

Matrix of Predictable and Exceptional Needs				
	Predictable Needs (Ordinarily Available Provision (OAP))	Exceptional Needs (Low)	Exceptional Needs (Medium)	Exceptional Needs (High)
Cognitive development, attainment and progress	<p>Attainment and progress are lower than that of most peers. Working below age related expectations (ARE).</p> <p>May show specific learning difficulties(SpLD) in line with: Dyslexia, Developmental Language Disorder; Dyscalculia; Auditory Processing Disorder; Organisational Difficulties; Attention and Listening Difficulties; Processing Speed Difficulties.</p>	<p>Progress is slow, even with significant, and increasing levels of evidence-based intervention delivered consistently and evaluated over time.</p> <p><b>KS1 or below</b> - Working up to 2 years below ARE.</p> <p><b>KS2+</b> - working <b>at least</b> 2 years below ARE Moderate Learning Difficulty (MLD) profile - difficulties in most areas of learning.</p>	<p>A <b>standardised cognitive assessment</b> has been completed by an <b>Educational Psychologist</b>, with results in the ‘Low’ range (3-8 percentile across most areas) OR difficulties with cognition and learning have been identified by an Educational Psychologist.</p> <p>Progress is very small and slow, even with high levels of targeted intervention. Sustained difficulties in acquiring literacy and numeracy skills, as well as across other areas of learning over time, despite high levels of targeted intervention.</p>	<p>A <b>standardised cognitive assessment</b> has been completed by an <b>Educational Psychologist</b>, with results in the ‘Very Low’ range (1-2 percentile across all areas) OR a complex profile of SEN has been identified by an Educational Psychologist.</p> <p>Progress is minimal or regressive even with high levels of intervention. Difficulties in all areas of learning. Severe Learning Difficulties (SLD) profile – significant and sustained life-long difficulties across all areas of learning.</p>
Speech, Language and Communication	<p><b>Evidence using a screener</b> (e.g. WellComm / Leeds Screener) that there are identified speech, language and communication needs or differences which include:</p> <ul style="list-style-type: none"> <li>□ Understanding and use of language</li> <li>□ Speech and voice</li> <li>□ Stammer</li> <li>□ Selective mutism or speaking anxiety</li> <li>□ Social interaction and communication (see section below)</li> </ul>	<p>Moderate speech, language and communication needs or differences, identified by a screener (<b>red score</b>) or other Speech and Language Therapy Assessment. These needs impact on effective communication, literacy, understanding, and access to and participation in the learning environment. Requires targeted language activities, modification of learning materials and resources and/or some curriculum/environmental adaptation.</p>	<p>Severe speech, language and communication needs or differences <b>identified by a Speech and Language Therapist</b> through a screener (<b>red score</b>) or other Speech and Language Therapy Assessment. These needs impact on effective communication, literacy, understanding, and access to <b>many</b> aspects of the curriculum, requiring a high level of adult support and/or curriculum/environmental adaptation.</p>	<p>Significant speech, language and/or communication needs or differences, <b>identified by a Speech and Language Therapist</b> through a screener (<b>red score</b>) or Speech and Language Therapy Assessment. These needs impact on effective communication, literacy and access to all aspects of the curriculum, requiring a high level of adult support and an individualised curriculum.</p>
Curriculum access/pupil participation	<p>Some difficulties with concentration and retention despite use of Ordinarily Available Provision strategies. Difficulties with transfer of skills and knowledge.</p>	<p>Difficulties with concentration and retention <b>across multiple areas of learning</b>, requiring adult support, intervention, and curriculum modification. Limited evidence of skill and knowledge transfer.</p>	<p>Difficulties with concentration and retention <b>across all areas of learning</b>, requires extensive adult support and a highly adapted curriculum. Little evidence of skill and knowledge transfer.</p>	<p>Totally dependent on adult support and requires an individualised curriculum. Extremely limited or no evidence of skill and knowledge transfer.</p>
Curriculum access/pupil participation	<p>OR</p> <p>Differences in Receptive (understanding of) and Expressive (using) Language - difficulties following instructions, accepting adult direction and maintaining attention to task in some situations across the day.</p>	<p>OR</p> <p>Difficulties/differences in Receptive (understanding of) and Expressive (using) Language - difficulties following instructions, accepting adult direction and maintaining attention to task in multiple situations across the day.</p>	<p>OR</p> <p>Persistent difficulties/differences in Receptive (understanding of) and Expressive (using) Language, that require access to an adapted curriculum across multiple subjects.</p>	<p>OR</p> <p>Significant and persistent difficulties/differences in Receptive (understanding of) and Expressive (using) Language that require access to an individualised, and/or highly specialised, curriculum across the whole school day.</p>
