to school as other children and cannot be refused admission or be excluded from school on medical grounds alone.

The prime responsibility for a student's health lies with the parent/carer who is responsible for their medication and we request that all parents/carers supply the school with any necessary information. However, teachers and other school staff in charge of students have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine. The school takes advice and guidance from Local Authorities which encourages self-administration of medication when possible.

DHSG aims

- To ensure that all students with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure that students with medical conditions access and enjoy the same opportunities as any other student in school.
- Recognise that students health needs may change over time in ways that cannot always be predicted, sometimes resulting in extended absences.
- In making decisions about the support which we provide, we will establish relationships with relevant health services to help. We will ensure that we as a school work together with the LA, health professionals and other support services to ensure that students with medical conditions receive a full education.
- We will aim to receive and consider advice from health care professionals and listen to and value the views of parents/carers and students.
- In making any arrangements we will ensure that the focus is on the needs of each individual student and how their medical condition impacts on their school life.
- Arrangements in place not only show an understanding of how medical conditions impact on a student's ability to learn but also aim to increase their confidence and promote self-care.
- We will ensure that staff are properly trained to provide the support each students' needs.

Implementation

- The Head Teacher is responsible for ensuring that sufficient staff are suitably trained to support students with SEND.
- All relevant staff will be made aware of a student's condition as part of induction procedures, via CPD throughout the year via the SENCo.
- The class teacher is responsible for briefing a supply teacher on a student's medical condition. If this cannot take place due to long term absence then this role falls to the SENCo.
- For school visits during and outside normal school hours, the Group_Leader is responsible for compiling a risk assessment to include managing medical conditions which promote student inclusion. This will involve liaising with the SENCo. The Education Visits Co-ordinator (EVC) is responsible for monitoring the risk assessment. Please refer to the guidance document for off-site activities.
- The SENCo is responsible for developing and monitoring Individual Healthcare Plans.
- **In a medical emergency staff will:**
 1. take action
 2. contact emergency services and know what information to give and who to contact within the school

3. always accompany students and will stay with them until a parent/carer arrives. The school tries to ensure that the staff member will be one the student knows.
4. not take students to hospital in their own car. On occasions however, the Head / Deputy may agree to staff with business insurance taking students to the local Minor Injuries Unit if the parents/carers cannot be contacted

Procedures when notified a student has a medical condition

- The Head of House will work with the SENCo and Assistant Head Teacher for Inclusion and other health care professionals in ensuring a Health Plan is created and a suitable reintegration plan is in place after periods of absence. This will be carried out in consultation with the parents/carers and if possible the student.
- When a student leaves school their records will be passed to the next school and the SENCo will contact the relevant professional at the new school to discuss the student's medical condition.
- For students starting a new school, arrangements should be in place in time for the start of the relevant school term.
- If there is a new diagnosis or the student is moving to a new school mid-term, every effort should be made to ensure arrangements are in place within 2 weeks of their arrival at school.

Individual Healthcare Plans (IHP). (Please see the appendix for an example)

- The SENCo is responsible for developing an IHP in supporting students with medical conditions.
- The school, healthcare professionals and parents/carers should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached then the Head Teacher has the final decision.
- The IHP will be drawn up in partnership between the school, parents/carers and relevant healthcare professional. Students will also be involved whenever appropriate. The responsibility for ensuring the plan is finalised and implemented rests with the school.
- We will use Healthcare Plans to inform the appropriate staff via a Medical Pen Portrait (including supply teachers and support staff) of students in their care who may need emergency help. Copies are held by the SENCo, the main office and individual student's file.
- The Trustees should ensure that plans are reviewed at least annually or earlier if evidence is presented that the student's needs have changed.

Roles and Responsibilities

The Head Teacher and Trustees ensure that the whole school environment is inclusive and favourable to students with medical conditions. This includes the physical environment, as well as social, sporting and educational activities. We are committed to:

- creating an accessible physical environment which includes out-of-school visits. The importance of all students taking part in sports, games and activities.
- all our classroom teachers, PE teachers and sports coaches making appropriate adjustments to sports, games and other activities to make physical activity accessible to all students.
- ensuring that classroom teachers, PE teachers and sports coaches understand that students should not be forced to take part in an activity if they feel unwell.
- making teachers and sports coaches aware of students in their care who have been advised to avoid or to take special precautions with particular activities.
- ensuring that students with medical conditions can participate fully in all aspects of the curriculum and that appropriate adjustments and extra support are provided.

Information Sharing in School regarding Individual Health Care Plans (IHCP)

IHCPs and Medical Pen Portraits are updated annually or as the students' condition changes. It is the responsibility of Teachers, HOH and SLT to ensure that all changes to medical conditions that would result in an IHCP, be shared with the SENCo in order to update the relevant plan or create one. Failure to share this information may render the students IHCP as void and could result in difficulties in a medical emergency. The current IHCP can be found in the appendix.

All DHSG staff have responsibility to:

- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- understand this policy
- know which students in their care have a medical condition and be familiar with the content of the student's Healthcare Plan via their Medical Pen Portrait
- allow all students to have immediate access to their emergency medication
- ensure students who carry their medication with them have it when they go on a school visit or out of the classroom
- understand the common medical conditions and the impact it can have on students
- ensure all students with medical conditions are not excluded from activities they wish to take part in

First Aiders have a responsibility to give immediate help to casualties with common injuries or illnesses and have the knowledge and skills to respond to injuries and when necessary ensure that an ambulance or other professional medical help is called. Please consult the separate First Aid Policy for more information.

Students have a responsibility to treat other students equally and inform their parents/carers, teacher or nearest staff member when they are not feeling well. If mature and old enough, students should know how to take their own medication and to take it when they need it.

Parents/carers of a child at this school have a responsibility to tell the school if their child has a medical condition and ensure the school has a complete and up-to-date Healthcare Plan for their child. Parents/carers should keep their child at home if they are not well enough to attend school and ensure their child catches up on any school work they have missed, as appropriate.

Staff Training and Support

- Any member of school staff providing support to a student with medical needs should have received suitable training.
- The relevant healthcare professional would normally lead on identifying and agreeing with the school the type and level of training required and how this can be obtained. The commissioning of relevant school training will be agreed with the SLT lead for CPD.
- Staff must not give prescription medicines or undertake health care procedures without appropriate training.
- All school staff will be made aware of this policy and their role in implementing it. Any new members of staff will have this policy included in induction arrangements. Parents/carers will be asked for their views and to provide relevant information to school staff as to how their child's needs can be met.
- After discussions with parents/carers, students who are competent should be encouraged to take responsibility for managing their own medicine and procedures.
- Wherever possible students are allowed to carry their own medicine (such as inhalers and for diabetes) and relevant devices or should be able to access their medicines for self medication quickly and easily. Students who can take medicines themselves or manage procedures may require an appropriate level of supervision.
- If a student refuses to take a medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the IHP. Parents/carers should be informed so that alternative options can be considered.

Managing Medicines on school premises

- Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so.
- Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. A first Aid certificate is not adequate for this role.
- No student under 16 should be given prescription or non-prescription medicines without their parent's/carer's written consent - except in exceptional circumstances where the medicine has been prescribed to the student without the knowledge of the parents/carers. In such cases, every effort should be made to encourage the student to involve their parents/carers while respecting their right to confidentiality.

- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents/carers should be informed.
- We would ask that where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- We will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely. Students should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to students and not locked away. This is particularly important to consider when outside of school premises e.g. on school trips. Any medicines kept in the refrigerator will be kept in the main office fridge in a separate box for medicines, clearly labelled and in an airtight container.
- A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. A record will be kept of any doses used and the amount of the controlled drug held in school.
- School staff may administer a controlled drug to students for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. We will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted.
- When no longer required, medicines should be returned to the parent/carer to arrange for safe disposal. Sharps boxes are used for the disposal of needles and other sharps and collection is arranged with the school nursing team.

