

10. Social, Emotional and Mental Health (SEMH) Difficulties

Part 1 – Introduction and Overview

Children can have social, emotional and mental health difficulties at any stage in their development and these can be linked to a specific event in their lives (e.g. bereavement, trauma, illness, family stresses, being bullied). Some can be linked to longer term issues such as learning problems, difficulties with social skills, prolonged family disruption or medical conditions such as Autism Spectrum Condition (ASC) or Attention Deficit Hyperactivity Disorder (ADHD). The presenting problems, therefore, can vary in intensity, frequency and duration. They may range from changes in emotional resilience (such as withdrawal or anxiety about attending school/setting) to expressions of underlying stress (such as tearfulness, refusal to engage with learning, self-harming) or more overtly challenging behaviour (such as aggression, defiance, anti-social acts).

All children and young people should be educated in an environment which is attuned to their social and emotional needs and taught the skills which underpin wellbeing and engagement with learning. All people who work with and care for children will have an understanding that environmental and relationship issues can and do impact on social emotional and mental health.

The key areas are:

- An inclusive whole school/setting ethos which is communicated to parents and the wider community.
- A positive focus on attendance.
- A positive behaviour for learning policy which is differentiated to meet the needs of all pupils and dovetails with other policies e.g. anti-bullying.
- A classroom and playground environment which focuses on positive relationships and the development of social skills.
- The provision of planned opportunities for children and young people to learn social and emotional skills.
- The recognition that some children and young people may experience short term difficulties managing their emotions and behaviour.
- Strategies should be employed to ensure that the child or young person's voice is taken into account in planning and delivery.

The child or young person's strengths should be identified as well as areas of additional need. Observations, ongoing structured assessments and a plan-do-review approach will be important and adopting a solution-focussed approach which builds on the child or young person's strengths, will be beneficial.

Many children and young people will thrive in a nurturing and supportive school/setting environment but some will require more targeted or specialist support.

Part 2: Band Descriptors

Band 1 (Mild SEND)	<ul style="list-style-type: none"> • Child or young person will have been identified as presenting with some low level features of social, emotional and/or mental health difficulties and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and individualised interventions being in place. • They may sometimes appear isolated or have immature social skills. • Child or young person may have become socially and emotionally vulnerable, withdrawn, and unpredictable patterns of behaviour that impact on learning may be beginning to emerge. • They may be occasionally disruptive in the classroom setting, be overactive and lack concentration. • SEMH needs interfere with child or young person's social/learning development across a range of settings and child or young person does not follow routines in school/setting consistently. • They may show signs of stress and anxiety and/or difficulties managing emotions on occasions: this might relate to specific circumstances or times of the day. • Child or young person may have a preference for their own agenda and be reluctant to follow instructions. • Child or young person may have begun to experience short term behavioural or emotional crises.
Band 2 (Moderate SEND – Early Help)	<ul style="list-style-type: none"> • Difficulties identified at Band 1 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and Band 1 interventions being in place. • SEMH needs interfere more frequently with the child or young person's social/learning development across a range of settings and child or young person does not follow routines in school/setting without adult support. • The child or young person remains socially and emotionally vulnerable, withdrawn, isolated, and susceptible to unpredictable patterns of behaviour that impact on learning. • The child or young person's patterns of stress/anxiety occur with more frequency and duration. • The child or young person may have a preference for own agenda and may be reluctant to follow instructions. • Short-term behavioural crises have become more frequent and are more intense. • Child or young person may be at risk of fixed term exclusion and have more sustained difficulties in social interactions/relationships with both adults and peers and difficulties managing a range of emotions.

Band 3 (Severe SEND - EHCP)	<ul style="list-style-type: none"> • Child or young person presents with severe and persistent levels of social, emotional and/or mental health difficulties which are now more complex and which may necessitate a multi-agency response. • Child or young person is more likely to have experienced fixed term exclusion (s). • Significant and increasing difficulties with social interaction, social communication, social understanding or emotional regulation which regularly impact on classroom performance and may require adult support for a proportion of the school day. • Child or young person is increasingly isolated and struggles to maintain positive relationships with adults and/or peers. • Careful social and emotional differentiation of the curriculum is essential to ensure access to the curriculum and progress with learning.
Band 4 (More Severe SEND)	<ul style="list-style-type: none"> • The child or young person has significant and increasing social, emotional and/or mental health difficulties, often compounded by additional needs. • The child or young person experiences barriers to accessing the curriculum as a result of social, emotional and/or mental health issues, for example, acute anxiety or attachment issues. • There are patterns of regular school/setting absence. • The child or young person is disengaged from learning and shows significant under-performance. • They use verbal and physical aggression. • They are reliant on adult support to remain on task. • The child or young person engages in high risk taking activities both at school/setting and within the community. • They show difficulties expressing empathy, may seem emotionally detached, could have a tendency to hurt others, self or animals. • There are issues around identity and belonging. • The child or young person needs to be in control or uses bullying behaviours. • They may have difficulties sustaining relationships. • They may be over-friendly or withdrawn with strangers, at risk of exploitation. • The child or young person may be provocative, there may be evidence of sexualised language or behaviours. • They may be slow to develop age appropriate self-care skills due to immaturity or degree of learning difficulties. • The child or young person may have physical, sensory and medical needs that require medication and regular review.