Curriculum access/pupil participation	<p>OR</p> <p>Can independently participate in most classrooms/settings and activities. Progress requires some adult support to remain emotionally available (e.g. check-ins)</p>	<p>OR</p> <p>Can independently participate in some classrooms/settings and activities. Progress requires significant adult support. Curricular information requires repetition, rephrasing and/or visual reframing. Classroom information and curriculum materials require significant modification to enable access.</p>	<p>OR</p> <p>Is only able to participate in limited classrooms/settings and activities. Progress requires extensive adult support. Classroom information and curriculum materials require extensive modification to enable access mostly using tactile and multi-sensory approaches. CYP requires bespoke interpretation to access much of the curriculum.</p>	<p>OR</p> <p>CYP is totally dependent on adult support to meet all physical, medical care and educational needs. CYP’s sole access to curriculum requires bespoke interpretation. Totally dependent on tactile approaches such as Braille etc.</p>

	Predictable Needs (Ordinarily Available Provision (OAP))	Exceptional Needs (Low)	Exceptional Needs (Medium)	Exceptional Needs (High)
Social Understanding and Communication	<p>Differences with social understanding and communication, which may include:</p> <ul style="list-style-type: none"> <li>Initiating and responding to contact from other pupils.</li> <li>Understanding social space (e.g. stand and sit too closely to others).</li> <li>Dealing with unfamiliar social situations.</li> <li>Forming and developing friendships.</li> <li>Understanding the actions and intentions of other pupils.</li> </ul>	<p>Differences with social understanding and communication, include all differences outlined in predictable needs <b>and</b> include:</p> <ul style="list-style-type: none"> <li>Working and learning in a group.</li> <li>Engaging in small-talk and chat.</li> <li>Being able to engage in joint and shared attention with others.</li> </ul>	<p>Differences with social understanding and communication, include all differences outlined in predictable and exceptional (low) needs, <b>and</b> include:</p> <ul style="list-style-type: none"> <li>Communicating their own needs or feelings.</li> <li>Perceiving, understanding, and interpreting the social behaviour of others.</li> </ul> <p>Observed to be vulnerable to social isolation at times.</p>	<p>Differences with social understanding and communication, which impact a young person's access to, inclusion and participation in <b><i>all areas of their school and home community.</i></b></p> <p>Observed to always be vulnerable to social isolation.</p>
Sensory processing and integration	<p>Differences with sensory processing and integration, requiring adjustments to the physical environment, and access to:</p> <ul style="list-style-type: none"> <li>sensory circuits, 'Brain Breaks'.</li> <li>resources (wobble cushion/fiddle toys).</li> <li>alternative setting routines (avoiding crowded areas (corridors/lunch hall/playground)).</li> </ul>	<p>Mild sensory processing and integration differences having an impact on at least one area function (learning, play, self-care and community access).</p> <p>Needs require <b><i>major adjustments to physical environment.</i></b> Needs require <b><i>specialist therapeutic approaches.</i></b></p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Access to quiet area outside of the main classroom.</li> <li>Access to small group (average of 8 or less) for <b><i>some</i></b> (up to 50%) of the day.</li> </ul>	<p>Moderate sensory processing and integration differences having an impact multiple areas of function (learning, play, self-care and community access)</p> <p>Needs require <b><i>major adjustments to physical environment.</i></b> Needs require <b><i>specialist therapeutic approaches.</i></b></p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Access to quiet area outside of the main classroom.</li> <li>Access to small group (average of 8 or less) for <b><i>much</i></b> (more than 50%) of the day.</li> </ul>	<p>Significant sensory processing and integration differences having an impact on all areas of function (learning, play, self-care and community access).</p> <p>Needs require <b><i>major adjustments to physical environment.</i></b> Needs require <b><i>varied specialist therapeutic approaches.</i></b></p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Access to quiet area outside of the classroom.</li> <li>Access to small group (average of 8 or less) for <b><i>all</i></b> of the day</li> <li>Access to individualised and/or specialised curriculum.</li> </ul>
Flexibility, information processing and understanding	<p>Differences that impact access to, inclusion and participation in <b><i>some</i></b> settings and situations across the day, requires an enabling environment to:</p> <ul style="list-style-type: none"> <li>understand what is happening now and next.</li> <li>manage some transitions and change across the day.</li> <li>shift attention – i.e. stop what they are doing to attend to something else.</li> <li>be motivated by topics that aren't part of their own hobbies/interests.</li> <li>understand concepts, plan and make predictions.</li> <li>generalise a new skill across a range of people and environments.</li> </ul>	<p>Differences that impact access to, inclusion and participation in <b><i>most settings and situations</i></b> across the day. Needs require <b><i>major adjustments to physical environment</i></b> to:</p> <ul style="list-style-type: none"> <li>understand what is happening now and next.