Record keeping

- Parents/carers are asked if their child has any health conditions or health issues on the admission form, which is filled out at the start of each school year. Parents/carers of new students starting at other times during the year are also asked to provide this information on enrolment forms.
- Individual Healthcare Plans are used to record important details about individual student's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Parents/carers, healthcare professional and the student with a medical condition are asked to fill out the Healthcare Plan together.
- We use opportunities such as Parent Evenings to check that information held by the school on a student's condition is accurate and up to date. Every student with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.
- Parents/carers and students are provided with a copy of the student's current agreed Healthcare Plan.
- We ensure that all staff protect student confidentiality.
- We seek permission from the student and parents/carers before sharing any medical information with any other party, such as when a student takes part in a work experience placement. We are guided by the seven golden rules of information sharing (see Safeguarding and Child Protection Policy) and GDPR.
- All parents/carers of students with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required. Staff leading an offsite activity may request a full up to date list of medication/medical conditions that are likely to affect those students during the activity.

Unacceptable Practice

Staff will be guided by the advice provided in a students' Medical Pen Portrait. It is not generally acceptable practice to:

- Prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every student with the same condition requires the same treatment;
- Ignore the views of the student or their parents/carers; or ignore medical evidence or opinion, (although this may be challenged);

- Send students with medical conditions home frequently or prevent or discourage them from staying for normal school activities, including lunch, attending off-site activities and taking part in sporting activities unless this is specified in their individual healthcare plans;
- If students become ill, send them to the school office unaccompanied;
- Penalise students for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs; or
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school related off-site activities.

Supporting students through periods of absence from school

For some students, their health condition will require them to have an extended period of time out of school. We will do all that we can to ensure that such students are supported through their period of absence from school and sensitively re-integrated once they are well enough to attend.

The SENCo will take an active and continuing supportive role in their educational, social and emotional progress. We will at all times aim to work in partnership with parents/carers to ensure the best possible outcomes and a return to school as soon as possible.

Where a student's health condition requires an extended period of absence from school, the school may need to seek additional support from the Local Authority as part of their statutory obligations. This may require making an application for Alternative Complimentary Education (via ACE Plymouth section 19 panel), this will be coordinated by the SENCo. These students may be:

- (a) Those who have been deemed by a medical practitioner as being too ill to attend the school for more than 15 days or who have conditions which lead to recurrent absences (15 non consecutive days or more) from school which becomes significant in the longer term.
- (b) those with mental health illnesses who are unable to attend school [within the timescales identified in (a)].

Some students with medical conditions may have a disability. Where this is the case the Trustees will comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and/or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

The aim of the Local Authority will be to support the school in its work to reintegrate students into full time education at the earliest possible opportunity. In the greatest number of cases this means a return to mainstream education

We will continue to maintain contact with a student who is unwell and not attending school and will contribute to their academic and reintegration plans in order that they may enjoy a continuation in their education and support from us during their period of absence. This may include providing relevant information to the Local Authority and/or ACE Plymouth, helping to maintain contact with parents/carers, assisting with and guiding the work of the student, supporting the process of achieving public examinations or taking part in National Curriculum tests and providing emotional support. We will also maintain links with appropriate agencies including the, Local Hubs Educational Psychology Service and CAMHS. Reintegration back into school will be properly supported including the consideration of phased returns so that students with medical conditions fully engage with learning and are supported so as to not fall behind when they are unable to attend school.

Part Time Timetables and Phased Returns

All students have a right to a full-time, efficient education suitable to their age, ability and any special needs they may have. All students registered at school should receive full time education consistent with their key stage:

21 hours at Key Stage 1
23.5 hours at Key Stage 2
24 hours at Key Stage 3 /4 (Year 10)
25 hours at Key Stage 4 (Year 11)

Circumstances in which a temporary reduced timetable will be considered

1. As part of a reintegration approach for students who have not attended school for a period of time. For example, due to illness, disability or mental health issues. It is accepted that a reduced timetable may be appropriate as part of a planned reintegration for students who have not attended school for a period of time.
2. As part of the transition arrangements for exceptionally vulnerable children
For example, Looked After Children (LAC); children with an Education, Health and Care Plan (EHCP); children with disabilities and children at the point of transition from one setting to another.
3. As a strategy of last resort in managing students at risk of exclusion.

A risk assessment will be carried out for children where there are safeguarding concerns. We will risk assess as part of our considerations prior to deciding on a reduced time table. The risk assessment will take account of the safety and wellbeing of the student as well as the risk of the student engaging in risk taking behaviours when not attending school.

We have a duty of care for all students who are on our school roll. We will ensure that when a student is not expected to attend, there is a written agreement about who is carrying out the duty of safeguarding for each session. Parents/carers have responsibility for ensuring the safety and well-being of their child during the times they are not in school and also to support their child with any work set for when they are not in school.

A reduced timetable will require an agreement between the student, parent/carer and school. The number of hours spent in school will only be reduced for a time-limited period of no more than six weeks. Once a reduced timetable has been agreed, the student will be marked using registration Code C for the part of the day they are not in school.

When considering placing a student on a reduced timetable, we will:

- be satisfied that a reduced timetable is an appropriate intervention given the needs of the student. This will be informed by multi-agency discussions.
- have a robust plan for reintegration of the student back into full time education.
- Work in partnership with families.
- Provide a written plan to be signed by all parties (school/parents/carers and students) detailing the transition from part time to full provision over a maximum of six weeks.
- Review the plan every two weeks and evaluate progress.
- Complete local authority documentation including a parental agreement form

In exceptional circumstances we will consider an extension of a further six weeks dependent upon multi-agency advice and planning.

Students subject to an Education, Health and Care plan (EHCP)

Where a student has an EHCP the following additional steps will be taken:

- An interim annual review will be convened by the SENCO
- We will seek agreement from the LA representative to the part-time timetable and consult the Educational Psychologist
- We will ensure that the reduced timetable does not compromise the support provided to the student in order to meet their needs.

Monitoring arrangements

Our SENCO will keep a central record of all students on a reduced timetable and share this with the Attendance Officer we will also notify the Inclusion, Attendance and Welfare Service (IAWS) of all children on reduced timetables using the CME form.

Complaints

If parents/carers have a complaint this should be directed in the first instance to the SENCo. If there continues to be cause for complaint parents/carers should address their concerns to the Assistant Head Teacher for Inclusion. Please consult our Complaints policy for further information.

Temporary Part-Time School Timetable Agreement

Please complete this form for each child who is subject to a Part-Time Timetable prior to the start of the PTT and on the day the PTT ends and make sure it is logged on CPOMS.

Pupil Details:

Forename:		Surname:	
DOB:		Ethnicity:	WBR
UPN:		NCY:	
SEN Identified:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify eg. EHCP/K1/K2	Free School Meals: <input type="checkbox"/> Yes <input type="checkbox"/> No

Safeguarding:

Care Status:	<input type="checkbox"/> CiC - Full Care Order <input type="checkbox"/> CiC - Interim Care Order <input type="checkbox"/> CiC - Accommodated (Section 20) <input type="checkbox"/> Child in Need <input type="checkbox"/> Child Protection Plan
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How have any safeguarding risks and concerns been assessed and mitigated (with a particular focus re. the pupil being at home more often)?

