

SEN Funding



Allocation of top-up funding (element 3) for children and young people with SEN - Operational Guidance 2022 Contents:

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1.0 Introduction

The Local Authority (LA) and partners have a legal duty to regularly review the special educational needs (SEN) provision available in the local area. This includes:

- Sufficiency planning of the number of places, the age and type of special educational needs and disability (SEND) they support;
- Commissioning arrangements for the availability of support services for SEND; and
- The way high needs top-up funding is allocated to individual children and young people with a high level of SEN and/or disability.

In 2021, the High Needs Working Group commissioned a review of the way top-up funding for children and young people with SEN is allocated. This commission was triggered by a range of indicators reflecting the current practice, including: a wide variety of methodologies used to calculate top-up funding, different decision-making processes across the SEN system and national benchmarking data suggesting that high top-up values are applied across South Gloucestershire.

A Working Group was established to carry out this review. The group included representatives from South Gloucestershire Parents Carer Forum, Early Years' service, primary and secondary schools, resource bases, special schools, FE colleges, LA officers and education support services (Integra). The work of the group was facilitated by two independent SEN consultants.

At the initial stage, the Working Group focused on understanding local data benchmarked against the national and regional trends. Examples of good practice and models from across the country and the most recent research was also looked at in detail. The model outlined in this document was tested and consulted on through a variety of fora, including the High Needs Working Group and Schools' Forum. Educational and health practitioners contributed to the development of the banding descriptors across all four types of SEND.

1.1 Key principles

In developing a fair and transparent model of allocation of top-up funding, the LA and partners agreed the following set of principles. These principles will guide all decision-making processes.

Compliance – a system that is fully aligned to the requirements of the national legislation and financial regulations.

Universal, whole system approach – a system which captures the needs of all children and young people, relates to all age groups and all types of local provision, which means that it is transferable between key stages and different types of schools across South Gloucestershire.

Clarity and transparency – a system that is accessible to all partners and clearly describes local financial arrangements and decision-making processes.

Fair and consistent application – it is an evidence-based approach informed by individually assessed type and severity of special educational need of individual children and young people.

Sustainability – a system which promotes robust financial governance, including budget monitoring, reporting, and planning.

The new approach and guidance were formally agreed in March 2022. Arrangements covering the allocation of top-up funding will require regular oversight and review.

2.0 Whole system approach to SEN

The vast majority of children and young people with SEND are successfully supported by resources available at the educational setting they attend. Accurate identification of need is a key element of good quality practice, which will inform strategies used by early years practitioners, teachers and tutors.

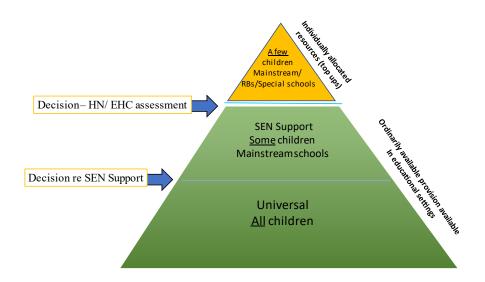


Figure 1 illustrates the cumulative nature of support for pupils with SEND

2.1 Universal and SEN Support

Early Years providers, schools and FE colleges have skills, knowledge and experience in identifying, planning and delivering differentiated support. Educational settings also have access to additional expertise provided by a range of support services. For example, SENCOs and headteachers can seek additional advice from Local, National and Specialist Leaders in Education (LLE, NLEs and SLEs), our

own special schools, resource bases (including access centres), Pathways Learning Centre (PLC), the Early Years team, Integra, Educational Psychologists, CAMHS, therapy services, paediatricians, nurses, early help services, social care and others.

Access to such services is available to all children and educational settings and is not dependent on any allocation of additional financial support provided via an Education, Health and Care plan (EHCP).

Once the SEND is identified it is very important that special educational provision is made. The provision should be evidence based, focused on the identified need and its impact should be monitored over time.

This additional support is known as SEN Support. The school will deliver this via a Graduated Approach which includes four stages: Assess – Plan – Do – Review. Section 2 of the <u>The South Glos Way Inclusion Toolkit</u> | <u>Safeguarding South Gloucestershire Safeguarding</u> provides an evidence-based practical document, which gives advice and guidance to help educational settings to continue to build inclusive, enabling environments that ensure all children and young people with SEND, including some of our most vulnerable learners can thrive.

The intention of the South Glos Way Inclusion Toolkit, is to provide clarity and consistency when deciding the level and type of support a child or young person with SEND may need. The guidance supports leaders and professionals in identifying need from first concerns through to identification at SEN Support.

In addition, South Gloucestershire schools collaborate by working together in geographical clusters. The clusters work on how to expand and share their knowledge and expertise, how best to identify SEND to better meet the needs of children and young people and how to grow inclusive practice. Additional funding has been provided to support the school clusters to commission support and share expertise across their locality.

A full range of national and local financial arrangements to provide ordinarily available provision in educational settings are set out in Appendix 1.

2.2 Children and young people with Education, Health and Care plans.

The vast majority of children and young people will have their needs met by the educational setting without the need for an Education Health Care needs assessment (EHCna). The EHCna is normally required for children and young people with the most complex and long term SEN. South Gloucestershire's EHCP Decision Making Guidance document, EHCP-Decision-making-guidance-2021_pdf (southglos.gov.uk) provides more information about the EHCna process.

At the end of the EHCna process the LA must decide if it is necessary to issue an EHCP. Most children and young people who have an EHCP are likely to receive additional, individually allocated top-up funding (element 3). In most cases, the financial High Needs threshold in South Gloucestershire is aligned with the EHCP guidance, but it is possible for some EHCPs to be agreed without additional element 3 top-up funding.

3.0 High Needs Block

The high needs funding is provided to LAs through the High Needs Block of the Dedicated Schools Grant (DSG). LAs must spend that funding in line with the conditions of the grant and the School and Early Years Finance Regulations. Nationally, it is accepted that the cost associated with meeting the needs of children with a similar level of need may vary. There is no national guidance on what represents 'reasonable' cost or good value for money, therefore it is important for local partners to develop local guidance in respect of allocation of top-up funding.

The High Needs Block provides resources to pay for inclusion support services, specialist places and top-up funding. Decisions about spend in one area has a knock-on effect on resources available in other two areas. Partners in local areas should work together to ensure that there is a strategic agreement on the appropriate balance between spend on service, places and top-ups.

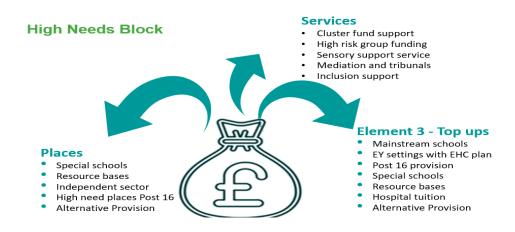


Figure 2 shows the totality of the High Needs Funding Block

3.1 Services

The High Needs Block can fund SEN and inclusion support services that seek to work with educational settings to help them support and include children and young people with additional needs and/or SEN.

3.2 Places

The High Needs Block funds places in special schools, resources bases, post 16 settings and alternative provision. The amount of funding for high needs places is set nationally. In some cases, the LA will use the High Needs Block to commission places in the independent and non-maintained sector.

3.3 Top-ups (element 3)

The High Needs Block is used to provide additional resource, over and above an educational setting's 'core funding' (elements 1 and 2, delegated budget or place funding), hence being called 'top-up funding'. The full set of national funding arrangements, explaining all sources of funding, is set out in Appendix 1.

4.0 Allocation of the Top-up funding (element 3)

Although LAs as the accountable bodies for the High Needs Block, have the ultimate decision-making responsibility for making decisions about individual top-up funding allocations, it is good practice for the LAs and educational settings to work together and agree an approach to organising top-up funding.

Educational institutions should be transparent about their costs and be prepared to explain how the overall finances are implemented. This will not only ensure the continuing financial viability of the individual educational setting but also the whole of the Dedicated Schools Grant (DSG) budget, in particular the High Needs Block. The efficient use of available resources should be monitored regularly, in partnership with the LA and educational settings. Educational settings may need to adapt their approaches to making special educational provision both efficient and effective.

The DfE High Needs Operational Guidance explains that having a framework (e.g. bandings) that indicates levels of top-up funding that can be allocated in line with severity of need can be an efficient, fair and transparent way for LAs and educational settings to organise decisions about SEN top-up funding DfE external document template (publishing.service.gov.uk).