</li> <li>manage <b><i>most</i></b> transitions and change across the day.</li> <li>shift attention – i.e. stop what they are doing to attend to something else.</li> <li>be motivated by topics that aren't part of their own hobbies/interests.</li> <li>understand concepts, plan and make predictions.</li> <li>generalise a new skill across a range of people and environments.</li> </ul> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li><b><i>Visual strategies</i></b> to: give information; explain social situations, give choices, provide structure; teach routines; support transitions; manage time; communicate rules; support regulation.</li> </ul>	<p>Differences that impact access to, inclusion and participation in <b><i>all settings and situations</i></b> across the day. Needs require <b><i>major adjustments to physical environment</i></b> to:</p> <ul style="list-style-type: none"> <li>understand what is happening now and next.</li> <li>manage <b><i>all</i></b> transitions and change across the day.</li> <li>shift attention or be motivated by other topics, i.e. are intensely focused on an area of interest or activity, and find it hard to attend to other input.</li> <li>understand concepts, plan and make predictions.</li> <li>generalise a new skill across a range of people and environments.</li> </ul> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li><b><i>Visual strategies</i></b> to: give information; explain social situations, give choices, provide structure; teach routines; support transitions; manage time; communicate rules; support regulation.</li> </ul>	<p>Differences that impact access to, inclusion and participation in <b><i>all settings and situations</i></b> across the day.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Access to small group (8 or less) and an individualised, and/or highly specialised environment, for <b><i>all</i></b> of the day.</li> </ul>

	Predictable Needs (Ordinarily Available Provision (OAP))	Exceptional Needs (Low)	Exceptional Needs (Medium)	Exceptional Needs (High)
Physical Disability & Complex needs (to include independent living/Self-help and motor skills)	<p>CYP can be independently mobile (with mobility aids and building adaptations as required).</p> <p>CYP may have medical conditions which reduce their levels of independence e.g. need for staff to monitor signs of severe asthma, or diabetes and require medication to stabilise their condition.</p> <p>CYP will be independent in most self-help and intimate care skills.</p> <p>Some difference in fine and gross motor skills, requiring adjustments such as writing slope, pencil grip, large loop scissors, PE adaptations.</p>	<p>CYP can be mobile with the use of aids but may need some supervision or support. Speed and stamina may be affected. CYP may have postural needs that require alternative seating.</p> <p>CYP's medical condition may require trained adult support at times. CYP may have <b>intermittent medical needs</b> which will impact on learning at these times. E.g. regular hospital visits.</p> <p>CYP may need <b>some support in the management of self-help and intimate care</b> in order to develop independence.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>• use of alternative methods for extended recording of work</li> <li>• adaptations to the environment to access learning e.g. touch-typing programmes, adapted PE equipment.</li> <li>• support to set up equipment/learning environment but work independently in a range of curriculum areas.</li> </ul>	<p>CYP will need <b>regular help with mobility</b> at points during the day. This could be using aids e.g. walking frame and use of wheelchair for longer distances. CYP may have postural needs that require specialist seating.</p> <p>CYP will have <b>high levels of medical need</b> at regular points requiring prompt response and intervention by the school.</p> <p>CYP will have <b>limited independence</b> and need <b>regular daily support with self-help and intimate care</b>. They may need specialist changing facilities over and above an accessible toilet facility.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>• use of alternative methods for extended recording of work</li> <li>• significant adaptations to the environment to access learning and engage in daily living skills.</li> </ul>	<p>CYP are <b>highly dependent on trained adult support for mobility</b>. They may be fully dependent on specialist equipment for mobility and postural needs.</p> <p>CYP's <b>medical condition requires regular and complex treatment / therapy / intervention throughout the day by specialist staff</b>.</p> <p>CYP are <b>fully dependent on specialist adult support for daily living and intimate care needs</b>. Some interventions will require support from more than one adult.</p> <p>CYP may have <b>profoundly limited functional use of their hands and/or voice</b> requiring specialist assistive technology such as switches/eye-gaze, AAC etc.</p> <p>CYP whose degenerative condition has progressed to a level that requires the highest levels of intervention.</p>