Band 5 (Profound SEND)	<ul style="list-style-type: none"> • The child or young person shows continuing significant and increasing social, emotional, mental health and/or behavioural difficulties, often compounded by additional needs. • They use significant challenging behaviour requiring a range of interventions or referral to specialist support services. • The child or young person may be unable to manage themselves in groups without dedicated support. • They may be subject to neglect, basic needs may be unmet or they may experience hunger, illness, lack of sleep, acute anxiety, fear, isolation, bullying, harassment, controlling behaviours which impact on their learning. • The child or young person may be involved in substance misuse either as a user or exploited into distribution/selling. • They have poor attendance and/or may require high level of adult intervention to bring into school/setting, even with transport provided. • They may refuse to engage, may be extremely abusive towards staff and peers, disengaged or disruptive. • They may damage property. • The child or young person may require targeted teaching in order to access learning in dedicated space away from others. • They may pose a health and safety risk to self and others due to increased levels of agitation and presenting risks. • They may use sexualised language and behaviour, identified at risk of Child Sexual Exploitation (CSE). • There may be medical conditions, such as epilepsy, ADHD or Conduct Disorder that may require specialist support.
Band 6 (Exceptional SEND)	<ul style="list-style-type: none"> • The child or young person may experience continued long term and complex social, emotional and mental health difficulties, necessitating a continued multi-agency response and/or continuation of specialist provision. <p>Their needs are likely to include:</p> <ul style="list-style-type: none"> ○ Self-harming behaviour/self-injury. ○ Attempted suicide. ○ Persistent substance abuse. ○ Extreme sexualised language and behaviour; may be at risk of CSE. ○ Extreme violent/aggressive behaviour. ○ Serious mental health issues. ○ Long term non-attendance and disaffection. ○ Appearance in court for anti-social behaviour/criminal activity. ○ Putting self and others in danger. ○ Being frequently missing for long periods. ○ Extreme vulnerability.

	<ul style="list-style-type: none"> ○ May have medical conditions that are potentially life threatening and cannot be managed without dedicated support.
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Part 3 - Provision

Band 1 – Mild SEND

Descriptor	<ul style="list-style-type: none"> • Child or young person will have been identified as presenting with some low level features of social, emotional and/or mental health difficulties and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and individualised interventions being in place. • They may sometimes appear isolated or have immature social skills. • Child or young person may have become socially and emotionally vulnerable, withdrawn, and unpredictable patterns of behaviour that impact on learning may be beginning to emerge. • They may be occasionally disruptive in the classroom setting, be overactive and lack concentration. • SEMH needs interfere with child or young person's social/learning development across a range of settings and child or young person does not follow routines in school/setting consistently. • They may show signs of stress and anxiety and/or difficulties managing emotions on occasions: this might relate to specific circumstances or times of the day. • Child or young person may have a preference for their own agenda and be reluctant to follow instructions. • Child or young person may have begun to experience short term behavioural or emotional crises. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<ul style="list-style-type: none"> • Systems will be in place to ensure effective class and behaviour management strategies. • Systems will be in places which ensure effective consequences to positive and negative behaviours (rewards and sanctions). 	<ul style="list-style-type: none"> • Local Authority (LA) will advise schools/settings to access training on attachment, bereavement and loss, impact of trauma, transition and other key events likely to affect children and young people and provide this where possible.