4.1 Universal nature of the banding framework

To ensure an effective, fair, consistent and transparent approach to allocation of top-up funding, the Working Group developed a universal banding framework which will inform the allocation of SEN top-up funding across all settings and phases of education in South Gloucestershire.

This approach is also likely to create more certainty for educational settings on the level of funding they can expect to receive and allows them to be responsive to change in terms of the numbers and levels of need across their setting.

The banding descriptors are need led and are set out in accordance with the four types of need specified in the SEND Code of Practice:

			Band A
			SEN Support
Early years	Universal Support	SEN Support	Band B
	Зиррогс		SEN support or EHCP

				nd C	THE D			
			SEI	N Support or I	ЕНСР			
				Early Years Transition Support Funding allocated for <u>some</u> children on Band B or C <u>without</u> EHCPs to further clarify needs and monitor progress during reception year.				
Mainstream schools and colleges	Universal Support	SEN Support		Band 2	Band 3	Band 4	Band 5	Band 6
	Band 0	Band 1						
Resource bases (including access centres) and special schools	Place funding	3						

Table 1 illustrates a summary of the universal nature of the banding framework and the relationship between early years and school/college age bandings. Areas shaded in grey represent EY Inclusion Support Funding or top-up funding (element 3) allocated to individual children and young people, in addition to generally available resources at the universal and SEN Support levels.

4.1.1 Early Years

In South Gloucestershire, young children have access to Early Years Inclusion Support Funding (EYISF) and, when they transfer to Reception year, Early Years Transition Support Funding (EYTSF). This funding enables Early Years providers (nursery, pre-school, childminder etc.) to ensure inclusive practice is in place and extra support is available for children with SEND so that they make progress and achieve better outcomes.

In the early years of a child's development, the needs change and evolve, often more quickly than in older children. Some children may benefit from additional support whilst in their preschool setting and during transition to school. As a result, many younger children are likely to make rapid progress and consequently will not require additional support in the long term.

The banding framework sets out specific descriptors applicable to early years settings (Bands A, B, and C see Appendix 2). These descriptors combine a whole spectrum of need from mild, moderate to the most severe and they apply to children with and without EHCPs. The detail of the process related to the allocation of Early Years Inclusion Support and/or Transition Funding can be found <a href="https://example.com/here/bases/base

4.1.2 Mainstream schools, resource bases, special schools and post 16 institutions.

Progress of all children and young people is monitored by the educational settings they attend. Graduated approach (Assess-Plan-Do–Review) is used to review progress of children and young people at the SEN Support level and the statutory annual review process for children and young people with EHCPs.

Support for children and young people with SEN is funded through the resources delegated to individual educational settings (element 1 and 2) and, if necessary, top-up funding (element 3) allocated through the process of individual assessment of need.

The banding descriptors set out in Appendix 3 have been designed to align the full range of special educational needs from mild/moderate to the most complex and severe. The banding descriptors are structured according to the four SEND categories outlined in the Code of Practice:

- Cognition and Learning.
- Communication and Interaction (with specific references to language and social communication);
- Social, Emotional and Mental Health.
- **Sensory needs** (which covers hearing, visual and physical needs).

Each band is defined by the descriptors of severity of need:

- Bands 0 describe a range of needs that would ordinarily be expected to be met through
 Quality First Teaching, differentiation and reasonable adjustments using resources available
 to educational settings (funding element 1).
- Band 1 describe a range of special educational needs that would ordinarily be expected to be met through internal interventions and/or involvement of externals support services.
 Nationally and locally, the vast majority of children identified as having SEN are represented at this level of support (funding elements 1 and 2).
- Bands 2 to 6 describe a higher level of severity of special educational needs likely to require a statutory plan and/or additional top-up funding (funding elements 1, 2 and 3).

Please note:

- I. The banding model is based on the description of needs, it does not specify provision.
- II. Bands are allocated according to the evidence which clarifies severity and complexity of needs.
- III. The principle of 'best fit' is applied to identify the appropriate banding.

4.2 How to use the banding framework?

Decisions about the allocation of bands are to be based on the written evidence of individual child/young person's assessment of needs. The evidence will be drawn from a cross section of professionals from education, health and care services so that the type and severity of need can be established. Each case is to be considered individually.

Band descriptors are set out in Appendix 2 and 3. They are not listed in a specific order and are not hierarchical. A set of descriptors in a particular band work as a 'pen picture' of the severity of need, which should be matched with the available written evidence. This process is often referred to as a 'best fit' model.

Banding allocation may change over time. As a result of the EHCP annual review process, there could be new evidence showing sustained progress resulting in outcomes being fully or partially met. There might be evidence of new assessments, which highlight a change in the severity or complexity of need. In such cases band allocation will be reconsidered.

The following evidence will be used to allocate bands:

- <u>For new assessments</u> all reports and advice gathered during the statutory EHCna process listed in Part K of the EHCP.
- <u>For any subsequent changes</u> the annual review report, school contribution and other contributing reports will be used to determine any changes in the band allocation.

The following steps should be taken when considering individual band allocations:

- Each banding level includes several descriptors of need and together, they work as a "pen picture' of a specific level of need.
- All descriptors are linked to severity of need and should be read from left (band 0 describing the lowest level of need), to the right (band 6 describing the highest level of need).
- The banding descriptors have been written to apply across all age groups. Evidence of severity of need should be considered in the context of the age of the child or young person.
- Words such as 'anxiety' or 'self-help' appear in most bands. They need to be considered in the
 context of the whole paragraph/band, as this will help to match the evidence of severity to a
 band. Many children and young people with social communication difficulties may also have
 SEMH needs (and vice versa). It is important to consider band descriptors in all SEN groups.
- The needs of a child or young person do not need to meet all of the individual descriptors, instead "best fit" approach should be used in other words, when allocating a band, we are seeking to find the banding level where, overall, the descriptors best match the evidence. It is unlikely that a specific band will be agreed because there is some supporting evidence of one particular descriptor.
- Professional judgment will have to be used to interpret the evidence so that an appropriate band is allocated.
- When using professional judgment to allocate a band, it is helpful to check the accuracy by reading descriptors in the band before and after the one that has been selected (e.g. if band 2 is selected double check against band 1 and 3).

Please note:

- I. The same banding descriptors are used for children in mainstream and specialist settings; this means that regardless of school type a child or young person with the same level of need will be allocated the same band (schools should not assume that a child who is allocated a place in a specialist should automatically be assessed at a higher band).
- II. Due to differences in the funding arrangements in early years, schools and colleges, the top-up values of funding allocated for each band may vary between different types of educational settings.

The banding framework has been designed so that both severity of need in one area of SEN or complexity of need across more areas of SEN categories can be captured to reflect the holistic view of the child or young person's needs.

Severity of need in a single area of SEN

For example, child A may be allocated band 6 because there is evidence matching the descriptors specified in band 6 for visual impairment but the child does not have significant needs in other SEN categories.

Category	Band 0	Band 1	Band 2	Band 3	Band 4	Band 5	Band 6
Cognition &Learning							
Communication & Interaction							
Social Emotional Mental Health							
Visual impairment							Final allocated band
Hearing impairment							
Physical Disability							

Table 2 illustrates child A with low levels of need in SEMH (band 1) and little or no needs identified in C&L, C&I, SEMH, HI and PD so able to be supported at universal and SEN Support levels for these needs. However, this child has severe and complex needs in VI and therefore band 6 VI is allocated as the child's needs are best fit for the descriptors in band 6.

Complexity of need across a range of SEN types

For example, child B may be allocated band 3 because there is evidence matching descriptors of severe SEMH difficulties, moderate learning and communication and interaction needs alongside some physical needs.

Category	Band 0	Band 1	Band 2	Band 3	Band 4	Band 5	Band 6
Cognition &Learning							

Communication & Interaction				
Social Emotional Mental Health		Final allocated band		
Visual impairment				
Hearing impairment				
Physical Disability				

Table 3 outlines child B with complexity of needs: no levels of need in VI and HI, low levels in PD but some levels of need in C&L and C&I (band 2) and a higher level of need in SEMH (band 3). The most significant need is within SEMH and therefore band 3 is allocated.

4.3 Decision making

4.3.1 Children in Early Years settings

In Early Years the vast majority of decisions are made by the EYISF Inclusion Panel which considers requests for allocation of Early Years Inclusion Support Funding (EYISF) and Early Years Transition Support Funding (EYTSF). Details of the EY application and decision-making process is set out in a separate document here.

Some children in Early Years may have EHCPs; decisions related to the statutory process including band allocation are taken by SEN panels and is overseen by the EHCP Team.