Deaf Hearing Loss	<p><b>Diagnosed hearing loss</b> resulting in potential delays in expressive, receptive, and functional language/communication.</p> <p>Difficulty following conversations in groups. Some difficulty accessing in language-heavy subjects.</p> <p>Possibly uses amplification.</p> <p>May require some support and reasonable adjustments to curriculum, resources, and environment.</p> <p><b>Support and monitoring from Advisory ToD is required</b> to support access and inclusion may be issued with assistive listening device e.g. radio aid on loan from LBH.</p>	<p><b>Diagnosed moderate to profound hearing loss.</b> CYP can have challenges accessing information/speech even with assistive listening technology.</p> <p>Expressive, receptive, and functional language/communication is delayed. Challenges in group conversations, emotional development and/or social interactions. Delayed progress in language-heavy subjects.</p> <p>Requires targeted support and some adaptation/differentiation of curriculum, resources, and environment.</p> <p>Will require 1:1 / small group intervention programme as advised by an Advisory TOD or SaLT.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>• <b>Regular teaching and/or monitoring from Advisory ToD and SaLT is required</b></li> <li>• may be issued with assistive listening device e.g. radio aid on loan from LBH.</li> </ul>	<p><b>Diagnosed moderate to profound hearing loss.</b> CYP has significant challenges accessing information/speech even with assistive listening technology.</p> <p>Expressive, receptive, and functional language/communication is significantly affected (delay of minimally 2 years).</p> <p>Speech is variable. Use of sign (SSE/BSL) may be required to support learning. Limited opportunities of peer interactions / risk of social isolation.</p> <p>Significant levels of targeted support from specialist staff (ToD) and SaLT. Differentiated curriculum, learning environment and resources is required.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>• 1:1 / small group teaching <b>led by the specialist staff e.g. ToD</b> in close liaison with the mainstream teacher several days per week is needed.</li> </ul>	<p><b>Diagnosed moderate to profound hearing loss.</b> CYP has significant challenges accessing information/speech even with assistive listening technology. CYP will struggle to follow conversations/instructions through speech alone. Speech is often limited.</p> <p>Use of alternative means of communication, such as sign (SSE/BSL) or AAC/Total Communication will be required to support learning. Limited opportunities for peer interaction / risk of social isolation.</p> <p>Deafness impacts access to, inclusion and participation in all settings and situations across the day. <b>Totally dependent on adult support and access to an individualised, and/or highly specialised environment, for the whole day. Access to peer group of deaf learners.</b></p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>• Access to small group (average 8 or less) and an individualised, and/or highly specialised environment, for <b>all</b> of the day.</li> </ul>

	Predictable Needs (Ordinarily Available Provision (OAP))	Exceptional Needs (Low)	Exceptional Needs (Medium)	Exceptional Needs (High)
Vision Impairment	<p>Challenges in unfamiliar environments/areas, lighting levels, glare, trip hazards. Some difficulty if not seated close to the activity or board. Challenges if too much information presented at once, visually demanding/fatigue. Need for quality stationery resources. Will probably be prescribed and need to wear and look after glasses.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Annual/termly advice from a <b>teacher of the vision impaired QTVI/team</b>.</li> <li>Support from <b>Habilitation Specialist</b>: some advice required around independence.</li> </ul>	<p>Challenges in unfamiliar environments, lighting level, glare, trip hazards, poor contrast, furniture, steps. Difficulties if not seated close to the activity board, unable to change position. Challenges if too much information presented at once, visually demanding, fatigue. Need for quality stationery, technology. Will probably be prescribed and need to wear and look after glasses. Will sometimes miss body language and facial expressions.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Need for touch typing skills, sloping desk, magnification.</li> <li>Regular <b>monitoring and support from a teacher of the vision impaired (QTVI), in line with NATsip criteria</b>.</li> <li>Support from <b>Habilitation Specialist</b>: advice and support around independence and independent travel.</li> </ul>	<p>Challenges in unfamiliar environments/areas, lighting levels, glare, trip hazards, need for support. Unable to access learning if not close to the activity, board. Need for support/technology to access white board materials. Challenges if materials not accessible/modified, use of devices to access, materials and presentations shared in advance. Planning and access arrangements needed for exams. Need for additional time to complete activities. Will probably be prescribed and need to wear and look after glasses. Will miss body language and facial expressions of others, support with who is speaking. Need for adapted activities, high visibility equipment, e.g. resources used in PE.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>On-going personalised advice and training from the <b>QTVI</b> for school staff to enable full access to the curriculum.</li> <li>A high level of dedicated support from a trained key adult. High level of adaptation by teaching staff and key adult</li> <li>Support from <b>Habilitation Specialist</b>:</li> <li>An on-going programme of mobility and Independent Living Skills (ILS) devised and delivered by Qualified Habilitation Specialist, support around independence, independent living skills/independent travel.