	<ul style="list-style-type: none"> • There are effective links between pastoral support, personal and social education, SEND and the curriculum. • There will be accurate assessments of teaching and learning which includes emotional, social and developmental factors. • School/setting will consider autonomy and independence of children and young people. • School/setting will have a behaviour policy, with a range of strategies which are clearly communicated, monitored and consistently implemented. • Assessment will continue as part of normal school/setting and class procedures, while the SENCO may initiate more specific assessment and observations. • Records kept should include observations and assessments of context, structured and unstructured times, frequency, triggers, ABCs. • Behaviour plans/risk assessments may be in place for more difficult times of the school/setting day. • Individual Provision Map in place demonstrating that an increasing range of individual support is in place that is additional to and different from mainstream. • Progress should be measured by changes in emotional well-being, behaviour and learning following each review cycle and should be regularly shared with parents. • Learning styles should be re-visited with adjustments made to accommodate them. • A planned programme of support should be in place related to assessments, with child or young person involved in setting and monitoring their own targets. • Parents should be involved on a regular basis and encouraged to support targets at home. • There may be a Team around the Child/Family (TAC/F) established. 	<ul style="list-style-type: none"> • LA (Traded Services) will co-ordinate training where needed. • LA to signpost to appropriate information, resources and services. • Offer consultation with Educational Psychologists (EPs)/ Behaviour and Emotional Well-being Officers (BEWOs)/ Specialist Advisory Teachers (SATs)/ Virtual School Team/ Inclusion Officers as part of the Early Help Process. • The settings/school may request involvement from Health and Social Care. • LA will ensure that for Child Looked After - Personal Education Plans, (CLA PEPs) are written and monitored. Signposting to appropriate information, resources and service and update Local Offer. • LA staff will remind schools that behaviour is a form of communication and may be underpinned by SEMH issues. • Joint reviewing of evidence of the action already being taken by the setting/school to meet the perceived needs of the child or young person. • Guidance on identifying needs for the development of pupil profile/support plan. • Guidance on the use of Risk Assessments to plan for positive behaviour management.
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Teaching and Learning Environment	<ul style="list-style-type: none"> • Classrooms will be nurturing environments with attention paid to nurturing principles. • Classrooms will make available quiet areas for individual work or allow children and young people to calm/refocus. • Attention should be paid to learning styles/any learning adjustments that may be necessary. • Attention will be paid to emotional, social, mental health and wellbeing. • Child or young person will continue to be in a mainstream class with attention paid to organisation and pupil groupings as follows: <ul style="list-style-type: none"> ○ There should be opportunities for small group work based on identified need e.g. listening/thinking/social skills. ○ Use of time limited mainstream classroom programmes of support, which relates to assessments. ○ Offer small group work to teach appropriate behaviours and emotional regulation. ○ Use individual programmes based on specific need identified through assessments. 	<ul style="list-style-type: none"> • LA will remind schools/settings of the need to consider staff well-being. • LA will remind schools/settings of the need for whole school/setting approaches to inclusion, SEMH issues and SEN and provide support via training where possible (e.g. Lunchtime Matters for Midday Supervisors). • LA may help re seeking evidence based practice approaches and research into these. • Guidance on interpreting the evidence of the child or young person's academic attainment and rate of progress. • Advice on early support and appropriate strategies.
Human Resources and Staffing	<ul style="list-style-type: none"> • There will be a shared understanding of how social and emotional issues impact on behaviour. • Staff will liaise closely and use common approaches with parents/carers. • Staff will seek support and training on issues related to emotional, social development and behaviour. • School/setting will make reference to SEND Code of Practice and Local Offer. • School/setting should consider the use of The Index for Inclusion (Centre for Studies on Inclusive Education). • School/setting should refer to the Inclusion Development 	<ul style="list-style-type: none"> • Consultation advice from EP/BEWO.

	<p>Programme (Autism, Behavioural, emotional and social difficulties (BESD), Developmental Language Disorder (DLD), Dyslexia) DfE (archives).</p> <ul style="list-style-type: none"> • School/setting will cross reference their anti-bullying policies, behaviour policies, SEN policies, dissemination of consistent rules, how they improve resilience, means of accessing voices of children and young people (school councils, worry boxes etc.). • School/setting will consider the impact of health needs/medical conditions on well-being and inclusion. • Senior Leadership Team (SLT) will ensure staff well-being and provide regular opportunities to discuss issues of concern and individual children or young people. • School/setting should ensure they share information and support non-teaching staff including Midday Supervisors. SENCO should offer support/advice with assessment, observation and planning. • Appropriately skilled additional adults should be routinely used to support flexible groupings, observe child or young person, differentiate and offer some 1:1. • There should be close monitoring to identify “hotspots” through observation with results used in planning. • Offer support for times identified by risk assessments and implement strategies to manage these. • Ensure close liaison and common approach with parents/carers. • Consider the use of learning mentors. • Consider Planning for Positive Behaviour e.g. for observation templates. • Consider use of formal assessment tools such as Strengths and Difficulties Questionnaire (SDQ). • School/setting should refer to “Making Best Use of Teaching Assistants: Guidance Report” (Sharples, Webster and Blatchford). • School/setting staff should audit skills and training needs 	
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	<p>and use local forums to develop this.</p> <ul style="list-style-type: none"> • All relevant staff should be aware of Safeguarding procedures and needs of Children who are Looked After. 	
Curriculum and Teaching Methods	<ul style="list-style-type: none"> • Staff will model positive and respectful interactions between each other and between staff and pupils. • There will be appropriate differentiation of the curriculum and all supporting materials. • Staff will have awareness of the strengths and needs and learning styles of individual children and young people. • Staff will have high behavioural expectations within the classroom and playground, supported by teaching to meet these. • There will be planned teaching of personal social and emotional skills. In class, more targeted differentiation of the curriculum and supporting materials should enable full access. • Strategies developed should be formally shared with school/setting staff, parent/carers and be documented. • There should be increased differentiation of social, emotional and behavioural learning as well as the academic curriculum. • The level and pace of instructions should be modified. • There should be increased emphasis on identifying and teaching to preferred learning styles. • Ensure planned opportunities for child or young person to reinforce social and emotional skills. • Ensure use of specific group or 1:1 programmes around social, emotional difficulties and promoting positive mental health and resilience. • Prepare for any change and ensure clear routines so that children and young people feel safe. 	<ul style="list-style-type: none"> • Consultation advice from EP/BEWO.