4.3.2 Children and young people attending schools and FE colleges.

Decisions about the initial allocation of bands or subsequent changes will be taken on the evidence provided through the EHCna process or annual reviews of EHCPs.

Each case is considered individually. Banding allocation is decided when the first EHCP is issued and subsequently as a result of information, and evidence provided through the annual review process.

Although the LA has the ultimate responsibility for making decisions related to the statutory processes, the decisions are moderated by members of the relevant panels and the annual moderation arrangements which are set out in the table below. These decisions are part of the process of discharging the LA's statutory duties, under the SEND legislation, ensuring efficient use of public funds. Members of the panels and peer moderation arrangements include representatives from educational settings, support services, health, social care and senior LA officers.

Decision type	Scheme of delegation	Decision-making arrangements
Initial band allocation for new EHCPs (including CYP moving into S Gloucestershire)	Weekly EHC Resource Allocation Panel at the time when plan is agreed.	Panel members moderate decisions made by the Chair. Education, Clinical Commissioning Group (CCG) and social care sign off new EHCPs and agree resource implications.
Request to change band allocation for existing EHCPs.	Annual peer to peer moderation meeting organised in the autumn.	Annual peer to peer moderation, for detail refer to Appendix 4.
Disagreement on band allocation	Termly Exceptional Request Panel or annual peer moderation meeting (whichever is earliest).	Cases should be referred to the earliest exceptional panel or moderation meeting. For detail refer to Appendix 5.
Request for exceptional allocation of top-up funding	Termly Exceptional Request Panel (6 x year).	The exceptional panel is chaired by the Strategic Lead for Inclusion and SEND. At least two headteachers must be present. Referrals to this panel must be closely monitored, scrutinised and outcomes reported to the HNWG and Schools Forum.

4.4 Exceptional allocation of top-up Funding

In very exceptional circumstances, the LA will consider an allocation of exceptional top-up funding outside of the banding framework. Exceptional allocation of top-up funding aims to address extraordinary circumstances, which cannot be accommodated through the banding framework. It is anticipated that this will be a very small number of requests,

When considering the requests for exceptional funding, the Exceptional Request Panel will meet to consider two questions.

- Are the child's or young person's needs "exceptional" in the sense that they cannot be matched to needs in the banding framework?
 - Ordinarily this will not equate to having a high level of complex needs, since most the needs of young people with very complex needs will be reflected in the highest bands in the banding framework. Instead, the Exceptional Request Panel will decide if a request merits "exceptional" funding as a result of extreme circumstances which cannot be accommodated within the banding framework.
- What should be the level and duration of the exceptional top-up funding?
 As exceptional circumstances should, by definition, be exceptional and generally relate to time-specific circumstances in a child's or young person's life, exceptional top-up funding will be allocated on a time-specific basis. An initial agreement to exceptional top-up funding will be agreed for a period of six months. At that point, either the exceptional funding can come to an end (as the circumstances that gave rise to it have been overcome), and the child or young person can be allocated a standard band; or the exceptional funding can be extended for a further six months (if the circumstances persist). The exceptional top-up funding should not

become long-term bespoke top-up outside the banding system and therefore, the expectation is that exceptional top-up funding in most cases should not last more than one academic year.

The value of exceptional top-up funding will be determined on a case-by-case basis by the Exceptional Request Panel.

The Exceptional Request Panel should not be confused with the Multi Agency Recourse Panel (MARP) – the latter considers cases requiring funding contributions from two or more agencies across education, health and care.

4.5 Oversight and reporting arrangements

There will be regular reporting on the use of top-up funding to key leadership and partnership for a concerned with the SEND system in South Gloucestershire, including:

- Schools Forum (and any sub-groups concerned with SEN and high needs funding);
- SEND and LA senior leadership team meetings; and
- Phase association and network meetings

The list of groups above is not exhaustive, and reports on top-up funding may be provided to other groups and fora as required.

The reports on SEN top-up funding should include:

- <u>an overview of the use of SEN top-up funding</u> the profile of banding levels overall, by phase and type of setting, benchmarked internally and against past trends;
- <u>an overview of the consistency of decision-making about SEN top-up funding</u> patterns of decision-making and the profile of top-up bands awarded by panel and the moderation; and
- <u>numbers and trends of disputes and requests for exceptional funding</u> requests to review banding awarded, and requests for exceptional funding and outcomes of those requests (by setting type, benchmarked internally and against past trends).

As a result of the annual reporting arrangements, the operational elements of the guidance should be reviewed in the consultation with Schools Forum and approved by the relevant Chief Officer.

Section 4

SEN Funding



Appendix 1 – National and local funding arrangements in educational settings (2021/22)

	Element 1	Element 2	Local additional	Pupil Premium	Other funding	Element 3 – TOP UP	
Early years	Represents funding per child, which Early Years settings receive whether a child has SEN or not. No funding for under 2-year-olds. 2 years old - £5.31 per hour up to 15 hours per week for 38 weeks 3 and 4 years old - £4.12 per hour (childminders extra £0.14 per hour). All children are entitled to 15 hours per week and some children are entitled for 30 hours for 38 weeks a year.	Represents additional funding for 3- and 4-year-olds based on a deprivation supplement (the provision for 2 year olds is funded using a single base rate with no supplements). Deprivation Supplement (mandatory) – is paid, paid to settings 3 x a year based on the EYPP numbers they have. The deprivation budget is calculated as a percentage of the estimated funding available. For 2021-22, it is 0.9%, giving a total of £133,500	funding	(national) The Early Years Pupil Premium (EYPP) fund is for three and four-year olds who are taking up their free hourly entitlement and who meet the criteria set by government including looked after and those who left care.	streams (national) Disability Access Funding (DAF) – it provides £615 per year for every eligible child to support their access to the free entitlement. This fund will be for three and four-year olds who are taking up their free entitlement and are in receipt of Disability Living Allowance (DLA).	Inclusion Funding top up Inclusion budget is calculated as a percentage of the estimated funding available. For 2021-22 it is 2% giving a total of £296,670. This is additional funding for individual children age 3 and 4 with SEN, who are on roll at a setting within South Gloucestershire and claiming Nursery Education Grant (NEG) from South Gloucestershire. This funding is not based on the home LA of a child. Top Up funding is paid to a setting(s) where the child is on roll. If the child moves to another setting or out of area any un-used funding is returned to the LA. Funding is approved via a panel at the following levels based on 6 months: Level1 (1-15 hours) £1,000 (16-30 hours) £1,800 Level 2 (1-15) £2,000 (16-30 hours) £3,600 Enhanced EY ratio: £900 or £1,400 Training and resources £650.	High Needs Top Up - this is additional funding for individual children with EHCPs. This funding comes from the commissioning home LA. Top Up funding is paid to a setting(s) where the child is on roll and transfers with the child when moving to a different setting.
Mainstream Primary and Secondary schools 2021/22	Age Weighted Pupil Unit (AWPU) – this is basic per pupil funding, which schools receive for every child. It has been determined nationally that the element 1 funding amounts to £4k but the exact amount is different for different age groups and key stages. The weighting is primary 1.0, KS3 is 1.40614 and KS4 is 1.59659. In 2021/22, AWPU primary is £3,039.15 KS3 is £4,285.75 KS4 is £4,829.74. Lump sum paid to every mainstream school, in 2021/22 the rate is £114,637.07. Sparsity funding is based on the distances a pupil has to travel to the next similar school as the crow flies for 2021/22. Deprivation funding covering 8 different criteria areas: FSM/FSM6/IDACI Bands A-G (Income Deprivation Affecting Children Index) English as Additional Language (EAL) Primary £535.23 and £1445.13 Secondary Minimum Pupil Funding Guarantee ensures every school receives a minimum amount of funding for every pupil. For 21/22, Primary £4180, KS3 £5215, KS4 £5715 (This includes from the 1stApril 21 the TPG & TPENG).	Notional SEN budget. This is an amount of money, calculated on a locally determined formula, received by each school annually. It has been determined nationally that the element 2 funding amounts to up to £6K per child identified as having SEN. It funds SEN support provision and pays for the first £6K of additional provision for children/young people in receipt of Top Up funding. The notional SEN budget in South Gloucestershire formula is calculated as: 4.% of the basic per pupil funding factor (AWPU) 8.65% of deprivation factor (FSM's) 100% of the low-cost high incidence (prior attainment) factor, and	High Needs Targeted Support Funding was introduced to support mainstream schools that have a greater than average expected number of pupils on roll who receive high needs Top Up funding, in respect of an EHCP. This does not include pupils in resource bases. In South Gloucestershire, Schools with a high incidence of high needs pupils may attract additional funding. The school will receive additional funding if the level of pupils with EHCPs is in excess of 2.8% of the school population (excluding resource bases, early years and post 16). The threshold is currently set at 2.8% and at £6,000 per notional pupil. The % is based on the national average and for 2022/23 this will increase to 3.7%	Pupil Premium Schools get £1,345 for every primary age pupil, or £955 for every secondary age pupil, who claims free school meals, or who has claimed free school meals in the last 6 years. Looked after premium £2,345 is received for every pupil looked after or a pupil who has left local authority care through adoption, a special guardianship order or child arrangements order. Service premium Schools get £310 for every pupil with a parent who is serving in HM Forces or has retired on a pension from the Ministry of Defence.	Sports Premium Schools with pupils aged 5 to 10 receive a £16K lump sum and £10 per pupil to be used to fund additional improvements to the provision of PE and sports Universal Infant Free School Meals Pupils aged 4 to 6 are entitled to a free school meal, current rate paid to schools is £444.60 per pupil per year. Covid Catch Up Premium Grant awarded to support schools to catch up for lost time after school closures. Mainstream is £80 per pupil. Currently available for 20/21 academic year. Future funding tbc.	Training and resources £650. Top Up funding, which is agreed for individual children/yo provision required to meet their needs, costs more than £ comes from the commissioning home LA and is determine assessed needs (EHC needs assessment). Top Up fundir where the child is on roll and transfers with the child/youn moving to a different school.	ung people when the 10K. This funding ed on the basis of ng is paid to a school
Resource bases 2021/22	Age Weighted Pupil Unit (AWPU) – this is basic per pupil funding, which schools receive for every child, regardless of whether they have SEN. It has been determined nationally that the element 1 funding amounts to £4K but the exact amount is different for different age groups and key stages. From 1st April an additional £660 has been awarded per place for TPG & TPENG. The weighting is primary 1.0, KS3 is 1.40614 and KS4 is 1.59659. In 21/22, AWPU primary is £3,039.15, KS3 is £4,285.75 and KS4 is £4,829.74.	Pre 16 places occupied by pupils recorded on the autumn School Census are funded at £6,000. Other places (spare capacity) are funded at £10,000. The number of planned places is agreed annually. Pupil places in RBs also attract funding through the mainstream school formula.		As above	As above	Top Up funding, which is agreed for individual children/yor funding comes from the commissioning home LA and is d basis of assessed needs (EHC needs assessment). Top to a school where the child is on roll and transfers with the ci when moving to a different school.	etermined on the Jp funding is paid to