</li> </ul>	<p>Challenges in unfamiliar and sometimes in familiar environments, difficulties when layouts are changed. Needs to be close to the activity action and handle objects and materials to support access. Need for materials in correct format. Specialist support to prepare accessible, tactile, auditory, braille materials. Need for training around use of specialist equipment. Planning and access arrangements needed for exams. Needs lots of additional time to explore tactile materials, access braille materials, take in information. Will need support, explanation – some visually based language. Will miss facial expressions and body language, may need time and support to locate friends and have time to socialise, meet others with similar needs. Need for adapted activities, high visibility, auditory equipment.</p> <p>Vision impairment impacts access to, inclusion and participation in all settings and situations across the day.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li><b>Totally dependent on adult support</b> and access to an individualised, and/or highly specialised environment, for the <b>whole</b> day.</li> <li>Support from <b>Habilitation Specialist</b>: An on-going programme of mobility and Independent Living Skills (ILS) devised and delivered by Qualified Habilitation Specialist</li> </ul>
Multi-Sensory Impairment	<p><b>Mild loss in both hearing and sight</b> and making good use of at least one modality (hearing or sight). Non-progressive condition; Slower pace of working but has good compensatory strategies; Difficulty with listening, attention, and concentration; Additional learning needs; Sensory processing difficulties</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Hearing aids and/or Low Vision Aids</li> <li>Low level of support needed to manage equipment/aids</li> <li>Use of personalised resources and technology to support learning and use of low vision aids and electronic magnification.</li> <li><b>Regular input from QTVI and TOD</b></li> </ul>	<p><b>Moderate loss in both modalities (hearing and sight)</b> Additional language and / or learning needs associated with multi-sensory impairment. Difficulties accessing incidental learning, including signed and verbal communication. Slower pace of learning; Difficulties with attention, concentration; Difficulties with the development of independence and social skill.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li><b>Specialist advice</b> for school staff required to ensure full access to the curriculum.</li> <li><b>Advice from advisory teachers</b> re direct teaching to develop specialist skills e.g. touch-typing use of Low Vision Aids (LVAs)</li> <li>Intervention programme from the <b>Qualified Support from Habilitation specialist</b>.</li> </ul>	<p><b>Severe/profound loss in one modality and moderate in the other</b> or has a late diagnosed or recently acquired multi-sensory impairment. Delayed development in some areas of learning and difficulties generalising learning and transferring skills. Difficulties coping with new experiences and under-developed independence and self-help skills. Communication difficulties. Significant difficulties accessing incidental learning and the curriculum. Significant difficulties with attention, concentration, confidence and class participation.</p> <p><u>Examples of provision:</u></p> <ul style="list-style-type: none"> <li>Support from a dedicated, specialist key adult across the curriculum who uses Braille, BSL Level 2 or whole body signing; use of tactile resources.</li> <li>Specialist technologies to access learning, e.g. radio aid system.</li> </ul>	<p>MSI will have a <b>combination of significant visual and hearing difficulties</b>.</p> <p>CYP will have significant long term difficulties requiring specialist/and or additional support to access the curriculum.</p> <p>CYP will have significant difficulty in accessing the curriculum and the environment.</p> <p>CYP will have difficulties in perception, communication and in the acquisition of information. Incidental learning is limited. The combination of their difficulties may result in high anxiety and multi-sensory deprivation.</p> <p>CYP will require <b>specialist teaching/support to make good use of their residual hearing and vision</b>, together with their other senses.</p>

	Predictable Needs (Ordinarily Available Provision (OAP))	Exceptional Needs (Low) <b>Early Help and Targeted services involved</b>	Exceptional Needs (Medium)	Exceptional Needs (High)
Pupil participation in/response to education	Some SEMH inhibit participation, understanding and contribution to activities and learning in the classroom.  OR Some challenging responses to learning tasks, resulting in periods of uncooperative behaviour and/or emotional withdrawal (e.g. emerging signs of EBSNA).	A pattern of frequent SEMH inhibiting regular participation, understanding and contribution to activities and learning in the classroom.  OR A pattern of frequently challenging responses to learning tasks, resulting in periods of uncooperative behaviour and/or emotional withdrawal.	A pattern of persistent SEMH inhibiting most participation in, understanding of & contribution to activities & learning in the classroom.  OR A pattern of persistent extreme responses, resulting in prolonged periods of uncooperative behaviour and/or emotional withdrawal.	SEMH inhibiting any participation, understanding and contribution to learning activities. SEMH is barrier to all learning.  OR A sustained pattern of extreme responses, precluding the ability to engage with any formal learning situations.