Resources and Intervention Strategies	<ul style="list-style-type: none"> • School/setting will have an effective behaviour/inclusion policy that is regularly monitored and evaluated within the school/setting. • There will be a range of additional provisions in place in school/setting such as: school councils, peer counselling, buddy schemes, circle time, breakfast clubs, lunchtime/after school activities, break time havens, life skills teaching. • Strategies will be in place to encourage parental involvement in the life of school/setting. • Structured systems will be in place to support internal transitions between classes/activities, around school/setting. • Strategies will be in place to monitor attendance and punctuality which enhances communication between home and school/setting. • School/setting will have systems for observing, auditing and assessing a child or young person's behaviour, monitored by Senior Leadership Team (SLT). Further use of positive targeted strategies that include: <ul style="list-style-type: none"> ○ Further baseline assessments and support, Personal Social Development (PSD) targets. ○ Checks of hearing, vision, and other aspects of health. ○ Use of incident logs, ABC charts, observations in a range of settings with analyses and adjustments made according to findings, consideration should be given to the use of positive diaries, visual time tables. ○ Provision of parenting support/ family centre involvement. 	<ul style="list-style-type: none"> • Consultation advice from EP/BEWO.
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Band 2 – Moderate SEND – Early Help		
Descriptor	<ul style="list-style-type: none"> Difficulties identified at Band 1 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and Band 1 interventions being in place. SEMH needs interfere more frequently with the child or young person's social/learning development across a range of settings and child or young person does not follow routines in school/setting without adult support. The child or young person remains socially and emotionally vulnerable, withdrawn, isolated, and susceptible to unpredictable patterns of behaviour that impact on learning. The child or young person's patterns of stress/anxiety occur with more frequency and duration. The child or young person may have a preference for own agenda and may be reluctant to follow instructions. Short-term behavioural crises have become more frequent and are more intense. Child or young person may be at risk of fixed term exclusion and have more sustained difficulties in social interactions/relationships with both adults and peers and difficulties managing a range of emotions. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<p>As in Band 1 plus:</p> <p>School/setting Assessment</p> <ul style="list-style-type: none"> Initiate Early Help Assessment. Use more detailed and targeted observation and use of the LA's publication (Planning for Positive Behaviour) i.e. interval sampling, use and analysis of assessment tools (Boxall, SDQ) and assessment related to interventions. Behaviour plans/risk assessments should be in place for more difficult times of the school day. Assess progress in response to interventions – plan – do – review. Use pupil self-assessment, and wider assessments for 	<p>As in Band 1 plus:</p> <ul style="list-style-type: none"> LA staff will attend TAC/TAF meetings. LA to support schools to use the EH process to seek further advice and inform plan-do- review cycle.

	<p>learning/other SEN.</p> <ul style="list-style-type: none"> • Use more detailed recording, monitoring of frequency, intensity, ABC over a range of contexts. • Involve educational and other agencies e.g. Child and Adolescent Mental Health Service (CAMHS), Paediatrician, Family Support, Social Care. • Ensure an Individual Provision Map continues to be in place, demonstrating that an increased range of individual support additional to and different from mainstream is necessary to ensure full inclusion and progress with learning. • Planning should include individually focused plans/Provision Maps with clear targets and with appropriate steps taken to engage child or young person and parents. 	
Teaching and Learning Environment	<ul style="list-style-type: none"> • In addition to the provision at Band 1, identified regular support to teach social skills/emotional literacy in order to support behaviour/learning targets. • Offer regular, time limited programmes of small group work based on identified need. • Ensure ongoing opportunities for 1:1 support focused on specific individual targets. 	As in Band 1.
Human Resources and Staffing	<ul style="list-style-type: none"> • Offer a suitably qualified empathic adult, under the direction of teacher/SENCO. • There should be increased parental/carers involvement/multi-agency support to plan and regularly review individual plans. • Encourage and include in extracurricular activities. • Develop a multi-agency approach. 	As in Band 1.

Curriculum and Teaching Methods	<ul style="list-style-type: none"> • Modify level/pace/amount of teacher talk to child or young person's identified need. • Establish individual targets within group programmes and/or 1:1. • Ensure a nurturing approach within the classroom which takes account of difficulties in the understanding of social rules and expectations. • Emphasise increasing differentiation of activities and materials and take account of individual learning styles. • Offer short term individual support focusing on listening, concentration, and social skills. • Offer regular small group work with an increasing emphasis on relationships, emotions, social skills, conflict resolution. • Consider an alternative, differentiated curriculum that allows flexibility to teach according to emotional need rather than chronological age. • Provide opportunities for play, creative activities, drama/role play. 	<p>As in Band 1.</p>
Resources and Intervention Strategies	<ul style="list-style-type: none"> • Use materials from Planning for Positive Behaviour and the Behaviour Curriculum, including Situation Matters, Behaviour Curriculum Level Descriptions, ABC charts, Pupil Profile, Observation schedules. • Continue with Band 1 strategies and use of behaviour targets within classroom or playground. • Increase visual systems; prompt cards, behaviour plans, risk assessments, portable plans, and/or diaries. • Offer regular small group work on conflict resolution, social/emotional skills. • Offer short term individual support, using solution focused, motivational approaches. 	<p>As in Band 1.</p>