	Element 1	Element 2	Local additional	Pupil Premium	Other funding	Element 3 – TOP UP
	Lightent	LIGHTGHT Z	funding	(national)	streams (national)	Licinolity - For Or
/22	The number of planned places is agreed ann	school places are funded at £10,000 per place. nber of planned places is agreed annually. ^t April an additional £660 has been awarded per place for TPG & TPENG		Pupil Premium Schools get £1,345 for every primary age pupil, or £995 for every secondary age pupil, or who has claimed free school meals in the last 6 years.	Sports Premium Pupils aged 5 to 10 receive a £16K lump sum and £10 per pupil to be used to fund additional improvements to the provision of PE and sports.	Top Up funding which is agreed for individual children/young people. This funding comes from the commissioning home LA and is determined on the basis of assessed needs (EHC needs assessment). Top Up funding is paid to a school where the child is on roll and transfers with the child/young person when moving to a different school.
Special schools 2021/22				Looked after premium £2,345 is received for every looked after pupil or a pupil who has left local authority care through adoption, a special guardianship order or child arrangements order. Service premium Schools get £310 for every pupil with a parent who is serving in HM Forces or has retired on a pension	Universal Infant Free School Meals pupils aged 4 to 6 are entitled to a free school meal current rate paid to schools £444.60 per pupil. Covid Catch Up Premium grant awarded to support schools to catch up for lost time after school closures. Special Schools £240 per pupil, available for 20/21 academic year (future	
FE colleges 2021/22	This is an amount per student attending post 16 institutions calculated using the national funding 16 -19 system applied to an individuals agreed study prog and paid for directly by the ESFA. The Core programme funding is calculated using the following funding factors. - Funding Rate per student dependent on student hours / banding Disadvantage funding, - Retention factor and Programme Cost Weighting where a course cost more to deliver. (Based on national formula) Level 3 English and Maths support (£375 - 1 year programme) Large Programme Funding (ranges from £838 up to £1,676 per qualifying learner). Additional Programme elements Advanced Maths Premium £600 per student, High values Courses Premium £400 per eligible student and T Level Industry placement	£6K allocation is paid for all students identified as having high needs. This is funded by the High Needs Block but paid directly by the ESFA.		from the Ministry of Defence.	Access to Work (AtW) grant cover additional support, such as the job coach element of a supported internship or traineeship. ESFA funding for learners aged 19 and above: -Learning support -Exceptional learning support -Learner support -Apprenticeship funding	Top Up funding is agreed for individual students when the provision required to meet their needs costs more than the total of #element 1 and 2. This funding comes from the commissioning home LA and is determined on the basis of the assessed need (EHC needs assessment). Top Up funding is paid to a post 16 institutions where the student is on roll and transfers with the student when moving to a different post 16 institutions.

Key

Early year Block Schools Block (EFSA for FE) High Needs Block Other Sources of Income

Source; The School and Early Years Finance (England) Regulations 2021 (legislation.gov.uk) and local financial arrangement, information provided by S Glos finance team (2021)

Appendix 2 – Banding descriptors for children in Early Years settings:

		onal needs met within resources	Examples of special educational needs like	f funding (inclusion funding or high needs)	
	available in EY settings Universal offer	SEN Support	Band A	Band B	Band C
Play, cognition and Learning	Cognitive abilities within broad average levels and development within EYFS average or close to average.	Child presents with some learning delay, shows some difficulties with conceptual understanding, in one or more areas of the EYFS and attainments are more than 1 year below average.	Moderate learning difficulties with conceptual understanding and reasoning across the EYFS. Difficulties learning basic concepts and retaining them over time despite targeted support. Limited and/or repetitive play skills, persisting in spite of targeted support. Significant difficulties with imaginative play. If standardised assessments of cognitive ability have been completed and results indicate low range, or the child presents with a very uneven profile of cognitive abilities.	Severe learning difficulties, showing significant delay in reasoning skills and experiencing learning difficulties across all areas of the EYFS. Severely limited and restricted play skills, these persisting in spite of targeted support. Severe difficulties learning basic concepts and retaining them over time despite targeted support. Function at less than half their chronological age (50% delay) in several aspects of the three prime areas, which results in having a significant impact on accessing the EYFS. Personal, Social and Emotional Development Communication and Language Physical Development If standardised assessments of cognitive ability have been completed and results indicate extremely low range.	Profound learning difficulties and global delay, affecting self-help and independence skills. Functions at a level that requires specialised interventions and adaptations to the EYFS. Despite targeted support there has been very little or no progress over time. Functions at 75% delay in several aspects of the three prime areas, which results in having a significant impact on accessing the EYFS. Personal, Social and Emotional Development Communication and Language Physical Development
Communication (Language)	May demonstrate limited understanding of nonverbal cues. Immature speech sounds. Requires help with key words. Requires repetition from an adult. May demonstrate limited understanding of non-verbal cues If the child has English as additional language, they require accessible information and support is required.	Child has difficulty following or understanding instructions and everyday language without visual references. Adults have difficulty understanding speech without it being in context Child has poor oral muscle control. Child has poor enunciation/clarity of speech	Moderate delay in expressive and/ or receptive language requiring regular SALT input. Child has reduced vocabulary both receptively and expressively impacting on learning and retention of new words Loss of previously demonstrated communication skills Child only speaks or communicates a few words to a secure adult in an altered voice, such as a whisper or when withdrawn from the main group.	Severe language and/or speech sound disorder/ limited functional vocabulary and sentence structure. Not able to follow simple instructions without context. Uses mix of speech and augmented communication systems. Child known to be able to speak to family members outside of the setting but only communicates through gestures and is unable to speak to adults and/or peers in the setting. Child may avoid communication or use extremely limited non-verbal communication.	Profound delay in receptive and/ or expressive language. Very limited understanding of what is said or signed. Child communicates by gesture, eye pointing or symbols. Sustained loss of communication skills previously demonstrated. Unable to speak or communicate in the setting which hasn't improved over the last 3 months and is having a significant impact on their ability to access learning environment.
Communication (social)	Difficulty being understood by adults outside the family. Some withdrawal from the company of others. Some immaturity in socialisation, for example, child may look towards adults rather than peers.	Lack of awareness of social space and related social difficulties. Difficulties recognising and communicating emotions. Difficulties forming and maintaining friendships with peers. Have difficulties managing change and transitions.	Show signs of distress when faced with new people, places, events or when unsure what is going to happen. Difficulty expressing feelings or needs. Limited ability to understand impact of their actions on others. Has difficulties understanding social and physical risks. Child is becoming increasingly isolated with peers. Limited initiation of social interaction but can take part in some play if taught/supported but cannot develop this independently. Experience difficulties/ unusual responses to sensory experiences (can be easily distracted, upset by noise/touch/light, could lead to behaviours that challenge the norm).	Severe difficulties with understanding of social boundaries leading to social isolation and withdrawal from social and group learning activities. Persistent and significant difficulties forming relationships. Difficulties expressing emotions which may lead to behaviours that challenge, increased anxiety and episodes of heightened emotions. Significant sensory difficulties. Shows signs of distress over even small changes in the environment. Rigid, repetitive, or obsessional behaviours; these can lead to severe anxiety, frustration and behaviours that challenges.	Persistent social isolation within the group and withdrawal from social and group learning activities, which are severely impacting on learning. Overwhelmed by sensory demands of the environment, leading to significant distress and behaviours that challenge. Unable to tolerate social interaction other than to get needs met. No understanding of social boundaries. Persistent repetitive play and restricted interests, which are resistant to adult intervention. Persistently anxious or frustrated, leading to frequent and unpredictable behaviours that puts at risk the health and safety of self and others.
Social, Emotional and Mental Health (SEMH)	Short term difficulties settling into setting. Occasional emotional distress or anxiety, which subsides with peer/adult support. Some difficulties to concentrate on adult directed activities. Sits for shorter lengths of time compared to peers. Occasional and short term unwanted behavioural difficulties resulting in adult intervention. Exhibits some behaviours designed to gain attention.	Difficulties settling into setting. Seeking comfort from familiar adults and/or with self-soothing. Some attachment seeking or avoiding behaviours, likely to be reliant on relationships with key person. Flits between activities, short attention span. Does not accept routine boundaries, regularly tests or challenges. Cannot inhibit own actions to stop from doing something they shouldn't do.	Regular, daily difficulties in sharing, turn taking and social interaction. Frequent (daily) withdrawal from activities and an unwillingness to engage. Unusual behaviours or changes in behaviour. Frequent increase in anxiety level, struggles to emotionally regulate responses which may cause behaviours that challenge adults and peers. Significant attachment difficulties that are affecting development e.g., relationships to key carers not securely established or regularly preventing participation.	Daily persistent, unpredictable extremes of demanding behaviour. Unable to process and follow adult direction for example following instructions, transitions, can be demand avoidant. Frequent (daily) high anxiety levels and totally withdrawn. Unable to communicate their emotional needs and use physical communication most of the time. Severe attachment difficulties affecting development and relationships with adults and peers preventing participation in vast majority of activities.	Involved in incidents where intense emotional distress and/or impulsive behaviour can put themselves or others at risk. Regular (daily) intensive episodes of behaviour (biting, spitting, kicking etc.) which are unpredictable, persistent, and extreme. Unable to engage with learning throughout the day.

	[F		F	h. A	formalism Construction for the
	Examples of special education available in EY settings	onal needs met within resources	<u>Examples of special educational needs like</u>	ely to require additional individual allocation o	t tunding (inclusion funding or high needs)
	Universal offer	SEN Support	Band A	Band B	Band C
Sensory (vision)	Vision within normal range, including when corrected by glasses 6/6 – 6/12.	Mild vision impairment. Distance visual acuity 6/12-6/18 (LogMAR0.3-0.48). May also have mild Near Vision impairment Print of size N14-18 approximately point size 14-18 – this could also be their optimum print size and not just their threshold when considering crowding of text, reading speed or processing May have other difficulties, e.g., reduced visual field, nystagmus, colour vision difficulties but is able to use effective strategies in most cases May require patching however this would be when the non-patched eye would have severe reduced visual acuity and the associated aspects in this banding CYP Is independently mobile in familiar areas May have difficulties with spatial awareness May require an assessment/programme of work from a habilitation specialist and this maybe around times of transition	Moderate vision impairment. Distance: visual acuity 6/19-6/36 (LogMAR0.5-0.78). May have moderate Near Vision impairment Print of size N18-24. Curriculum access not possible without significant mediation and/or adaptations of curriculum materials requiring training to produce resources and additional support May have other difficulties, e.g., reduced visual field, nystagmus, colour vision difficulties but is not able to independently use effective strategies. May have a fluctuating or deteriorating condition so that at times the CYP presents or functions having or needing any of the above May require an assessment/programme of work from a habilitation specialist including self-help skills	Severe vision impairment. Distance: visual acuity 6/36-6/120 (LogMAR0.8-1.3) May also have severe Near Vision impairment Print of size N24-36. May be registered sight impaired Able to access curriculum and buildings only with substantial adaptations of all_learning materials and staff requiring training to produce resources and additional support. May have separately or with above other difficulties, e.g., reduced visual field, nystagmus, colour vision difficulties May require regular support from a habilitation specialist and self-help skills.	Profound vision impairment. Distance: visual acuity less than 6/120 (LogMAR 1.32) May also have profound Near Vision impairment educationally blind/Braille user can access small quantities of print larger than N36 – this could also be their optimum print size and not just their threshold when considering crowding of text, reading speed or processing May be registered severely sight impaired Able to access curriculum and buildings only with significant adaptations of all_learning materials requirement for some use of tactile means of communication to be able to access. Staff requiring training to produce resources and additional support required likely in all situations May have other difficulties, e.g., reduced visual field, nystagmus, colour vision difficulties Will require regular and on-support from a habilitation specialist and self-help skills.
Sensory (hearing)	Child may miss-hear and misunderstand oral information, which requires monitoring. Child may have some immaturities of speech but is understood by adults.	Moderate hearing loss requiring adult support to monitor adjustments. Might be a Hearing aid user.	Moderate hearing loss and wears aid(s) with ongoing input from the Sensory Support Service. Unilateral hearing loss with recurrent conductive loss in good ear.	Severe hearing loss that has a significant impact on development. Severe multisensory impairment with significant impact on development.	Profound hearing loss that has a severe impact on development. Profound multisensory impairment with severe impact on development.
MSI			Mild VI together with Mild HI banding	Moderate VI or HI with other impairment the same or lower banding.	Severe VI or HI with other impairment at the same or lower banding level
Sensory (Physical)	No concerns about physical development and general health. Child attempts all physical activities within normal day.	Poor fine and/or gross motor skills. May have needs relating to undertaking practical tasks, reducing the level of independence. Likely to have difficulties adapting to new/specific environments. May have a physical/medical condition requires a care plan/medication. Child may tire more quickly than other children. Condition may require monitoring e.g., diabetes, epilepsy.	Physical and/or medical difficulties that require varied and extensive adjustment to environment and resources. Able to use mobility aid with some competence to overcome physical difficulties, e.g., walking frame or power chair. Moderate physical and/or medical difficulties that require close monitoring to ensure safety. Physical independence is impaired and requires input and programmes from relevant professionals.	Physical and/or medical difficulties that require specialist equipment, adapted resources and position changes requiring a high level of daily adult support. High levels of self-care needs. Child needs daily adult support with health care regimes.	Has limited ability to contribute to self-care therefore is highly reliant on adult support for adapted resources, moving, position changing, personal care including drinking eating etc. Profound long-term physical or medical progressive/regressive condition(s) which require continues monitoring and support throughout the day and includes complex medical interventions.

