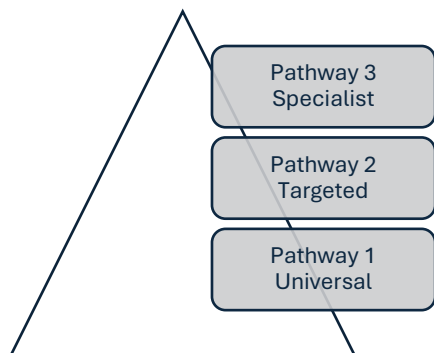


The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

The Specialist Intervention Team (SIT) is available to all children and young people across the Special Partnership Trust. The team work on a referral basis. These referrals must be made by the class/leadership teams within the schools.

All of the SPT settings are specialist and therefore our universal offer encompasses a range of skills, strategies and knowledge to support Engagement in Learning for SEND.



The SIT supports with access to therapeutic input across three pathways, with all learners accessing Pathway 1 as part of the school offer. The three pathways reflect the level of therapeutic input needed in order for that child/young person to access their education. Some learners will move between pathways as their needs change. Others will remain on one pathway for their school career due to their needs.

A variety of audits, including Pathway 1 and EHCP Provision audits, support individual settings to continue to grow and develop their universal offer in order to meet the needs of their changing cohorts.

The SIT triage process can identify trends in need and gaps in provision. If significant and recurrent needs are identified the specialist Intervention Service supports by offering/identifying continuing professional development opportunities for school staff, ensuring changing needs can be met within universal provision and/or works alongside external agencies and


service providers to identify specialist support/training/intervention.

Each Area of Need that has external therapeutic services options has it's own SIT offer with differentiated pathways. Communication and Interaction, Sensory and/or Physical, Social, Emotional, Mental Health (SEMH) and Health (*in development*).

Within each offer SIT cover six areas to ensure all aspects of support, input and stakeholders are accounted for:

Environmental and Resourcing	Workforce	Teaching and Learning	Identification and Review of Needs	Families and Young People	Community and Inclusion
<ul style="list-style-type: none"> This area outlines the whole school environmental approach and equipment available throughout the school to enhance the specialist offer within a school that supports the needs of complex learners. 	<ul style="list-style-type: none"> This area highlights the development of skills within a specialist staff, including whole school CPD and individual staff skills pathways. 	<ul style="list-style-type: none"> This area reflects the strategies and skills used within the teaching and learning to ensure that individual therapeutic areas of need are met within the whole school approach. 	<ul style="list-style-type: none"> This area highlights the ongoing planning and reviewing of individual needs of all learners within school. 	<ul style="list-style-type: none"> This area shares strategies for supporting families and young people to meet aspects of individual needs at home. 	<ul style="list-style-type: none"> This area includes guidance on strategies for supporting needs when accessing the local community and developing an inclusion offer within local settings.

Communication and Interaction


 Pathway 1

Environmental and Resourcing	<p>Across the SPT we use a Total Communication Approach which supports the development of expressive and receptive communication skills through Means, Reasons and Opportunities for communication being embedded into the school environment. This approach supports individuals to find accessible and effective ways of communicating.</p> <p>The Total Communication Approach includes:</p> <ul style="list-style-type: none"> - Low-tech communication resources that use consistent symbol sets in each setting. (PCS/Widgit) and the software to support their production. - Photos, Single symbols, Core Boards and communication books available at all times to all learners - Transition supports including Objects of Reference, Schedule Strips, Now/Next and sensory Cues. - Shared Space core boards to enhance opportunities for independent expressive communication. - Appropriate visuals for each setting held by all staff and visitors. - Visual aids in place throughout the school to support environmental understanding including, objects of reference, tactile cues, photographs, symbols and text. - The use of Makaton signing alongside speech to introduce vocabulary and support with receptive and expressive communication. - Appropriate visuals to support routines and engagement in learning are evident in all learning spaces including a variety of timers, visual timetables, schedules and traffic lights. - Physical/textural cues that support transitions and engagement with our immediate environment. For example, textured walls in transitional spaces. - Audio/Visual cues that support transitions and engagement with our immediate environment, for example sound buttons and photographs on key spaces. - Low tech resources are embedded into classroom practice and used to support learning opportunities/topics etc. - Low tech resources are available to support independence and daily living tasks. - Access to High-tech communication resources used to model the use of high tech AAC within the classroom.
Workforce	<p>Induction level training for all staff in all settings will achieve a fundamental understanding and basic level of competency in a variety of communication methods to support learners' communication needs. Training will include:</p> <ul style="list-style-type: none"> o Makaton o Intensive Interaction o Communication for Complex Needs o Language processing including conceptual understanding and Information Carrying Words (ICWs) o TEACCH strategies o Use of low and high tech AAC including design and creation of resources o Generalised use of visuals and multi-sensory prompts/cues