	<ul style="list-style-type: none"> • Use additional circle time activities/small circles of support. • Consider involvement from a wider range of services. • Consider establishing Nurture Groups. • Access National Institute for Health and Care Excellence (NICE) Guidelines and Targeted Mental Health in Schools (TaMHS) toolkit and projects such as Headstart. • Staff should seek training on appropriate issues such as bereavement and loss, self-harm and suicide prevention, children at risk of sexual exploitation, autism and ADHD, attachment. 	
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Band 3 – Severe SEND - EHCP

Descriptor	<ul style="list-style-type: none"> • Child or young person presents with severe and persistent levels of social, emotional and/or mental health difficulties which are now more complex and which may necessitate a multi-agency response. • Child or young person is more likely to have experienced fixed term exclusion (s). • Significant and increasing difficulties with social interaction, social communication, social understanding or emotional regulation which regularly impact on classroom performance and may require adult support for a proportion of the school day. • Child or young person is increasingly isolated and struggles to maintain positive relationships with adults and/or peers. • Careful social and emotional differentiation of the curriculum is essential to ensure access to the curriculum and progress with learning. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<p>As in Band 2 plus</p> <p>Assessment</p>	<p>As in Band 2 plus</p> <ul style="list-style-type: none"> • Request for EHCP assessment might be appropriate: LA

	<ul style="list-style-type: none"> • More systematic application of assessment tools to gain detailed evidence over time with reviews (e.g. Boxall Profile, using ABC observations to inform planning). • Initiate EHCP process. <p>Planning</p> <ul style="list-style-type: none"> • Behaviour and curriculum plans should closely track levels of achievement, and all IEP/IBP targets should be individualised and SMART. • Effective multi-agency working should be in place. • Use Positive Handling Plans where appropriate, providing careful details about safety, the trained staff who will be involved with the plan, the circumstances in which positive handling might be used, and how it will be recorded and communicated to parents or carers. • Ensure a functional analysis of presenting behaviours or issues. 	<p>to consider evidence.</p> <ul style="list-style-type: none"> • LA professionals will liaise with other professionals and signpost to relevant agencies. • LA may offer bespoke training for staff in social emotional issues e.g. ELSA (Emotionally Literate Support Assistants). • LA may offer bespoke packages such as “Good Together.” • Liaison with parents, SENCO and relevant school staff to identify next steps, support target setting and the development of an action plan to support the child or young person to make progress in school. • LA to try to ensure support for parents – e.g. directing to local support and training groups.
Teaching and Learning Environment	<p>As in Band 2 plus:</p> <ul style="list-style-type: none"> • The child or young person will be in a mainstream class but predominantly working on modified curriculum tasks with regular and consistent 1:1 support focused on specific SEMH/learning targets. • Ensure frequent opportunities for small group work based on identified need - small group work or nurture group provision (if in place and assessments indicate appropriateness). 	<p>As in Band 2 plus:</p> <ul style="list-style-type: none"> • EP/BEWO to provide advice relating to Teaching and Learning Environment. This could include detailed observation and/or individual assessment, as well as participation in monitoring and reviewing arrangements. • Possible amendments to child or young person’s plan. • Implement positive behaviour systems. • Support school to make further adaptations in relation to environmental factors. • Targeted intervention if considered appropriate. • LA professionals will ask about the emotional well-being of staff.

Human Resources and Staffing	<p>As in Band 2 plus:</p> <ul style="list-style-type: none"> • The child or young person should have daily access to staff in school/setting with experience of SEMH, e.g. behaviour support worker, lead behaviour professional, SENCO, behaviour/learning mentor, inclusion manager, Nurture Group staff. • Additional adults, under the direction of the teacher, should support the child or young person working on modified behaviour targets and curriculum tasks. • Increase the child or young person's access to a combination of targeted individual, small group and whole class activities. • Ensure regular supervision for staff including offering well-being support if necessary, possible use of Circle of Adults. • Consider sharing the teaching of a child or young person with high level of need so pressure is not on 1 person. • Ensure continued use of an individual Provision Map demonstrating provision at Band 1 - 3 to support a child or young person with long term needs that are likely to require further specialist assessment. Provision Map clearly evidences school is addressing the needs of the child or young person in line with current local funding arrangements. 	<p>As in Band 2 plus:</p> <ul style="list-style-type: none"> • The LA will provide agreed level of top up funding as specified in EHCP in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • LA to monitor the use of these funds.
Curriculum and Teaching Methods	<p>As in Band 2 plus</p> <ul style="list-style-type: none"> • Teaching should focus on both SEMH and academic curriculum outcomes throughout the school/setting day. • Personalise all approaches. • Tasks and presentation should be highly differentiated and personalised to needs. 	<p>As in Band 2</p> <ul style="list-style-type: none"> • As appropriate, EP/BEWO to provide advice on curriculum and teaching methods.