Appendix 3 - Banding descriptors for mainstream primary and secondary schools, resource bases (including access centres), special schools, and FE

	Example of special educational needs met by resources ordinarily available in mainstream schools and colleges link			<u>Examples</u> of	special educational needs likely	y to require additional high ned	ed individual funding allocatio	on (element 3)
	0 Universal offer	1 SEN Support		2 High Needs	3 High Needs	4 High Needs	5 High Needs	6 High Needs
		оди опррои			Cognition and Learning	1.1.3110020	gcodo	
Cognition and Learning	targeted intervention. May have weak phonological	Difficulties may include a spectrum of severity need including: -difficulties across some or all areas of the curriculum but making some progress - much greater difficulty than peers in acquiring basic literacy and numeracy skills and in understanding concepts - Moderate Learning Difficulties in the low range on standardised assessments of cognitive ability. May have uneven profile of cognitive abilitiesdifficulties in reasoning, problem solving, attention, organisational and concentration skills. Concerns about rate of progress, generalising and retention of skills and information. Discrepancy between oral and literacy skills. Some pupils may grasp mechanical skills but lack comprehension e.g., reading, maths.	EHCP Decision making Guidance document	Working significantly below ARE in most subjects for example: End of EY – 50% delay End of KS1 – working at EYFS (below 5 yrs. equivalent) End KS2 – below or at year 2 End KS 3 – working at below KS2 End KS4 – working at KS2. Post 16 – in addition to the above levels consider learning/vocational pathways. Have Moderate Learning Difficulties in the extremely low range on standardised assessments of cognitive ability (typically at 2nd percentile across a range cognitive ability areas). May have very uneven profile of cognitive abilities. Significant delay in reasoning skills and difficulties across all areas of the curriculum. Significant difficulties retaining skills and information, generalising skills, and staying on task.	Working significantly below NC ARE across all subjects for example: End of Reception: Below step 7 in the developmental area 'thinking' of the Developmental Journal. By the end of KS3 work toward year 1 ARE. Have Severe Learning Difficulties in extremely low range on standardised assessments (at or below 1st percentile across most cognitive ability areas). Very slow rate of progress despite a high level of intervention. Severe difficulties in making inferences, generalisation and transferring skills.	Band 3 plus additional needs in other areas of SEN in mobility and coordination, communication, or acquisition of self-help skills. Additional need must be at band 4.	Profound and Multiple or Learning Difficulties, functioning at early developmental level. Due to level of learning difficulties unable to accomplish personal care, self-help and independence skills throughout the school day. Profound needs: Attainment levels at early developmental stage throughout their schooling and into adulthood.	Band 5 plus additional needs in other areas of SEN; for example, totally physically dependent, neurological, genetic, or other medical condition which results in profound needs. Additional need must be at band 6.
					Speech and Language			

Example of special educational needs met by resources ordinarily available in mainstream schools and colleges <u>link</u>		Examples of special educational needs likely to require additional high need individual funding allocation (element 3)				
0 Universal offer	1 SEN Support	2 High Needs	3 High Needs	4 High Needs	5 High Needs	6 High Needs
anguage ommunication skills ithin average or close average levels. ay have difficulties ith comprehension and obility to follow structions. ay have difficulties in ving accounts of vents, conveying more ostract and complex oughts. ay be reluctant to omment in class/group tuations.	Mild to moderate delay in expressive and/or receptive language and/or mild speech sound disorder. Mild to moderate processing difficulties leading to difficulties in understanding and following instructions. Literal use and interpretation of language. Experiencing unusual aspects of speech such as unusual intonation, volume, rate echolalia and idiosyncratic phrases. Capable of clear speech when prompted but clarity deteriorates in spontaneous speech.	Moderate delay in expressive or receptive language and/or speech disorder (percentile ranks 3 to 6 percentile). Language abilities are impaired to a degree that prevents effective age-appropriate communication. Difficulties in understanding and following instructions and those with complex grammar and vocabulary. Difficulty organising expressive language and making meaning clear. Single words clear but connected speech poor, speech may only be clear to familiar adults. Likely to withdraw from communication in class, language difficulties impacting on learning in all subjects.	Limited expressive and receptive language and/or speech disorder causing limited functional communication, standard score of 70 and below (percentile ranks below 3). Communicates basic needs in verbal way which may be very idiosyncratic and/or speech intelligibility limited to familiar words used in context. Limited communication in class, language difficulties having significant impact on learning in all subjects and social interaction. May show signs of distress and confusion, likely to be misunderstood and respond inappropriately.	Limited expressive and receptive language and/or speech disorder causing limited basic functional communication (percentile ranks below 1). Communicates basic needs in a mixture of speech and nonverbal ways. May use augmented/assistive communication systems.	Profoundly limited language skills; non -verbal and very limited or no understanding of language or other means of communication. Reliant on assistive and augmentative systems to make needs and wishes knowns. Pupils communicate by gesture, eye pointing or symbols.	Profoundly limited langual skills; non -verbal and verbinited or no understanding of language or other mean of communication. And difficulty in using any supportive communication systems.

Example of special educational needs met by resources ordinarily available in mainstream schools and colleges link			Examples of special educational needs likely to require additional high need individual funding allocation (element 3)					
0 Universal offer	1 SEN Support		2 High Needs	3 High Needs	4 High Needs	5 High Needs	6 High Needs	
Autistic traits or a diagnosis of Autism but academic and behavioural competencies mean that with some differentiation she/he is able to cope with the expectations of school/college life. Low level/low frequency difficulties with following: -classroom routines -responding to social situations such as turn taking, reciprocal attention, -sharing of resources, -social isolation or low-level anxiety in social situations. Mostly confident with occasional difficulty integrating or fulfilling social activity. Some sensory differences.	Delayed social communication and interaction skills which can lead to anxiety frustration or distress and impact on the ability to engage in classroom activities. Difficulty with initiating social interactions and/or decreased interest in social interaction. Self-confidence and social integration limited by communication differences, may respond inappropriately in social and/or learning environment. Difficulties forming and maintaining friendships with peers. Social vulnerability which may cause withdrawal or unexpected/unusual interactions. Difficulties recognising and communicating emotions. Difficulties managing change and transitions. Sensory differences may cause some anxiety or distraction at times.	EHCP Decision making Guidance document	Rigid and inflexible thought patterns and longer processing times which interfere with engagement in learning. This may result in distressed and/or unexpected behaviours. Show signs of anxiety when faced with new people, places or when unsure what is going to happen. Difficulty expressing feelings or needs. Limited ability to understand the impact of their actions on others. i.e., cause and effect. Have difficulties understanding social and physical risks. Socially isolated and may be easily led, vulnerable, limited initiation of social interaction. Easily distracted, upset by noise/touch/light, and could lead to distressed or unexpected behaviours.	Rigid, fixated behaviours or signs of distress over even small changes which make it difficult to cope with unexpected situations. Difficulties expressing emotions which may lead to behaviours that challenge, increased anxiety, and episodes of heightened emotion. Limited functional and social communication skills which impacts on the ability to engage in the classroom activities. Difficulties understanding social and physical risks and their own vulnerability, severely limited ability to understand consequences and responsibility for actions. Sensory differences impacting on day to day functioning and learning, likely to cause regular distress.	Rigid, repetitive, or fixated behaviours make it consistently difficult to cope with unexpected changes and to engage in learning. These can lead to severe anxiety, aggression, or withdrawals. Regular high levels of distress and anxiety which presents significant barrier to learning and ability to function within educational environment. Significantly limited social communication that causes anxiety, limits ability to manage emotions and access learning. Seeks to control the environment circumstances and becomes increasingly demand avoidant with staff. Unable to engage in most social activities. Sensory differences that are impacting on learning and lead to frequent distressed behaviours.	Profoundly limited social communication skills, which impact on all areas of learning and social activity including play times and lunch times. Persistently anxious or frustrated, leading to frequent, and unpredictable, behaviours that jeopardizes the health and safety of self and others. No recognition of own or others' emotions. Demand avoidant behaviour with high levels of anxiety severely disrupts learning due to an overwhelming need to be in control. Sensory differences that are impacting on learning and lead to distressed behaviours throughout the day.	Profoundly limited functional social communication skills which is accompanied by daily, persistently high levels of distress and anxiety. Permanently in a high state of anxiety which impacts upon ability to engage in all contexts. Inability to tolerate any social interaction other than meeting own basic needs. Unpredictable, escalating, and prolonged behaviours that challenge throughout the day that jeopardise the health and safety of self and others. Daily ritualistic and fixated behaviours that prevent adults from engaging the pupil with any adult-led activities. Lack of awareness of personal safety, exhibits violent behaviour several times a day. Severe sensory differences cause inability to function in education environment.	
			S	Social, Emotional and Mental He	aitn			