Is there a Safeguarding concern:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please specify in box below, including any MASH referrals, missing episodes etc:
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School Details:

School Name:	Devonport High School for Girls	DfE No:	879 4152
If at an Alternative Provider please give details:			

Part-Time Timetable Details: (reason for Part-Time Timetable, please select all that apply)

Number of hours per week?		Within normal school hours?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="radio"/> Medical-Physical Health	<input type="radio"/> Medical - Mental Health	<input type="radio"/> Behavioural	<input checked="" type="radio"/> Emotional
<input type="radio"/> Other - please specify			

Details of Provision:

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.					

p.m.			
Provision when child is not on school site and who is the responsible person at these times?			
Actions to be undertaken which will enable the child to return to full-time education:			
Date PTT started:		Code being used to record absence:	
Planned date to return(ed) to full-time education:		Is this within 4 weeks?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If the return date is beyond 4 weeks please provide the date of the review to decide on return to full-time education and attach the plan for the child to return to full-time education.			
Review date:		Actual date of return to full-time education:	
Is there a Pastoral Support Programme / Multi-Agency Plan in place or underway eg. DAF? Please specify:			
If Yes, is there Multi-Agency involvement? Please specify below:			
Which of the following professionals have agreed to reducing the child's full-time entitlement to education? It is essential that the relevant professional(s) support the Part-Time Timetable prior to it starting.			
Date of meeting to agree Part-Time Timetable:			
Role/Title:	Name:	Contact Number:	
Behaviour Support Team – Advisory Teacher			
Child & Adolescent Mental Health Service (CAMHS) Worker:			
Clinical Psychologist:			
0-25 SEN Team Commissioning Officer:			
Educational Psychologist:			
Education Welfare Officer:			
Inclusion Officer (Education):			
Paediatrician:			
Police Officer:			
Social Worker:			

Youth Offending Officer:		
Safeguarding Officer		
SENDCO		
Other: (please specify)		
Was the Pupil involved in the discussion on the need for a Part-Time Timetable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Parent/Carer signature:	
Details of person completing this form:		
Name:		
Role:		
Email:		
Date form completed:		
Headteacher/School Staff signature:		

Guidance for teaching staff for the use of laptops by students with SEND

- The use of laptops for students with SEND and in particular Dyslexia and Specific Learning Difficulties (SPLD) is designed to reduce the barriers to learning for these students. The rationale behind the process is that students can be given work directly on a memory stick or via email. Students with literacy difficulties often find that by the time they have copied down notes they don't understand what the work is actually about (as they have concentrated so hard on copying the work down correctly). Research has proven that this barrier to learning is significantly reduced through the use of ICT. It is vital that the notepads are used for all large bodies of text in order for these students to be able to see mistakes and so assist them in correcting them.
- In using the laptops as their normal way of working, students are then allowed to use them for assessments and in examination conditions if they meet the examination board regulations. If this is not the norm students may lose these access arrangements.
- It is the student's responsibility to print and produce work from a lesson in time for the next lesson. All students are subject to the same rules about handing in work and behaviour marks should be given accordingly regardless of their identified SEND (unless there are specific circumstances as identified in the Pen Portrait or EHCP).
- It is the teachers' responsibility, as part of their differentiation to ensure that handouts and powerpoints are provided as electronic copies for these students wherever possible.
- Staff must also be aware that some students may need extra time to copy work as their typing may well be as slow as their written work.
- If the use of laptops is not appropriate for the lesson that has been planned, students should be advised of this prior to the lesson in order to avoid confusion e.g. group work.

Guidance for the use of ICT in examination conditions for students with SEND

The guidance for the use of ICT in examination conditions has been scrutinised to ensure that the recommendations used by DHSG follow those set out in the JCQ guidance booklet. The practices adopted in this guidance have been agreed by the Examinations officer, ICT team and the SENCo at DHSG. Please see the SENCo if clarification on any point is required.

- At the start of each cycle it will be the responsibility of the Head of Department (HoD) for each subject area to supply the SENCo with the planned dates for assessments.
- It is the responsibility of the HoD to identify any students in each group which have been identified as having SEND and those in need of ICT in the specified assessment.
- It is the responsibility of the class teacher to liaise with the SENCo at least 2 weeks prior to any assessment to ensure that the correct arrangements are in place to support the student.
- The SENCo will work with the class teacher and the ICT team to ensure that the ICT needs of the student are met in full for that assessment.
- Students will be provided with notepads or laptops that have been adapted to provide Word Pad only for these assessments and examinations.
- In assessments it will be the class teachers' responsibility to ensure that students take their work on a memory stick to the ICT team and print it off at the end of the assessment.

The SENCo will also:

- provide time for students to familiarise themselves with the relevant laptops/notepads.
- ensure that at least one of the examination computers will be held in the Learning Support Area at all times for students use.

Computer reader software and Reader Pens

A computer reader and reader pens will be awarded on account of:

- cognition and learning needs;
- communication and interaction needs;
- a medical condition;
- sensory and physical needs;
- social, mental and emotional needs.

For students with a disability or a learning difficulty a computer reader/reader pens may allow them to demonstrate their attainment effectively and independently and remove any barriers that may exist around reading proficiency and reading speed. However, a computer reader must be appropriate to the candidate's needs (spell checker disabled or enabled). It is a necessary requirement to ensure that sufficient time and training be provided to ensure the student is able to use a computer reader/reader pen effectively both in lessons 'as a normal way of working' and within examinations and assessments.

As an examination centre DHSG are required to provide evidence that use of a computer reader/reader pen is the students' normal way of working.

Where a student will have access to a computer reader in lessons, staff will be made aware to ensure the student can access this support as effectively as possible. The use of computer reader software will be coordinated by the SENCo who will liaise with the Examination Officer to ensure that access to a computer reader in examinations will be made available.

Examination Access Arrangements

The JCQ guidelines state that it is the responsibility of the SENCo to arrange all examination concessions in line with the guidance material handbook each year. The process for application for a student to gain examination concessions is as follows:

- requests for Examination Access Arrangements must be submitted in writing to the SENCo for approval. Appropriate evidence of need, for example, medical certification or proof of an ongoing need must be provided.
- applications sent directly to the Examinations Officer will not be considered.
- if the evidence does not meet the criteria of the JCQ examination concessions guidelines, or if the SENCo feels that it falls under the category of an “Examination Arrangement” application, such as to be sat in the front of the hall, this will be passed by the SENCo to the Examinations Officer who will then either accept or reject the application.
- the Examinations Officer will attempt to meet requests but has the right to reject the application at any point as arrangements must be considered against staffing levels and on the grounds of need.
- all evidence and applications should be with the SENCo by the 1st January for that year’s cohort.
- medical evidence of on-going conditions must be the most recent medical reports available. Concessions on medical grounds must be backed up by such evidence annually.
- verbal requests and those not made through the correct procedure will not be considered.

In relation to access arrangements for examinations, we are guided by the JCQ regulations as stated here:

7.3.5 The assessor should ideally be employed within the centre. Alternatively, the assessor is:

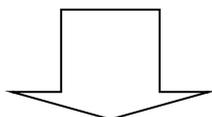
- employed at another centre, e.g. within an Academy chain; or
- employed by the Local Authority; or
- an external assessor who has an established working relationship with the centre or, before an assessment, establishes a relationship with the centre.

7.3.6 A privately commissioned assessment carried out without prior consultation with the centre cannot be used to award access arrangements and cannot be used to process an application using Access arrangements online.”

Literacy Intervention Order of Referral

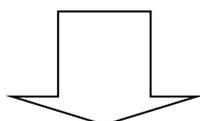
Stage 1

Subject Teacher should collect evidence highlighting the student's areas of need and of intervention already in place.