	<ul style="list-style-type: none"> • Offer 1:1 teaching for the introduction of new concepts and the specific teaching and reinforcement of classroom routines and expectations. • Set small steps targets within group programmes. • Support completion of work with 1:1 adult guidance. • Monitor targets with child or young person daily. 	
Resources and Intervention Strategies	<p>As in Band 2 plus</p> <ul style="list-style-type: none"> • Use the strategies in Bands 1 – 2 with an individualised focus. • Continue to review any resources and develop them to match the child or young person's needs. • Involve wider services such as Children's Social Care, CAMHS, Child Development Centre (CDC), Focus Families, Pupil Referral Unit (PRU), alternative provision. • Careful records should be kept of any restraints/ physical interventions and these should be monitored carefully. • School/setting should use a One Page Profile and refer to Person Centred Planning approaches. • Use solution focused approaches. • Use individual coaching strategies and techniques such as Motivational Interviewing, Circle of friends. • Consider Friends For Life. • Use of Cognitive Behaviour Therapy (CBT) principles to help with anxiety. • Use anger management programmes (e.g. Volcano in my Tummy/Starving the Gremlin work books). • Consider Mindfulness (group and individual approaches). • Use peer advocacy and peer mentoring. • Consider Restorative approaches. • Access Relax kids. 	<p>As in Band 2 plus</p> <ul style="list-style-type: none"> • The LA will provide an agreed level of top up funding as specified in the EHCP, in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • The LA will monitor the use of these funds. • As appropriate, EP/BEWO to provide advice on resources and intervention strategies.

Band 4 – More Severe SEND

Descriptor	<ul style="list-style-type: none"> • The child or young person has significant and increasing social, emotional and/or mental health difficulties, often compounded by additional needs. • The child or young person experiences barriers to accessing the curriculum as a result of social, emotional and/or mental health issues, for example, acute anxiety or attachment issues. • There are patterns of regular school/setting absence. • The child or young person is disengaged from learning and shows significant under-performance. • They use verbal and physical aggression. • They are reliant on adult support to remain on task. • The child or young person engages in high risk taking activities both at school/setting and within the community. • They show difficulties expressing empathy, may seem emotionally detached, could have a tendency to hurt others, self or animals. • There are issues around identity and belonging. • The child or young person needs to be in control or uses bullying behaviours. • They may have difficulties sustaining relationships. • They may be over-friendly or withdrawn with strangers, at risk of exploitation. • The child or young person may be provocative, there may be evidence of sexualised language or behaviours. • They may be slow to develop age appropriate self-care skills due to immaturity or degree of learning difficulties. • The child or young person may have physical, sensory and medical needs that require medication and regular review. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<p>As in Band 3 plus</p> <p>Assessment:</p> <ul style="list-style-type: none"> • Increased involvement of a range of specialist professionals. • Assessment in a short term specialist environment where 	<p>As in Band 3 plus</p> <ul style="list-style-type: none"> • LA professionals will be members of Inclusion Panels. • Advice from Inclusion Officers re exclusions and attendance.

	<p>appropriate.</p> <ul style="list-style-type: none"> • Multi-agency work continues e.g. liaison with CAMHS, Paediatric services. • Statutory assessment process (EHCP) has begun/is complete. <p>Planning</p> <ul style="list-style-type: none"> • There should be an Individual Education Plan (IEP), Pupil Support Plan (PSP), risk assessment or Provision Map detailing strategies and appropriate short term targets. • Hold planning meetings include parents/carers, any offsite providers and other multi-agency support. • Ensure Annual Reviews of EHCP and interim reviews as necessary to inform longer term planning. 	
Teaching and Learning Environment	<p>As in Band 3</p> <ul style="list-style-type: none"> • The child or young person will have access to individual support from an adult in the mainstream environment – with reference to delegated resources. • Provide opportunities for the child or young person to engage in specialist provision within the mainstream environment for part of the week. • Where appropriate school/setting might consider a managed move of school/setting alongside SEN and other agencies. 	<p>As in Band 3</p> <ul style="list-style-type: none"> • Where specialist provision is required, LA staff will engage with assessing the suitability of available settings, and with monitoring progress once the child or young person is placed in a setting.

Human Resources and Staffing	<p>As in Band 3</p> <ul style="list-style-type: none"> • Ensure daily access to staff with experience and training in meeting the needs of children and young people with SEMH. • Ensure access to individualised support. 	<ul style="list-style-type: none"> • The LA will provide agreed level of top up funding as specified in EHCP in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • The LA will monitor the use of this spending.
Curriculum and Teaching Methods	<p>As in Band 3</p> <ul style="list-style-type: none"> • The child or young person's curriculum is personalised and the child or young person may be dis-applied from some aspects of the National Curriculum. • Activities should focus on key skills and SEMH outcomes throughout the school/setting day. • Consider more lessons outside mainstream timetabling with increasing access to alternative specialist provisions. 	<p>As in Band 3</p>
Resources and Intervention Strategies	<p>As in Band 3</p> <ul style="list-style-type: none"> • Continue to review resources and develop them to match the child or young person's needs through: <ul style="list-style-type: none"> ○ Targeted intervention carefully employing a range of specialist strategies. ○ Individual SEMH programme incorporating 1:1 and small group teaching. ○ Specialist provision within mainstream for part of the week. ○ All additional resources and exceptional arrangements are referenced in a personalised Provision Map/IEP. 	<ul style="list-style-type: none"> • The LA will provide an agreed level of top up funding as specified in the EHCP, in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • The LA will monitor the use of this funding.

