

Core Standards for SEND for Swindon

Guidance Materials

Swindon Core Standards for SEND

3.4.1 Physical / Medical needs

Universal Provision

A child/young person with physical needs should have reasonable adjustments made through Universal Provision and Quality First Teaching which enable them to access the curriculum and participate fully. For instance, they should have access to:

- pencil grips or writing slopes if required to support their writing
- alternative methods of recording, including access to a laptop or tablet and easy-to-access software, if necessary
- support to cut up food and to open packets and containers if required
- access to training cutlery if they need this
- access to disabled access toileting facilities if necessary
- support to develop toilet training skills and personal care independence skills if needed
- one to one support for specific times e.g. for hand holding when walking longer distances or supervision for off-site visits
- a standard chair to avoid floor sitting in class or in assembly
- basic support to assist pupils with changing for PE lessons e.g. doing up shoe laces if needed
- support to help pupils to put on or remove simple therapy equipment e.g. lycra gloves or ankle / foot orthotics

The buildings and environment should be accessible for pupils with mobility needs.

- Lifts or ramps should be available
- There should be sufficient space in classrooms to accommodate a wheelchair or walking frame
- Accessible tables should be available
- Pupils should have access to a Personal Emergency Evacuation Plan (PEEP) if necessary

There should be flexibility in school uniforms, with regards to pupils with physical or medical needs being allowed to wear easy to manipulate clothing such as tracksuit bottoms, trainers, elastic or clip tie, zip up fleece rather than jumper if necessary.

All staff should be aware of any food allergies that pupils have and training around this should be provided to staff. All staff should be aware of any emergency or regulating medication that a pupil is prescribed and should understand how to administer these. Staff should be aware of the procedures for monitoring and managing conditions such as diabetes and epilepsy. Annual training should be provided for staff around supporting medical needs. A healthcare plan and accessibility plan should be made available to staff.

Identification of SEN

A pupil may have a Special Educational Need if their physical or medical needs impact on their access to the curriculum and/or cause a barrier to their learning and if the support required is additional to or different from that which would normally be expected for pupils of the same age. A child or young person would be identified as having a Special Educational Need under the area of Physical/ medical needs if they regularly require support in order to be able to:

- access the curriculum and engage with activities

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- record their ideas
- carry out self-care skills
- move safely and confidently around the site
- position themselves comfortably in a chair
- participate fully and safely in P.E and sports activities
- participate fully and safely at play times

SEN Support

A child at SEN Support level with physical/ medical needs should have access to:

- more specialist recording devices
- adapted ICT equipment if needed
- a referral to the Advisory Teacher for Assistive Technology (should be considered)
- simple adaptations to the P.E/ sports curriculum
- generalised therapy programmes that can be incorporated into the school curriculum, e.g. SPARKS
- specific therapy programmes/ exercises that are completed on a 1:1 basis and can be managed by school staff
- a referral to the Advisory Teacher for Physical Disabilities (should be considered)
- simple additional preparation of foods e.g. adding thickeners to liquids or foods
- low level adapted cooking equipment e.g. a self-holding chopping board, grip handle knives and multi-choppers if needed
- regular monitoring of a medical condition such as diabetes blood tests
- an allocated 1:1 for Personal Emergency Evacuation Plan (PEEP)
- 1:1 support to ensure safety when using mobility aid at specific times e.g. on playground
- staff supervision for transfer safety when moving between furniture, from floor to standing etc.
- 2:1 support for toileting involving intimate care support on an occasional basis
- staff training for intimate care from the school nurse
- adapted furniture such as non-postural specialist chair or an activate chair for the dining room (through the Advisory Teacher for Physical Disabilities)

High Needs

As a guide, a child or young person may be identified as having High Needs in the area of physical/ medical needs if they need access to:

- complex, specialist ICT support e.g. eye gaze equipment, specialist communication equipment
- staff trained in gastro-feeding
- staff to blend food and support with hand-over-hand feeding
- regular medical treatment e.g. providing medication via peg/ button equipment
- a specialist timetable and curriculum to allow for progress
- specific interventions targeted to needs either in a small group or on a 1:1 basis
- slings, hoists and changing plinths
- 2:1 staff on a regular basis for intimate care
- mobility support e.g. propelling wheelchair, moving class chair
- support to transfer between equipment on a 1:1 or 2:1 basis

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- complex therapy equipment e.g. walkers, postural support seating, standing frames
- staff with manual handling training
- adapted transport with ramp access, clamping access

Provision at High Needs

The provision that a child or young person with High Needs under the area of physical/medical needs requires will be outlined in their Education, Health and Care Plan (EHCP). Details of EHC assessment and plans are contained within the 'Guidelines for Considering and Initiating an EHC Needs Assessment 2020'.