0	1		2	3	4	5	6
Universal offer	SEN Support		High Needs	High Needs	High Needs	High Needs	High Needs
Low level and low frequency of difficulties with: - Immature social/emotional skills e.g. difficulties with turntaking, reciprocal attention, sharing resources etc following classroom routines - complying with adult direction - responding appropriately to social situations - forming and sustaining relationships with peers - some social isolation e.g. tends to play alone, occasional anxiety in social situations - low self-esteem which can result in low level bullying, attention seeking or withdrawal These may be linked to events in their life which have a temporary or irregular impact on the child.	Difficulties throughout the week and may be more frequent in some lessons and activities. For example: - regulating emotions e.g. emotional outbursts, hyperactivity, impulsivity, mood swings, feeling anxious/worried - showing distress or challenging behaviour not following school/classroom instructions such as sitting on the carpet, remaining seated - sustaining attention and concentration, motivation to engage with work-related tasks - low self-esteem and general resilience e.g., fear of failure when faced with unexpected demands - immature responding to social situations, leading to social isolation from peers e.g., may be fearful or anxious in new situations - being withdrawn, timid and reliant on key adults for reassurance and nurturing	EHCP Decision making Guidance document	Frequent and regular incidents which may involve aggression. They may create situations which have health and safety implications. Behaviours exhibited create a barrier to learning e.g., disengaging, regularly destroying own or others' work, work avoidance, concentration very limited, impulsivity. Low self-esteem and low levels of emotional resilience. When emotionally overwhelmed unable to access support and unable to cope when faced with challenge. Mental health needs including attachment difficulties leading to attention seeking or avoiding behaviours, they are likely to impact on the ability to build and maintain successful relationships with adults and peers. Unable to self-regulate leading to prolonged experience of stress.	Regular (daily) incidents, results in highly dysregulated and challenging and/or aggressive behaviours resulting in situations which have health and safety implications for themselves and others. Regular oppositional, defiant behaviours, refusal and inability to comply with requests. Extreme behaviours including controlling behaviours with an inability compromise or rationalise or reflect. Harmful coping strategies e.g., leaving classroom/school site on a regular basis, signs of self-harm. Mental health needs e.g., mood swings that impact on learning and activities throughout the week. They may cause the need to feel in control in order to feel emotionally safe.	Regular (daily) incidents which involve emotionally distressing, violent outbursts and aggression resulting from accumulation of layered needs. Frequent and long-lasting incidences of non-compliant and uncooperative behaviour e.g., exhibiting challenging behaviour in response to demands. Impulsivity and unpredictability which can place the pupil and others at risk. Deteriorating/anti-social relationships with peers and adults e.g., lack of remorse, use of violence Mental health needs e.g., irrational fears, hypervigilance, difficulty understanding and managing their emotions, regular changes in mood that impact on daily learning, activities and may result in incidences of self-harm.	Frequent (more than once per day) and intense in duration incidents of challenging behaviours. Not able to self-regulate emotions and/or behaviors. Emotional, persistent needs lead to challenging distressed behaviours that disrupt teaching groups and jeopardises the health and safety of self and others. Mental health needs which impact on managing emotional responses, exhibits frequent, ongoing severe mood swings significantly affecting all aspects of daily functioning.	Frequent, intense, and prolonged_incidents of aggressive behaviours, often impulsive with no apparent triggers which difficult to manage, eve with specific, individuali intervention. Unpredictable, prolonge and sudden outbursts of intense episodes of emotional and challeng behaviours that jeopard the health and safety of and others. Complex, acute mental health needs; this may include severe attachm disorder, depression, withdrawn behaviour, sanxiety, risk of significal incidences of self-harm

	available in mainstream d colleges <u>link</u>					
0 Universal offer	1 SEN Support	2 High Needs	3 High Needs	4 High Needs	5 High Needs	6 High Needs
			Vi	sion		
Vision within normal range, including when corrected by glasses 6/6 – 6/12.	Mild vision impairment. Distance visual acuity 6/12-6/18 (LogMAR0.3- 0.48). May also have mild Near Vision impairment Print size N14-18 approximately point size 14-18. May other difficulties, e.g. reduced visual field, nystagmus, colour vision difficulties but is able to use effective strategies in most cases May require patching however this would be when the non-patched eye would have severe reduced visual acuity and the associated aspects in this banding CYP Is independently mobile in familiar areas May have difficulties with spatial awareness May require an assessment from a habilitation specialist and self-help skills particularly around transition times	Moderate vision impairment. Distance: visual acuity 6/19-6/36 (LogMAR0.5-0.78) May also have moderate Near Vision impairment Print size N18-24 approximately point size 18 -24. Curriculum access not possible without significant mediation and/or adaptations of curriculum materials requiring training to produce resources and additional support in May have separately or with above other difficulties, e.g., reduced visual field, nystagmus, colour vision difficulties but not able to independently use effective strategies. May require an assessment and support from a habilitation specialist and self-help skills	Severe vision impairment: Distance: visual acuity 6/36- 6/60 (LogMAR0.8-1.0). May have severe Near Vision impairment Pint of size N24-36 approximately point size 24 – 36. May be registered sight impaired Able to access curriculum and buildings only with substantial adaptations of all learning materials and staff requiring training to produce resources and additional support. May require regular support from a habilitation specialist and self-help skills.	Severe vision impairment: Distance: visual acuity 6/60-6/120 (LogMAR0 1.0-1.3). May have severe Near Vision impairment Print of size N24-36 approximately point size 24 - 36 May be registered sight impaired Able to access curriculum and buildings only with substantial adaptations of all learning materials and staff requiring training to produce resources and additional support. May require regular support from a habilitation specialist and self-help skills.	Profound vision impairment: Distance: visual acuity less than 6/120 (LogMAR 1.32). May have profound Near Vision impairment educationally blind/Braille user can access small quantities of print larger than N36 approximately point size 36 May be registered severely sight impaired Able to access curriculum and buildings only with significant adaptations of all learning materials requirement for some use of tactile means of communication to be able to access. Staff requiring training to produce resources and additional support required likely in all situations Will require regular and onsupport from a habilitation specialist and self-help skills.	. Profound vision impairment: Distance: visual acuity than 6/120 (LogMAR 1. May have profound Ne Vision impairment educationally blind/Brai user can access small quantities of print large N36. May be registered seve sight impaired Able to access informai using braille/tactile met which require specialist training to produce resources. Able to access curricult with very significant leving resource production and staff liaison required out of direct support to enside access to the curriculting across a wide range of subjects e.g. secondary curriculum Able to access building move around the school only with regular and individual formal teachiorientation and mobility a habilitation specialist will require training to develop self-help skills.
			Heari	ng		
Hearing within normal range. Temporary conductive hearing loss. CYP may miss-hear and misunderstand oral information which requires monitoring. Pupils may have some immaturities of speech but is understood by adults.	Mild or Moderate sensorineural hearing loss or conductive hearing loss greater than 41dB. Unilateral hearing loss Curriculum access possible with specialist equipment, adaptation and support. Could be hearing aid user Requires signal to noise ratio of 20-30 dBA. Classroom reverberation time of 0.4 seconds.	Chronic long term or recurrent conductive hearing loss with a sensorineural hearing loss in one or both ears resulting in severe functional hearing loss. Moderate sensory-neural hearing loss greater than 41dB with late diagnosis or onset But Curriculum access not possible without significant mediation and/or adaptations of curriculum materials. Could be a hearing aid user.	Moderate/Severe sensorineural hearing loss greater than 41dB And Requires assistive devices to access curriculum with substantial adaptations of all learning materials. Could be an acquired hearing loss, congenital or progressive hearing loss. Hearing aid user.	Severe sensorineural hearing loss greater than 71dB And Requires assistive devices to access curriculum with substantial adaptations of all learning materials. Hearing aid/cochlear implant user. Multisensory impairment with severe impact on development.	Profound hearing loss greater than 95dB. Hearing aid/cochlear implant user. Able to access curriculum only with assistive devices and requires substantial mediation and/or adaptations of materials. Multisensory impairment with profound impact on development.	Profound hearing loss greater than 95dB. Hearing aid /cochlear implant but only able to develop communication sign e.g., BSL, SSE or alternative methods of communication. Multisensory impairmen with severe impact on development.