Band 5 – Profound SEND		
Descriptor	<ul style="list-style-type: none"> The child or young person shows continuing significant and increasing social, emotional, mental health and/or behavioural difficulties, often compounded by additional needs. They use significant challenging behaviour requiring a range of interventions or referral to specialist support services. The child or young person may be unable to manage themselves in groups without dedicated support. They may be subject to neglect, basic needs may be unmet or they may experience hunger, illness, lack of sleep, acute anxiety, fear, isolation, bullying, harassment, controlling behaviours which impact on their learning. The child or young person may be involved in substance misuse either as a user or exploited into distribution/selling. They have poor attendance and/or may require high level of adult intervention to bring into school/setting, even with transport provided. They may refuse to engage, may be extremely abusive towards staff and peers, disengaged or disruptive. They may damage property. The child or young person may require targeted teaching in order to access learning in dedicated space away from others. They may pose a health and safety risk to self and others due to increased levels of agitation and presenting risks. They may use sexualised language and behaviour, identified at risk of Child Sexual Exploitation (CSE). There may be medical conditions, such as epilepsy, ADHD or Conduct Disorder that may require specialist support. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<ul style="list-style-type: none"> EHCP reviews will be undertaken and interim reviews as necessary. <p>Assessment</p> <ul style="list-style-type: none"> Assessment will be an on-going process to determine progress in learning, development of social skills, empathy, managing own behaviour and emotions, staying safe in school/setting and in the community. There will be involvement from a range of specialist 	<p>As in Band 4</p> <ul style="list-style-type: none"> LA may be involved in decisions about possible specialist resourced provision (including assessment placements) and be involved in reviews of such placements. This might include PRU and Hospital and Home Tuition Service (HHTS).

	<p>professionals in place, such as CAMHS, EP, Youth Offending Team (YOT), therapeutic provision.</p> <ul style="list-style-type: none"> Multi-agency work continues, and continual assessment to feed in to the cycle of annual reviews. <p>Planning</p> <ul style="list-style-type: none"> Continue the use of IEP, PSP, Individual Behaviour Plan (IBP), risk assessment or Provision Map detailing strategies and appropriate short term targets. Ongoing risk assessments will describe procedures to keep safe the child or young person, other staff and pupils, and property. There will be an assessment of the risk of absconding and procedures described to manage such an eventuality. Planning meetings will include parents/carers, and are multi-agency. 	
Teaching and Learning Environment	<ul style="list-style-type: none"> The child or young person will be offered 1:1 support from an adult for some of the school/setting day. There will be a greater ratio of adults to pupils and staff will have specialisms in managing children and young people who present with SEMH issues and challenging behaviour. 	<ul style="list-style-type: none"> LA may be involved in decisions about possible specialist resourced provision (including assessment placements) and be involved in reviews of such placements. This might include PRU and Hospital and Home Tuition Service (HHTS).
Human Resources and Staffing	<ul style="list-style-type: none"> Provision is within a setting with appropriate staff/ student ratios. The child or young person will need continued daily access to staff with experience and training in meeting the needs of children and young people with SEMH. 	<ul style="list-style-type: none"> The LA will provide agreed level of top up funding as specified in EHCP in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. The LA will monitor the use of this funding. Additional teams will include any of the following: <ul style="list-style-type: none"> Drug and Alcohol Team, Youth Justice, Police. Paediatrician, Health Therapists, CAMHS, EP.

		<ul style="list-style-type: none"> ○ Social Care, Focus Families. ○ Inspira, Targeted Youth Worker. ○ Voluntary Sector Organisations e.g. SAFA, MIND, Child Bereavement UK,.
Curriculum and Teaching Methods	<ul style="list-style-type: none"> • The child or young person may require an alternative to mainstream curriculum. • They may need a differentiated behaviour management programme in addition to targeted support and reassurance in areas of learning the child or young person finds particularly demanding. • Offer structured social skills group work and/or intervention. • Ensure regular opportunities to consolidate learning/ promote confidence in the learning environment. • Adult support should implement structured social skills, group work and/or intervention and to support during less structured times. • Ensure access to an adult who can intervene to support the child or young person in recognising their emotions and managing their behaviour. • Offer additional support around times of transition and change. • Staff should have expertise in managing significant and consistent difficulties with emotions and behaviour. • Seek ongoing support and advice from outside agencies as appropriate. 	As in Band 4
Resources and Intervention Strategies	<ul style="list-style-type: none"> • These should be personalised to the specific needs of the child or young person. • Follow advice available from relevant specialist services. • The child or young person may need to be placed in a 	<ul style="list-style-type: none"> • The LA will provide agreed level of top up funding as specified in EHCP in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • The LA will monitor the use of this funding.