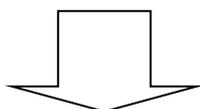
Stage 2

Subject Teacher should pass on their concerns and evidence to the student's English Teacher who will then consider the needs of the student



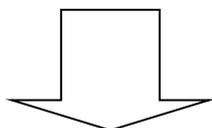
Stage 3

The English Teacher will implement the appropriate intervention (where applicable) for the duration of six weeks to assess the progress of the student



Stage 4

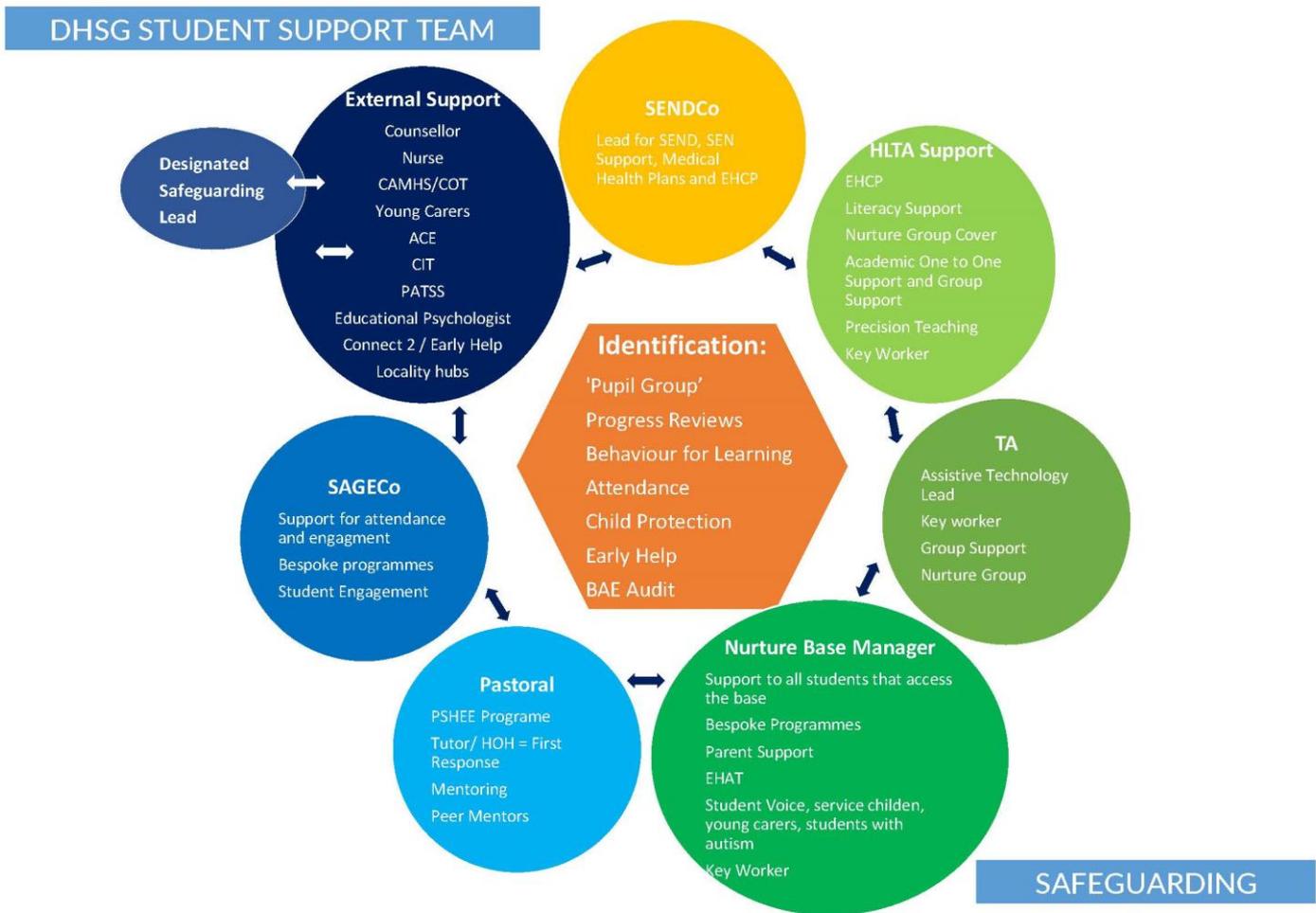
If the intervention has not produced the expected levels of progress the student's English Teacher will refer to the Head of English for further intervention strategies.



Stage 5

Where the student is still not making expected levels of progress with Literacy the Head of English will make a referral to the Student Support Team





The Student Support Team at DHSG provides advice, guidance and support in working directly with students and with staff (in an advisory role) to improve student engagement, progress and outcomes. Any member of staff can make referrals to the Support Team by completing the referral form and submitting it to the Assistant Head Teacher for Inclusion. All referrals will be considered and where thresholds are met, students will be allocated to the most appropriate member of the team to lead the support for them.

Referrals can be made where there are significant concerns in relation to progress and/or wellbeing. Members of the team can support on a wide range of factors:

- Safeguarding (Child protection concerns must be taken directly and immediately to the DSL)
- Literacy and Dyslexia
- Most Able
- EAL
- Attendance
- Behaviour for Learning
- Self Esteem
- Social and Emotional issues
- Bullying
- Mental Health
- Young Carers

SST Referral = via RM Unify Launch Pad in the SEN Shared area

Post referral – Barriers to learning

Following your referral to the Students Support Team (SST) it is essential we get a deeper understanding of the process undertaken before a referral has been made. As a teacher it is essential to Assess, Plan, Do and Review in order to identify the needs of the student, in line with the requirements of the government guidelines set out in the SEN Code of Practice.



Assess The students understanding, performance and ability.

Plan From the outcomes of this assessment, plan specific support to help the student in areas identified.

Do Explain to the student what they need to do and ensure that the student is doing so on a regular basis. If there is no improvement teachers should work with the student to identify other strategies or methods that can work.

Review Revisit the difficulty and establish if the strategy/ support helped and enabled further progress, if progress has not improved refer to SST the evidence above.

Should the strategies and support not help and no progress is made, SST may get involved. Now you have decided to refer for SEN enquiry this detail needs to be captured. Please can you complete the section on the reverse of this document and return to the SENCo ASAP.

What SST/ SEND support can we offer? (Examples)

Type of support	Social, emotional and mental health	Communication & interaction	Sensory or Physical	Cognition & learning
Generic in school support for all needs	PEN Portrait Adaptive teaching Kooth PBAS Learning mentor support		Peer mentoring Subject peer mentoring Bespoke SST support 'Drawing and talking'	
Additional in school support	Counsellor	CAMHS triangulation	Adapted resources	EP
	CAMHS triangulation	EP	Adapted facilities	Child Development Centre support
	EWO	SST mentoring 1 to 1 support		
	Attachment support	Counsellor		
External support	CAMHS therapy	Child Development Centre support	Learning mentor support in lessons	Child Development Centre support
	Family Group Conferencing	Speech and Language support	Specialist support (NHS)	Speech and Language support
	SHARP	Communication Interaction Team support (outside agency)		
	Youth Worker			
Application for EHCP or S19 support				

In order for us to access outside agency support we are required to document; what support we have provided, how teaching staff have differentiated to support the student and the history of need for the student, this document can help to provide this detail.

Students Name		Tutor group	
Name of referrer		Date	

Assessment – How did you identify this student as needing support?	Outcomes – What was the result of your assessment? What evidence do you have/ what did you observe?

Plan– What strategies and support have you tried with the student?	Do – Is the student applying the strategies and accepting the support? (Observation).

What are your ongoing concerns

Devonport High School for Girls Health Care Plan for Students with Medical Conditions

Office use only
/

Today's Date: / / Review Date: /

Student's Name

Tutor Group

Date of birth

Student's address

Medical diagnosis or condition

Date/year of diagnosis

Family Contact Information

Name & relationship to student

Phone no. (work)

(home)

(mobile)

Name & relationship to student

Phone no. (work)

(home)

(mobile)

Clinic/ Hospital Contact

Name

Department

G.P Name

Surgery Name and contact

Describe the students' medical condition, triggers, signs, symptoms and treatments.

Trigger:

Signs

Symptoms:

Medication/Treatments:

Dose Frequency:

Describe what constitutes a medical emergency for the student, and the action to take if this occurs:

N.B

Medications brought into school must be stored at the school office in a named container with your child's details and a recent photo attached. It is the responsibility of the parent /carer to ensure that sufficient medication is provided, that dosage is clearly labelled and is in date. Spare epi-pens and glucose based snacks should be carried by the student in their bags where relevant to ensure that they can be easily accessed where necessary.

Signed by:

Parent/Carer:

Date:

Print Name and relationship to the student:

Medicines on school off site activities.

There is no legal or contractual duty on staff to administer medicine or supervise a student taking it. However there are clear directives under 'Duty of Care'.

“Section 3 of the Children Act 1989 provides a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purpose of safeguarding or promoting the welfare of the child.”