Example of special educational needs met by resources ordinarily available in mainstream schools and colleges link		ordinarily available in mainstream			y to require additional high need individual funding allocation (element 3)			
0 Universal offer	1 SEN Support	2 High Needs	3 High Needs	4 High Needs	5 High Needs	6 High Needs		
		Mild VI together with Mild HI banding	Moderate VI or HI with other impairment the same <u>or</u> lower banding.	Moderate VI <u>and Moderate</u> HI banding.	Severe VI or HI with other impairment at a mild/moderate level banding	Severe VI <u>and</u> Severe H banding.		
Physical development within normal levels.	Fine and/or gross motor skills difficulties, for	Physical needs give rise to safety issues and	Physical/ medical needs Curriculum access not possible without substantial	Physical, medical or neurological condition	Has a long term/progressive condition and is wholly	Profound physical, long-condition/needs.		
Able to attempt all physical activities within normal school day with minor adaptations, if required. Medical conditions which are ordinarily well managed but may require medication or first aid for example asthma or allergies.	example: -can move and position independently but has some stability or motor coordination difficulties - may have needs relating to undertaking practical tasks, reducing the level of independenceable to use mobility aid with some competence to overcome physical difficulties, e.g., walking frame or power chairLikely to have difficulties adapting to new/specific environments. Able to manage own intimate, and self-care need with minimal adult support. May have physical/medical condition which impact on access to the academic and social curriculum and require care plan/medication to manage condition. May tire more quickly than others. Condition may require monitoring e.g., diabetes, epilepsy. May have some physical abnormalities which may make CYP self-conscious,	curriculum access may not be possible without mediation and/or adaptations of curriculum materials and/or adaptive equipment. Has limited independence in managing interventions required for their condition e.g., personal care, mobility. Able to use mobility aid with some competence e.g., walking frame or wheelchair. Physical and/or medical condition begins to have significant impact on selfesteem, social interactions, and emotional regulation (refer to SEMH descriptors) Implementation of a specific program of care developed and monitored by health professionals.	mediation and/or adaptations of curriculum materials. CYP uses a mobility aid, specialist seating or requires support in moving, positioning and personal care, eating/during. Have substantial communication/recording needs associated with physical disability. Physical and/or medical condition have significant impact on self-esteem, social interactions, and emotional regulation (refer to SEMH descriptors)	impact on all areas of independent learning and emotional wellbeing through the school day (including break times and lunch times). Physical and/or medical needs may fluctuate or deteriorate during the day.	reliant on support for moving, positioning, personal care including drinking eating, e.g., hosting. CYP has no independent seated stability. Medical needs are fluctuating and can lead to frequents emergency situations. Chronic/degenerative condition that require complex medical interventions. CYP has physical disability that create substantial communication difficulties requiring aid such as 4Talk4 or other assistive curriculum devices.	Has total and complex support needs for mobilipersonal care, positionir and movement, hoisting eating/drinking. Profound and unpredicts chronic/degenerative condition that requires complex medical interventions and cyp m have been assessed as eligible for NHS Childret Continuing Care (CCC). Non-verbal, able to communicate when usin specialist communication aids, e.g., TELUS/Dynation		



SEN Funding



Appendix 4 – Banding moderation – purpose, principles, and practicalities

The purpose and principles of the moderation process

Moderation plays an important role in maintaining equitable and transparent funding arrangements for allocation of top-up across all types of provision in South Gloucestershire.

- 1. It informs the strategic allocation of resources agreed by Schools' Forum.
- 2. It provides quality assurance that resources are deployed consistently, equitably, and fairly across all types of educational settings.
- 3. It provides assurance about the transparency of the process.
- 4. It provides and important opportunity for professional development.

Operational arrangements

The moderation process is an annual activity to:

- Category A. Sample the accuracy of banding allocation. Sample should be proportionate to the size of the EHCP cohort and relevant to the banding spread (about 20% of all pupils with EHCPs. Sample will not apply to bands agreed by the Resource Allocation Panel within one year from the original decision date).
- Category B. Consider cases which require a review recommended by the previous moderation cycle.
- Category C. Consider cases which require a change of band allocation (requested by settings/schools/college or the LA).
- Category D. Consider decisions taken by the Resource Allocation Panel where there is disagreement between the LA and the educational setting about the allocation of a band.

Prior to the moderation meeting:

- 1. By the end of September:
 - The LA will contact each educational setting to provide information about pupils whose banding allocation will be sampled (Category A above).
 - The LA will contact educational setting to provide information about pupils whose banding allocation should be reviewed, as recommended by the previous moderation cycle (Category B above).

- Educational settings and the LA will confirm cases recommended for a change of band allocation (Category C above).
- The LA will put forward cases where there is a disagreement between the LA and the educational setting about the band allocation (Category D above).

2. By the beginning of October:

- Educational settings should alert the LA to any data accuracy issues.

3. By the beginning of November

- Educational settings make arrangements for the relevant evidence to be available. The evidence must be submitted in good time, as advised by the LA.
- The EHCP Team Manager will arrange a briefing for LA staff to ensure ongoing consistency across all moderating groups and compliance with the agreed process, principles and banding descriptors.

Submission Type	Evidence Required
All cases (Group A, B, C and D)	Last Annual Review including EHCP, appendices, school contribution and other reports relevant to the needs of the child or young person; for example, sample of behaviour logs (typical week), attainment and progress information (including the necessary information about individual internal systems used to measure progress), medical and health care plans (for children and young people with significant medical needs impacting on the school day). Additional pen pictures are not necessary, they will be considered only with supporting evidence (moderators will be looking to cross reference statements included in the pen picture with evidence).
	Information must be up to date and reflect current needs of children and young people and progress.
	Sensitive information related to the child, young person or the family such as social care reports should not be submitted.

Moderation meeting

The moderation meetings take place during November.

The moderation process involves:

- Groups of schools and colleges representatives cross-moderating band allocations, e.g., groups of schools and colleges using the evidence provided to moderate the decisions made by colleagues at other settings. The moderation will allow this process to be as impartial and equitable as possible, settings will not be involved in the moderation of their own cases.
- Educational settings should be represented appropriately by senior members of staff; it is recommended that the Headteacher/SENCO/SEN lead oversees this process and attends the moderation meeting.
- LA Officer will facilitate the work of the group and record decisions. They will ensure that sufficient time and attention is given to all cases.

- Other LA staff members such as educational psychologist, specialist teachers and members of the EHCP team will support the process by providing their professional expertise, knowledge, and support as necessary. This is to ensure consistency and compliance with the guidance.
- Decisions will be based only on the written evidence so that there is clear audit trail. They must be recorded so that appropriate feedback can be given to individual educational settings.
- Decisions will be agreed by consensus reached by the moderating group. Where consensus cannot be reached the LA representative will make the final decision.
- The moderating group should refer to the main body of the operational guidance to ensure compliance with the agreed process.

The type of decisions made by the moderating panel include:

- Agreement with the educational setting's recommendation
- Agreement or disagreement with the educational setting's recommendation with a request for the case to be returned to next year's moderation (category B above). This decision could be used in cases of border line judgements or cases where there is evidence of progress but not yet fully consolidated or sustained.
- Disagreement with the educational setting's recommendation. A written statement will be included highlighting the reasons given by the moderating panel.

Note:

- Reasons for all decisions must be recorded fully and clearly so that they can be passed on to the educational setting.
- Over identification of high-level bands is likely to impact on availability of resources across the system.

Post Moderation Feedback

- 1. At the end of the moderation process a LA officer will distribute the decisions and facilitate appropriate feedback to educational settings.
- 2. In the event of concerns raised about the individual decision taken by the moderating group, a cross moderation (appeal) by a second group may be necessary. The decision of the appeal group becomes final.
- 3. If significant concerns are raised as a result of the sampling of banding allocations (Group A above), further samples of cases will be requested. In exceptional circumstances where there is further concern related to the whole educational setting all banding might have to be moderated.

Financial arrangements

Payments as a result of the annual moderation

Banding decisions agreed by the moderation process will be implemented from the date of the final moderation. In case of appeals related to the moderation process, the date of the appeal becomes the final date from which payments will be made. There will be no back payment reflecting the new banding allocation agreed through the annual moderation.

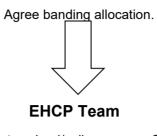
Strategic reporting

The outcome of the moderation and summary of any exceptional allocation of resources must be reported annually to the High Needs Working Group and subsequently to Schools' Forum for financial consideration.

The South Glos Way: A SEND and inclusion toolkit for South Gloucestershire education settings and professionals								

Appendix 5 - Disagreement on band allocation related to placement admission

Resource Allocation PANEL



SEND consultation to school/college as per CoP (9:78 – 9:87)

EY/School/College

Consider documentation and respond within 15 working days

Placement and Banding AGREED

Usual admission arrangements follow.

Placement and banding QUESTIONED by EY/School/College

Set out in writing to the EHCPs Team as a formal response to the consultation process.

Discussion with the case officer (EHCP team)

Pupil to be admitted without delay with a Top Up funded according to the band allocated by the Resource Allocation Panel

EY/school/college to consider early annual review and if still appropriate to submit additional or new evidence to the EHCP Team. Band allocation to be reconsidered by the Resource Allocation

Panel

EY/school/college banding request (if still a concern) to be considered by the next available **Exceptional Request** Panel or peer to peer moderation meeting.

If different band is subsequently agreed as part of the disagreement resolution, the appropriate payment will be backdated to the original decision date.