	<ul style="list-style-type: none"> specialist environment. Careful records should be kept of any restraints physical interventions and these should be monitored carefully. 	
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Band 6 – Exceptional SEND

Descriptor	<ul style="list-style-type: none"> The child or young person may experience continued long term and complex social, emotional and mental health difficulties, necessitating a continued multi agency response and/or continuation of specialist provision. <p>Their needs are likely to include:</p> <ul style="list-style-type: none"> Self-harming behaviour/self-injury. Attempted suicide. Persistent substance abuse. Extreme anxiety impacting on child or young person's access to school or the community. Extreme sexualised language and behaviour; may be at risk of CSE. Extreme violent/aggressive behaviour. Serious mental health issues. Long term non-attendance and disaffection. Appearance in court for anti-social behaviour/criminal activity. Putting self and others in danger. Being frequently missing for long periods. Extreme vulnerability. 	
	Setting/Governing Body	Local Authority
Assessment and Planning	<ul style="list-style-type: none"> Statutory assessment process (EHCP) has been established and the child or young person has been assessed as needing enhanced specialist provision or resources or more secure specialist setting. 	<p>As in Band 5</p> <ul style="list-style-type: none"> LA will signpost to voluntary organisations such as Samaritans and National Society for the Prevention of

	<p>Assessment</p> <ul style="list-style-type: none"> • Assessment will be an on-going process to determine progress in learning, and also: <ul style="list-style-type: none"> ○ Development of social skills, empathy, managing own behaviour and emotions, staying safe in school/setting and in the community. ○ There will be involvement from a range of specialist professionals in place, such as CAMHS, EP, YOT, therapeutic provision, social care colleagues. ○ Multi-agency work continues, and continual assessment to feed in to the cycle of annual reviews. ○ Parents/carers and child and young person will be involved throughout. ○ There may be a need for a Risk Assessment and associated strategies. <p>Planning</p> <ul style="list-style-type: none"> • Use of ongoing IEP, PSP, IBP, risk assessment or Provision Map detailing strategies and appropriate short term targets: the focus of this will be collaborative and multi-agency. • Risk assessment will describe procedures to keep safe the child or young person, other staff and pupils, and property. There will be an assessment of the risk of absconding and procedures described to manage such an eventuality. • Planning meetings will include parents/carers, and will be multi-agency. 	<p>Cruelty to Children (NSPCC), Barnardo's and those named above (Band 5) and/or Alternative Curriculum Providers.</p> <ul style="list-style-type: none"> • The LA will liaise with all relevant parties involved to agree an appropriate placement and provision.
Teaching and	<ul style="list-style-type: none"> • The child or young person may be on roll at a specialist 	As in Band 5

Learning Environment	<p>provision/school.</p> <ul style="list-style-type: none"> • The child or young person has 1:1 support from an identified key adult for some of the school/setting day. • There will be a greater ratio of adults to pupils and staff should have training and specialisms in managing children and young people who present with challenging behaviour. • Careful attention should be paid to groupings and nurture-based settings. 	
Human Resources and Staffing	<ul style="list-style-type: none"> • Provision may be within a specialist environment with appropriate staff/student ratios (e.g. dual registered with PRU/HHTS). • The child or young person should have continued daily access to staff with experience and training in meeting the needs of children and young people with SEMH. 	<ul style="list-style-type: none"> • Additional teams may include any of the following: <ul style="list-style-type: none"> ○ Education Social Worker, Drug and Alcohol Team, Police. ○ Health, YOT, CAMHS, Educational Psychologist. ○ Social Care, Community Support Worker, Family Intervention. ○ Focus Families, School Nurse. ○ Inspira/careers advice. ○ Youth Service, Voluntary Sector Organisations. ○ Consider Family Social and Emotional Aspects of Learning (SEAL) or Triple P programme. • Specialist intervention from those professionals named in Band 5 above.
Curriculum and Teaching Methods	<ul style="list-style-type: none"> • The child or young person should have access to personalised interventions to help them regulate and reflect upon their emotions to develop resilience and reduce the severity of behaviour. • Adults should focus on the young person achieving functional life and social skills. • School/setting should ensure highly structured 	As in Band 5

	<p>opportunities to consolidate learning and promote confidence in the learning environment.</p> <ul style="list-style-type: none"> • Offer consistent adult support to ensure the delivery of a personalised approach which ensures all necessary reasonable adjustments are identified and implemented. • Staff should have expertise in managing significant and consistent difficulties with behaviour. • Risk assessments should be used to minimise opportunities for severe incidents to occur. • Regular multi-agency reviews should be held as appropriate. • School/setting should consider having a policy/protocol re self-harm and suicide prevention and make information on these topics available to children and young people in appropriate formats. • Ensure extra-curricular activities such as outdoor programmes. • Consider an Alternative Curriculum from private providers. 	
Resources and Intervention Strategies	<ul style="list-style-type: none"> • These should be personalised to the specific needs of the child or young person. • Adults should seek advice from relevant specialist services. • Careful records should be kept of any restraints/physical interventions and these should be monitored carefully. • Seek access to therapeutic input such as CBT. 	<ul style="list-style-type: none"> • The LA will provide an agreed level of top up funding as specified in the EHCP, in addition to delegated resources. All of this will be spent on meeting the needs of the child or young person. • The LA will monitor the use of this funding.