“Any member of school staff may volunteer or be asked to provide support to students with medical conditions, including the administration of medicines, although they cannot be required to do so. Trustees should ensure that staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. Although administering medicines is not part of teachers' professional duties, they can provide other support and should take into account the needs of students with medical conditions that they teach.” *DfES 2014*

Any member of school staff providing support to a student with medical needs should have received suitable training.

Staff should not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect individual healthcare plans at all times) from a healthcare professional. A first aid certificate does not constitute appropriate training in supporting students with medical conditions.

Students role in managing their own medical needs

After discussion with parents/carers, students who are competent should be encouraged to take responsibility for managing their own medicines and procedures. Students should be allowed to access their medicines for self-medication, quickly and easily. Students who can take their medicines themselves or manage procedures may require a level of supervision. If it is not appropriate for a student to self-manage, then relevant staff should administer medicines and manage procedures for them. Prescription medication and homely medications provided by parents should be stored in the school office, with the exception of asthma inhalers, epi-pens and anti-histamine creams.

If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents/carers should be informed.”

Offsite activities

In planning off-site activities teachers should be aware of how a student's medical condition will impact on their participation, but there should be enough flexibility for all students to participate according to their own abilities. Arrangements should be made for the inclusion of students in such activities unless evidence from a clinician such as a GP or consultant states that this is not possible. It is essential that the visit leader speaks to the SENCo to ascertain information regarding medical conditions, if Individual Health Plans (IHP) are in place, and to obtain copies of these and store relevant information with providers appropriately.

Staff should consider what reasonable adjustments they might make to enable students with medical needs to participate fully and safely on visits. It is best practice to carry out a risk assessment so that

planning arrangements take account of any steps needed to ensure that students with medical conditions are included. This will require consultation with parents/carers and students and advice from the school nurse or other healthcare professional who are responsible for ensuring that students can participate. Form DHVT6 has been produced to list all medical needs for participants and assist with identifying students concerned.

Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, a parent/carer or another volunteer might be needed to accompany a particular student.

Arrangements for taking any necessary medicines will also need to be taken into consideration. Staff supervising off site-activities should always be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.

If staff are concerned about whether they can provide for a student's safety, or the safety of other students on a visit, they should seek parental/carer views and medical advice from the school health service or the student's GP. Other advice is available from EVC and SENCo.

Managing medicines

No student under 16 should be given prescription or non-prescription medicines without their parent's/carers written consent – except in exceptional circumstances where the medicine has been prescribed to the student without the knowledge of the parents/carers. In such cases, every effort must be made to encourage the student to involve their parents/carers while respecting their right to confidentiality.

A student under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents/carers should be informed.

Schools should only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.

All medicines should be stored safely. Students should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should be always readily available to students and not locked away. This is particularly important to consider when on school off site activities.

A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container if possible and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept.

A member of staff may administer a controlled drug to the student for whom it has been prescribed providing they have received specialist training/instruction. We will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted.

When no longer required, medicines should be returned to the parent/carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

Code of Practice

The administration of medicines on schools off-site activities falls into two categories.

1. Prescribed medication for known medical conditions.
2. Non-Prescription Medicines.

Prescribed medication

Administering prescribed medication – Note – medication for off-site activities should be collected by the trip leader, or a nominated member of staff at the earliest opportunity. Staff should only give prescription medicine or undertake health care procedures after they have received appropriate training (updated to reflect individual healthcare plans at all times) from a healthcare professional. A first aid certificate is not sufficient.

Controlled Drugs

The supply, possession and administration of some medicines are controlled by the 'Misuse of Drugs Act' and its associated regulations. Some may be prescribed as medicine for use by students, e.g. methylphenidate.

A trained member of staff may administer a controlled drug to a student for whom it is prescribed. Staff should do so in accordance with the prescriber's instructions. Giving a controlled drug to any other child/person is an offence under the Misuse of Drugs Act.

A student who has been prescribed a controlled drug may have it in their possession. It is permissible for staff to look after a controlled drug, where it is agreed that it will be administered to the student for whom it has been prescribed.

Controlled drugs should be stored in a locked non-portable container if possible and only named staff should have access. A record should be kept for audit and safety purposes.

A controlled drug, as with all medicines, should be returned to the parent/carer when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).

"Medicines should only be taken to school or settings when essential, that is where it would be detrimental to a student's health if the medicine were not administered. Medicines should only be accepted if prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber."

We will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental/carers instructions. Note – staff taking medication overseas with students can still hold in their possession – adding in "Loco Parentis".

No student under 16 should be given medicines without their parent's/carer's written consent. A trained member of staff giving prescription medicines to a student should check:

- the student's name on the label
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container

If in doubt about any procedure staff should not administer the medicines but check with the parents/carers or a health professional before taking further action.

Staff must keep written records each time medicines are given (DHVT 8).

Refusing Medicines

If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents/carers should be informed. If a refusal to take medicines results in an emergency, the school or setting's emergency procedures should be followed.

Non-Prescription Medicines

A student under 16 should never be given aspirin-containing medicine unless prescribed by a doctor.

There are medicines available 'over the counter' at high street pharmacists, and are often referred to as 'Homely Remedies'.

Staff should never give a non-prescribed medicine to a student unless there is specific prior written permission from the parents/carers.

Staff should check that the medicine has been administered without adverse effect to the student in the past.

Where a non-prescribed medicine is administered to a student it should be recorded for audit and safety purposes.

Any request for medication should be assessed as appropriate to the condition and referral to a doctor should be considered. If a condition persists the student should be referred to a medical practitioner. Only trained staff may administer prescribed medicines.

Administering non-prescribed medicines.

Staff must not offer any medicines to students, this could be construed as prescribing, a role for which they are not qualified. Nothing can be given to a student under 16 without the parents/carers written permission. Every effort should be made to encourage the student to involve their parents/carers while respecting their right to confidentiality.

The nature of the student's condition should be ascertained, and the student must request the need for medicine. Possible questions could be:

What is the problem?

How long have you been affected by this?

Have you suffered with this before? Does it go away by itself?

How severe is the pain/complaint?

If the student has had the complaint before, ascertain what medication has been used previously.

What are you asking for to treat this condition?

Have you taken this before?

Have you had any adverse reaction to this?

A decision can then be taken to supply the requested medicine, to refuse, or to refer the student to medical practitioner. If in doubt seek medical advice.

Staff **must** keep written records each time medicines are given (DHVT 7).

Record Keeping

If a student is applying for a place on a school trip or visit and are taking a course of prescribed medication they will have to contact the school office for a form entitled "Record of medicine administered to an individual child" to record the administering of medicines whilst on the visit, this form should be completed and returned to the Visit Leader.

For prescribed drugs and non-prescribed medicines staff must use DHVT 8 which records all medicines provided to students on a school visit. This is available on the off-site activities section of the school network in the staff resources section.

Good records help demonstrate that staff have exercised a duty of care.

Attending a doctors surgery or Hospital A& E department.

If a student needs to be taken to hospital, staff should stay with the student until the parent/carer arrives, or accompany a student taken to hospital by ambulance. Staff should not take students to hospital in their own car (unless this has been approved by SLT and they have business insurance cover).

Remember to take with you the parental/carer consent form for the specific visit. This form includes parental/carer permission for medical treatment to be received by the student.

Keep all paperwork provided by the doctor's surgery or the hospital discharge procedure. If this paperwork is not offered then you must insist on some form of written discharge. Keep a written record of any discussions with medical staff, times and condition of the student, and any other relevant information.

Inform the parent/carer at your earliest convenience of the outcome of these actions.

In extremis, where a student will have to leave a visit due to illness or injury, the parent/carer and the school should be informed as soon as possible.

On return to school.

All forms and information with regard to first aid and medical care of students whilst on a visit or trip must be submitted to the school office for inclusion in the school records.

A further copy of this documentation must be included with the planning and preparation paperwork for the visit. This needs to be stored for six years, and should be presented to the school office for this to take place.