Emotional health and wellbeing	Some concerns about emotional availability for learning due to difficulties with emotional regulation, adaptation, resilience and/or low self-esteem but for most part CYP responds to situations appropriately and can access learning with minor alterations to learning.  <u>Examples of provision:</u> <ul style="list-style-type: none"> <li>Adult support to maintain appropriate relationships,</li> <li>ELSA,</li> <li>Emotionally Available Adult.</li> </ul>	<b><i>Early Help and Targeted services involved.</i></b> CYP is occasionally (a few times per week) not emotionally available for learning and social interactions, for significant periods of time due to difficulties with emotional regulation, adaptation, resilience and/or low self-esteem. Specialist services may have assessed and/or be involved. May require help to form and maintain social relationships and may be socially isolated. A pattern of frequent disruption to social and emotional wellbeing, resulting in regular impact on learning and social interactions. Mood is frequently very low, affecting self-esteem and limiting ability to engage. Anxiety significantly affects ability to engage in everyday life (inc family life).	<b><i>MHST, Specialist CAMHS services, or equivalent involved.</i></b> The CYP often (daily) struggles to be emotionally available for learning and social interactions without adult support due to significant challenges with emotional regulation, adaptation and resilience. They may have obsessive, repetitive or self-harming behaviours, which prevent them from accessing learning and make them particularly vulnerable to bullying and social isolation. A pattern of extreme and persistent disruption to social and emotional wellbeing, resulting in extreme unhappiness/stress. Possible prolonged periods of absence and/or disengagement (e.g. early signs of EBSNA).	<b><i>Specialist CAMHS services involved at Tier 3.</i></b> The CYP is rarely (every day across multiple situations) emotionally available for learning and social interactions without adult support due to significant difficulties with emotional regulation, adaptation and resilience. They may have obsessive, repetitive or self-harming behaviours, which prevent them from accessing learning and make them particularly vulnerable to bullying and social isolation.  Complete disruption to social and emotional state, leading to extreme isolation and disengagement (e.g. EBSNA).
Impact on self and others	CYP occasionally (a few times per week) presents with distressed behaviour which may be injurious to self or others (wilful or inadvertent).  May show some passive behaviour (e.g. withdrawn, show lethargy/apathy, daydream, task avoidance)	CYP frequently presents with distressed behaviour across the day, which may be injurious to self or others (wilful or inadvertent), resulting in some social isolation and rejection.  May show increasing levels of passive behaviour (e.g. withdrawn, lethargy/apathy, daydream, task avoidance) frequently across a day.	CYP presents with distressed behaviour daily, across multiple situations (including the community), which may be injurious to self or others (wilful or inadvertent), resulting in high level of social isolation and rejection.  May show consistent levels of passive behaviour (e.g. withdrawn, lethargy/apathy, daydream, task avoidance) on daily basis.	CYP presents with distressed behaviour daily, across multiple situations (including the community), which may be injurious to self or others (wilful or inadvertent), resulting in extreme social isolation, vulnerability, susceptible to exclusion from community participation, & disengagement. Shows consistent passive behaviour (e.g. withdrawn, lethargy/apathy, daydream, task avoidance) daily.
Exceptional, complex circumstances	Alternative provision for SEMH is unlikely to be applicable for CYP matching the descriptors for cluster funding.		Exceptional safeguarding evidence demonstrates a high risk of significant harm because of SEMH issues not previously supported through SEND provision.	Exceptional safeguarding evidence demonstrates a high risk of significant harm because of SEMH issues not previously supported through SEND provision, which cannot currently be managed in a mainstream setting.

	Cognition and Learning needs
	Communication and Interaction needs
	Sensory and Physical needs
	Social, emotional, and mental health needs