School SEN Information Report

The School SEND offer for Devonport High School for Girls

1. What does having a special educational need mean?

The Code of Practice (2014) states that:

A child or young person has SEND if they have a learning difficulty or disability which calls for special educational provision to be made for them. A child of compulsory school age or a young person has a learning difficulty or disability if they:

- have a significantly greater difficulty in learning than the majority of others of the same age;
- or
- have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

Where a child or young person has a disability or health condition which requires special educational provision to be made, they will be covered by the SEND definition.

2. Who is the person responsible for children and young people with SEND at DHSG?

The SENCo at DHSG is Miss Ricks who will monitor, co-ordinate and evaluate provision for these students. She can be contacted at jricks@dhsge.co.uk

The SENCo has day-to-day responsibility for the operation of the SEND policy and co-ordination of specific provision made to support individual students with SEND and medical conditions, including those who have EHC plans. They also provide professional guidance to colleagues and will work closely with staff, parents/carers and other agencies. In addition they will:

- engage with Collaborative Quality Assurance for SEND
- manage the day to day deployment of the Nurture Base Manager, Teaching Assistants and HLTA
- lead on planning for supporting students with medical conditions, meeting with parents/carers and health professionals to produce a Health Care Plan to disseminate to staff
- advise on the graduated approach to providing SEND support
- lead with EHCP: requesting assessments, coordinating meetings and meeting statutory deadlines
- produce, review and update the School Information SEND Report annually
- work with the Local Authority on the Local Offer
- ensure that all records of students with SEND are accurate and up to date
- produce Pen Portraits for all teachers of those with SEND to guide differentiation
- contribute to staff training on SEND
- take a specific lead role with students who have ASC, ADHD, eating disorders or literacy difficulties/dyslexia
- administration of access arrangements and screening for specific learning disabilities
- analyse progress data after every Progress Review to identify patterns and implement targeted support for staff and students where progress patterns dictate
- meet regularly with the Assistant Head Teacher for Inclusion and contribute to the smooth running of the Student Support Team

- advise on the deployment of resources to meet students' needs effectively
- liaise with parents/carers of students with SEND
- liaise with external bodies, agencies and specialists being a key point of contact
- be a key point of contact and support for transitions of students with SEND providing enhanced arrangements as required
- work with the Head Teacher and school Trustees to ensure that the school meets its responsibilities under the Equality Act (2010) with regard to reasonable adjustments and access arrangements
- liaise with the Designated Teacher for LAC/PLAC where students also have SEND
- be responsible for producing a SEND self evaluation and development plan

The Assistant Head Teacher for Inclusion: Mrs R Morgan

- responsible for the Student Support Team
- works closely with the SENCo as part of this team
- acts as a single point of referral for the team
- analyses whole school inclusion and progress data to monitor significant groups and vulnerable students
- uses this information to drive team decisions
- holds regular team meetings
- through team consultation, allocates referred students for appropriate support programmes
- liaises with the Head Teacher and Trustees concerning statutory responsibilities, resources and student outcomes

Head Teacher: Mr Lee Sargeant

Responsible for:

- the day to day management of all aspects of the school, this includes the support for students with SEND.
- ensuring that your child's needs are met, although they will give responsibility to the SENCo and class teachers to achieve this.
- making sure that the Trustees is kept up to date about any issues in the school relating to SEND.

SEN Trustee: Ms Roni Jay

- Ensuring that statutory provision is made for students with SEND at DHSG

3. At Devonport High School for Girls progress of all young people including those with SEND is the responsibility of:

The Subject Teacher: by providing excellent teaching and differentiation for all students, including those with SEND.

They will as part of this provision also:

- monitor the progress of your child, identifying, planning and delivering any additional help your child may need for them to achieve their full potential.
- ensure that the guidance given on the student's Pen Portrait is followed and that targets are worked towards.

- ensure that the school's SEND Policy is followed in their classroom.
- request advise and support from the SENCo where current intervention is not working.

4. How does the school identify that a student has a special educational need?

- The SENCo and the Head of House responsible for KS2/3 transition will liaise with all primary schools to ensure that information on students is shared effectively.
- At the start of year 7 or on entry, the school will undertake relevant assessments of all students to ascertain their ability/difficulties and a profile of their needs. This information will be used alongside data from primary schools to ensure that students who may need additional support are identified.
- The SENCo liaises with all staff and monitors the progress of students identified as not meeting their required levels of progress as identified in the schools current tracking system.
- Students with additional needs are also identified to the SENCo by staff if they feel there are concerns about a students learning.

5. Once needs are identified, a graduated response to supporting the student's need will be initiated.

- SEND support will take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the student's needs and of what supports the student in making good progress and securing good outcomes. This is known as the graduated approach and consists of a four part teacher led cycle of: Assess – Plan – Do – Review.
- All teachers of a student receiving SEND support will be made aware of the students plan. Where a student is receiving SEND support the parents/carers will meet with the school at least three times over the year, this will be supported by the SENCo.
- Where relevant the SENCo will enlist the services of specialist professionals such as Educational Psychologists and Advisory Teachers.
- Details of each student with SEND including the nature of their learning disability, recommended teaching strategies, strengths and history of provision will be available to all teaching staff via the Pen Portraits.
- Students with SEND all have a personalised Pen Portrait which highlights the student's areas of strength, needs and what intervention is necessary and how it is best delivered. All teaching staff will be made aware of this information and informed when any significant changes are made.

It is the responsibility of all staff to liaise with the SENCo should they have any concerns that a student may have unidentified SEND.

6. Who are the best people to talk to in this school if I think my child might have a special educational need.

At this school we operate a graduated approach to student need. The vast majority of concerns can be dealt with by the specific class teacher of Form Tutor who at DHSG is the first point of contact. If the concern persists the Form Tutor will signpost you to the most appropriate person or agency to support you. Within school this maybe the student's Head of House or the appropriate Head of Department, depending upon whether it is a pastoral or academic concern. If there are still concerns that needs are not being met or that progress is not being made, then any teacher can make a referral to the Student Support Team and seek guidance from the SENCo.

Specialist Individual support

This is usually provided via an Education, Health and Care Plan (EHCP). This means your child will have been identified by the SENCo as needing a particularly high level of individual or small group support.

This may mean that your child will also need support in school from a professional from outside the school. This may be from:

- Local Authority central services such as the Communication Interaction Team or Sensory Service (for students with a hearing or visual need)
- Outside agencies such as the Speech and Language Therapy Service.

For your child this would mean:

- the school (or you) can request that the Local Authority carry out a statutory assessment of your child's needs. This is a legal process which sets out the amount of support that will be provided for your child.
- after receiving the request to the Local Authority they will decide whether they think your child's needs (as described in the paperwork provided), seem complex enough to need a statutory assessment. If this is the case they will ask you and all professionals involved with your child to write a report outlining your child's needs. If they do not think your child needs this, they will ask the school to continue with SEND support at school level and also set up a meeting in school to ensure a plan is in place to ensure your child makes as much progress as possible.
- the EHC Plan will outline the number of hours of individual/small group support your child will receive from the LA and how the support should be used and what strategies must be put in place. It will also have long and short term goals for your child.

This type of support is available for students whose learning needs are:

- severe, complex and lifelong.

7. What training or specialist expertise do our staff have around SEND?

We place great value in the professional development of all staff. Our staff receive a comprehensive induction to working at the School and SEND training is part of this staff development.

The SENCo works closely with the Senior Leadership Team to ensure that a range of training opportunities are available to both teaching and support staff throughout the year. This training is adapted to ensure that it addresses the needs of current students. The school has ensured that staff are trained in providing support for students with Dyslexia and Autism, Visual Impairment, Hearing Impairment and the emotional well-being of students is regarded at all times. Trauma informed classroom practice.

8. What further external support may the school access to support students with SEND and their families?

Careers South West

Educational Psychologist

Communication and Interaction Team

Educational Welfare Officer

CAMHS

Occupational Therapy

Counsellor

Visually Impaired Advisory Service, Hearing Impaired Advisory Service,

Multi Agency Support Team (MAST)

In addition

Plymouth Information, Advice and Support for SEND, formerly The Plymouth Parent Partnership is an independent and impartial organisation who can support parents/carers with Statutory Assessments, preparing for and attending meetings and accompanying them on school visits. They are also able to support parents/carers to reach agreement when issues are faced at school. They can be contacted on 01752 258933.

Plymouth Early Help and SEND Advice

Further advice on a range of concerns can be sought via [Plymouth.gov.uk/Plymouth-early-help-and-send-advice-line](https://plymouth.gov.uk/Plymouth-early-help-and-send-advice-line). This is a bookable service to talk to a Family Support Worker.

9. How are parents/ carers and students with SEND supported to share their views and concerns and work alongside the school?

DHSG recognises the need for parents/carers to be fully aware of their child's progress and parents/carers are:

- invited in to meet with the SENCo three times a year to discuss the targets set for their child and any changes in circumstance.
- parents/carers are emailed or contacted by telephone on a regular basis and are encouraged to contact the SENCo if they have concerns.
- we have a variety of SEND Parent Forums which will allow parents/carers to meet and share concerns, information and support

10. Who is the person I should talk to if I have a concern about the support being provided for my child at the school?

- Regular communication between home/school is essential and central to your child's progress. This might be in the form of a phone call, letter, text, or email and we would encourage you to make contact at the earliest opportunity to discuss concerns.
- Your child's Form Tutor, Subject Teachers and Head of House are available to discuss progress, concerns, and share information about what is working well at home and school, so that similar strategies can be used.
- If you are not happy that concerns are being managed, please contact the SENCo direct (Ms Ricks) or the Assistant Head Teacher for Inclusion Mrs Morgan.
- Any formal complaints should be made through the Complaints Procedure as detailed on the school website.

11. Where can I find information about the Local Authority's Local Offer for children and young people with SEND and their families?

The Local Authority's Offer for children and young people with SEND and their families is accessible through this link <https://beta.plymouthonlinedirectory.com/>

12. How does the school support students with SEND and their families when they join or leave the school?

We recognise that transitions can be difficult for a young person with SEND and take steps to ensure that any transition is as smooth as possible. We will liaise with feeder and local schools to offer additional meetings, visits and preparation for students who find transition more difficult. We will enlist the support of external agencies, particularly Careers South West to aid future planning at transition into post 16 and post 18 options.

DHSG ACCESSIBILITY PLAN – 2021 - 2024

This Accessibility Plan is compliant with current legislation and requirements as specified in Schedule 10, relating to Disability, of the Equality Act 2010. School Trustees are accountable for ensuring the implementation, review and reporting on progress of the Accessibility Plan over a prescribed period.

This accessibility plan ensures that we continue to improve all aspects of the physical environment of the school site, the curriculum and written information so that all students with a disability can take full advantage of the education and associated opportunities provided by DHSG.

Definition (Equality Act 2010)

“A person has a disability if he or she has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities” Physical or mental impairment includes sensory impairments and also hidden impairments. In the DDA ‘substantial’ means ‘more than minor or trivial’. ‘Long-term’ means has lasted or is likely to last more than 12 months.

The definition is broad and includes children with a wide range of impairments, including learning disabilities, dyslexia, autism, speech and language impairments, Attention Deficit and Hyperactivity Disorder (ADHD), diabetes or epilepsy, where the effect of the impairment on the student’s ability to carry out normal day-to-day activities is adverse, substantial and long-term. All those with cancer or surviving cancer; HIV or Multiple Sclerosis are now included from the point of diagnosis.

A significant number of students are therefore included in the definition.

Normal day-to-day activity

The test of whether the impairment affects normal day-to-day activity is whether it affects one or more of the following:

- mobility;
- manual dexterity;
- physical co-ordination;
- continence;
- ability to lift, carry or otherwise move everyday objects;
- speech, hearing or eyesight;
- memory or ability to concentrate, learn or understand;
- perception of risk of physical danger.

The Accessibility Plan will be reported upon annually in respect of progress and outcomes, and provide a projected plan for the four-year period ahead of the next review date. This plan reflects new statutory requirements for the setting of Equality Objectives.

The Accessibility Plan is structured to complement and support the school’s Equality Objectives, and will similarly be published on the school website. We are committed to providing an environment that enables full curriculum access that values and includes all students, staff, parents/carers and visitors regardless of their education, physical, sensory, social, spiritual, emotional and cultural needs. We are committed to taking positive action in the spirit of the Equality Act 2010 with regard to disability and to reinforcing our culture of inclusion, support and awareness within the school. The DHSG Accessibility Plan shows how access is to be improved for students with disabilities, staff and visitors to the school in a given timeframe and anticipating the need to make reasonable adjustments to accommodate their needs where practicable.

The Accessibility Plan will contain relevant and timely actions to:

Increase access to the curriculum for students with a disability, ensuring that students with a disability are as equally prepared for life as are our students who do not have a disability; (If a school fails to do this they are in breach of duties under the Equalities Act 2010); this covers teaching and learning and the wider curriculum of the school such as participation in after-school clubs, leisure and cultural activities or school visits - it also covers the provision of specialist or auxiliary aids and equipment, which may assist these students in accessing the curriculum.

Curriculum – The Current Position

We believe that we have made good progress in the following areas:

- The development of resources for Autism
- Data is available for all staff
- Advanced planning for students based on good information from primary partners.
- Progression from Sixth Form to Higher Education and Russell Group Universities.
- Liaison with external services and regarding individual students (physical, sensory, behaviour)
- High quality Pen Portraits and Teaching and Learning profiles
- Providing tiered intervention
- Ensuring that school off site activities are accessible for all students
- Development of subject – centre tutor groups post 16
- Introducing PiXL Edge to reward and acknowledge extra-curricular and leadership achievements
- Improving access to technology
- Individualised careers advice
- Providing a relational approach to support within a trauma informed Classroom.

Priorities for 2021-2024

- Developing outstanding learning and teaching across the school by implementing Rosenshine's Principles and lesson phases that focus on retrieval, instruction, deliberate practice and consolidation.
- Further enhance careers education, information, advice and guidance with the introduction of UNIFROG
- Embed Mental Health provision in line with the City Wide Emotional Health and Wellbeing Initiative.
- Trauma informed classroom practice.
- Further develop the Extended Project with delivery moving into Year 9 to widen higher level skills and engagement (EP9)
- Implement strategies to ensure exemplary practice in the teaching of the three core strands OF Literacy: Vocabulary, Oracy and Writing.
- Implement the use of Dyslexia friendly font for all resources across all subjects.

Physical Access – The Current Position

- The building is wheelchair accessible with a lift to facilitate movement between the floors, and
- portable disabled ramps allowing access to building and classrooms.
- 2 Disabled Parking Spaces next to the disabled entrance to the main building
- Induction loops in reception and the Library
- All parents/carers are asked if they require access arrangements for Parents' Evening
- Accessible toilet facilities are available throughout the school.
- Space for small group and individual work for targeted learners in the Learning Support area.
- A physical environment that is safe and welcoming.
- A rest area for students.
- Projector and Sound system in Main Hall, Dining Hall and Gym.
- Fire Evacuation Chairs have been introduced on all staircases in the main building
- Lockers available for all students to store bags and equipment.
- Handrails on stairs
- Contrasting edges on stairs
- Clear visual signage
- All new buildings meet accessibility building regulations
- We have renewed the heating system across the school.
- We have installed a defibrillator and trained staff as required.
- Yellow edging and strips to highlight potential hazards.
- Keep left policy when moving around the site.

Priorities for 2021-2024

- To review the site annually using the Local Authority's accessibility framework.
- To address any areas for development arising from site inspections.
- To provide training for staff in relation to visual impairment and attachment Disorder (trauma).
- toilets and clear visual signage.
- Develop the catering provision further to cater for specialist diets.
- Update of ICT equipment to facilitate learning for the visually impaired.
- Install or renew contrasting edging and visual signage to support the visually impaired.

Written information -The Current Position

- Photo diaries are produced for identified students as part of induction.
- Information from Parents' Information Evenings is placed on the website.
- Signers are used for parents/carers when required
- Translators and interpreters are used in Parents' Evenings when required
- Private rooms are available for Parents' Evenings when required.
- The Accessibility Plan is on the website as is the SEN information report.

Priorities for 2021-2024

- Visual timetables are produced for identified students
- Further develop communications via our improved website and use of social media.
- Access to provision via specialist access equipment for students with severe visual impairments e.g. Braille facilities, signage, talking/text (pen readers) and other reading facilities.

Medical Health Care Pen Portrait 2021/2022

Name:	Advice from outside agencies	Areas of Need	Support currently provided in school including teacher differentiation
Form:			
Date:			
Review Date:			
EAL/FSM/LAC/YC/Service			
Description of Medical Condition	Symptoms/Triggers	Allergy Advice	

Special Educational Needs Pen Portrait 2021/2022

Name:	Advice from outside agencies	Areas of Need	Teacher Differentiation
Form:			
Date:			
Review Date:			
EAL/ / FSM/ LAC/YC/Service			
Agencies working with this student:	Support currently provided in school	Strengths	SMART Targets

Word processor use in Assessments and Examinations at DHSG

DHSG fully support the use of word processors in assessments and examinations in line with JCQ regulations and recommendations as follows:

5.8.1 Centres are allowed to provide a word processor with the spelling and grammar check facility/predictive text disabled (switched off) to a candidate where it is their normal way of working within the centre.

For example, the quality of language significantly improves as a result of using a word processor due to problems with planning and organisation when writing by hand. (This also extends to the use of electronic brailers and tablets.)

5.8.2 The use of word processors in non-examination assessment components will be considered standard practice unless prohibited by the specification.

5.8.3 It is permissible for a candidate using a word processor in an examination to type certain questions, i.e. those requiring extended writing, and handwrite shorter answers.

N.B. Examinations which have a significant amount of writing, as well as those that place a greater demand on the need to organise thought and plan extended answers, are those where candidates will frequently need to type. Examinations which require more simplistic answers are often easier to handwrite within the answer booklet. The candidate avoids the difficulty of visually tracking between the question paper and screen. The use of a word processor must reflect the candidate's normal way of working within the centre and be appropriate to the candidate's needs.

DHSG Word Processor Statement

Use of a word processor in examinations is a centre-delegated arrangement. This statement about the use of word processors has been prepared to be shared with stakeholders. Principally, a word processor cannot simply be granted to a candidate because he/she now **wants to** type rather than write in examinations or can work faster on a keyboard, or because he/she uses a laptop at home.

It is not a reasonable adjustment for a candidate to request use of a word processor because they can type faster than they can handwrite. The use of a word processor will be as a result of a **well-established SEN need/illegible handwriting which has been identified and evidenced over time.**

Students and their parents/Carers are at liberty to request permission to use their own word processor/laptop/i-pad in school at their own risk. This request will be considered by the SENCo and will be granted if it is agreed it will benefit the student. A school word processor agreement must be signed before this arrangement can begin and the device has to be PAT tested before it can be used in school. Personal devices brought into school are the responsibility of the student at all times and the school cannot be held liable for any loss or damage. **Permission to use a laptop/device in class should not be taken to imply permission to allow this arrangement in assessments/exams.** These decisions are taken at the start of the GCSE/A Level courses following testing and consultation with staff.

Permission to use a word processor in an exam may well be granted for a candidate with:

- a learning difficulty which has a substantial and long term adverse effect on their ability to write legibly;
- a medical condition;
- a physical disability;
- a sensory impairment;
- planning and organisational problems when writing by hand;
- poor handwriting.

This list is not exhaustive. Each case will be considered on its merits and a decision will be made by the SENCo.

Examples - Word processor

1. A candidate who cannot write legibly because she has significant learning difficulties asks to use a word processor in her examinations. **It is her normal means of producing written work within the centre** because her teachers cannot read her writing. She is very proficient in using a word processor. The SENCo allows her to use a word processor in her examinations.
2. A candidate does not have a learning difficulty but is a 'messy' writer. His handwriting is hard to decipher. He requests the use of a word processor. This is granted by the SENCo because **it reflects his normal way of working within the centre.**
3. A candidate wishes to use a word processor since this is her normal way of working within the centre. However, the candidate additionally wishes to use the spelling and grammar check facility. Given that she does not meet the published criteria for a scribe, the candidate cannot use the spelling and grammar check facility. The SENCo allows her to use a word processor in line with the regulations as set out in the JCQ 'ICE' booklet.
4. A candidate taking a GCSE Computer Science paper wishes to use a word processor with the spelling and grammar check facility enabled. However, the paper is testing his ability to proof-read a document. The SENCo refuses the use of the spelling and grammar check facility. He uses the word processor with the spelling and grammar check disabled (switched off).
5. A candidate who has significant learning difficulties has quite legible writing. However, he makes many omissions and cannot order his ideas correctly. His written scripts are legible but covered in crossings-out and omission marks. He requests a word processor and this is granted by the SENCo. The use of a word processor allows him to correct text, sequence his answers and **reflects his normal way of working within the centre.**
6. A blind candidate asks to use a word processor in his examinations. He also requests the use of a screen reader to allow him to 'read' back and check the answers he has typed. These arrangements are permitted when using a word processor in his examinations. **However, if the candidate also wants to use predictive text and/or the spelling and grammar check facility he must meet the published criteria for a scribe, with an approved application in place.**

Examples - Word processor and 25% extra time

1. A candidate has a below average free writing speed when handwriting and qualifies for 25% extra time. However, using a word processor is her **normal way of working within the centre.** When typing she can produce her written work effectively and at a speed equivalent to an average handwriting rate. She has no further learning difficulties. The SENCo awards the use of a word processor as it removes the barrier presented by her slow handwriting, and only awards 25% extra time when she writes by hand such as in GCSE Mathematics examinations.
2. A candidate with significant learning difficulties has a below average speed of handwriting and below average scores in areas of cognitive processing and reading speed. As using a word processor is his **normal way of working within the centre** he has been able to improve his typing speed to match the equivalent average handwriting rate. However, he has **persistent and significant difficulties** in interpreting questions and formulating his typed answers. He is given 25% extra time, as well as the use of a word processor, as both arrangements are appropriate to his needs.

Computer reader software and reader pens

A computer reader will be awarded on account of:

- cognition and learning needs;
- communication and interaction needs;
- a medical condition;
- sensory and physical needs;
- social, mental and emotional needs.

For students with a disability or a learning difficulty a computer reader may allow them to demonstrate their attainment effectively and independently and remove any barriers that may exist around reading proficiency and reading speed. However, a computer reader must be appropriate to the candidate's needs (spell checker disabled or enabled). It is a necessary requirement to ensure that sufficient time and training be provided to ensure the student is able to use a computer reader effectively both in lessons 'as a normal way of working' and within examinations and assessments.

As an examination centre DHSG are required to provide evidence that that use of a computer reader is the students' normal way of working.

Where a student will have access to a computer reader in lessons, staff will be made aware to ensure the student can access this support as effectively as possible. The use of computer reader software will be coordinated by the SENCo who will liaise with the Examination Officer to ensure that access to a computer reader in examination will be made available.

EXAM ARRANGEMENT REQUEST FORM

Pupil Name:

Form:

Exam No:

Reason for request:

Evidence of need (copy of external agency document) please list:

Is this the student's normal way
of working? Yes/No
As of: / /

Date of request: / /

Request accepted /declined

Date: / /

Signature of SENDCo:

Please note that all requests must be submitted before January 1st, along with paper work evidence. In cases submitted after this date except for in extreme circumstances or if testing has taken place after this date the request will not be considered.