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> - Ongoing whole school training needs will be monitored, strategically planned and informed by current practice and development in Speech and Language Therapy research. - Strategic CPD will support the development of skilled staff teams in the key areas of need identified within EHCPs - Staffing is strategically deployed based on the needs of the cohort, ensuring particular communication needs in a class are met by the staffing model. - A school-based Communication Lead who identifies pathway 1 priorities for their setting and links with the SIT and SPT Communication Learning Community to share good practice and areas for development with Trust colleagues. - Appropriate time given to ensure AAC resources are maintained, updated and available. This time will vary depending on the needs of the setting.
Teaching and Learning	<ul style="list-style-type: none"> - An embedded approach, where Communication and Interaction strategies are clearly identifiable within core subject offers. - Skilled teaching staff, experienced in planning for and delivering communication and interaction strategies within everyday practice; promoting communication skills and development throughout the school day using the means, reasons and opportunities model to raise the profile of communication. - Opportunities for communication are planned through structured, non-structured and social opportunities, encouraging a generalisation of communication skills. - Communication rich classrooms/learning environments that are accessible and relevant to learners - Communication resources and methods are appropriately modelled to learners through structured and non-structured experiences. - Personal Learning Goals (PLGs) reflect Communication outcomes and are planned for and evidenced. - Previous therapeutic recommendations and outcomes are reflected through classroom planning and practice and evidence towards these is gathered as part of the PLG process. - Transitions between class groups are well informed and the learner's communication is prioritised as part of this process.
Identification and Review of Needs	<ul style="list-style-type: none"> - All learners must have an EHCP that details their communication strengths and needs. - All learners to have an identified Communication and Interaction outcome within their EHCP. - EHCP Outcome setting is aspirational and maintenance of communication skills/next steps are clearly informed by knowledge of learners' communication needs and any therapeutic input received. - Communication provision is clearly listed throughout all areas of need on the EHCP in order to ensure pupil voice is paramount. - A review of current EHCP is completed annually for all learners. - Termly PLG targets designed for all learners based on annual review outcomes. - PLG targets are evidenced and reviewed on an ongoing basis. - PLG targets inform medium term and short-term planning.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> - Ongoing assessment of needs through termly progress reporting. - Specialist Intervention Team available to support with school-based advice and guidance as well as offering observation and evidence for review/referral to further pathways.
Families and Young People	<ul style="list-style-type: none"> - Pupil views are collated regularly, highlighting strengths and areas for development. - Daily communication between school and home (through home/school communication books/email/phone.) - Sharing information and joint goal setting at annual reviews - PLGs are shared and support is offered to ensure these can be generalised to home settings. - Communication and Interaction resources created at school are duplicated and shared with home - Schools will provide general advice on communication development and ideas for activities at home. - Training and sharing opportunities provided for families. - Links are shared to information and support networks - Family Liaison Officer is employed by the school to support with the above.
Communities and Inclusion	<ul style="list-style-type: none"> - Community links established with local education providers including: nurseries, primary schools, secondary schools and colleges. - Community links established with local charities and care providers. - Communication strategies and total communication approach applied during community visits and built into visit plans and individual/group risk assessments.

Communication and Interaction

Pathway 2

<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> - Timetabled access to therapeutic intervention spaces within all school environments related to pupils identified needs during and post-intervention. - Development of bespoke communication resources. - Development of bespoke resources directly linked to a child/young person's communication needs and SIT led interventions, for example: <ul style="list-style-type: none"> o Lego Therapy Packs o Sensory libraries o Build a bucket/Attention Autism - A variety of interventions and plans that support learners with communication needs to access learning, for example: <ul style="list-style-type: none"> o Barrier Games o Social Communication Groups o Lego Therapy
<p>Workforce</p>	<ul style="list-style-type: none"> - School based Intervention Coordinator specialised in specific strategies/programs to support communication needs. - Access to a team of highly specialised Intervention Coordinators across the Trust - Advice and guidance provided to the class teacher/teams based on assessment of needs and/or identified strategies. - Close working relationships with outside agencies such as SaLT, CAACAT, AAC West, CAMHS/CAMHS LD - Advanced Speech and Language training for key staff members including: <ul style="list-style-type: none"> • Elklan • Advanced Makaton Levels • High Tech AAC editing • Use of Eye Gaze - Child/young person may access specific therapeutic groups that meet their identified need such as Lego Therapy/ Attention/ Social Communication Groups* - Child/young person may receive time specific, 1-1 targeted support/intervention developed collaboratively between SIT and any involved therapists** - Close working relationship with relevant school-based teams, including: <ul style="list-style-type: none"> • Makaton Champions • Behaviour/pastoral leads/teams • TIS Practitioners • Communication leads/teams • Safeguarding Team - Specialist Intervention coordinator will: <ul style="list-style-type: none"> • Plan, resource and deliver interventions

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> • Collect evidence towards EHCP/ therapeutic/ SIT outcomes and record this on Evidence for Learning (EfL) to support teacher evidence gathering and information sharing. • Complete an Impact Evaluation that shows dissemination of recommendations and next steps. • Make further recommendation for referral to specialist service (Pathway 3) if appropriate. <p>- SIT Manager, with support of clinical lead, through weekly triage and evaluation process:</p> <ul style="list-style-type: none"> • Identifies need of referred pupil • Coordinates intervention and resourcing • Supervises and quality assures interventions • Identifies whole school/Trust CPD priorities • Supports with the sourcing and delivery of appropriate training across the Trust <p><i>*Group Intervention Plans are written in draft by SIT and adapted for cohort's specific needs by facilitating Intervention Coordinator. Group plans are reviewed by relevant supporting professional and ongoing supervision is provided.</i></p> <p><i>**SIT manager/Clinical Lead supervise intervention plan/identified outcomes. This can also be supervised by NHS/in house therapists if appropriate. These interventions identify any relevant EHCP/Therapy outcomes and combine these with a SIT outcome. These outcomes and any strategies/recommendations are evidenced throughout and evaluated at the end of each intervention block.</i></p>
<p>Teaching and Learning</p>	<ul style="list-style-type: none"> - Timetabled intervention and support opportunities, both within whole class teaching and learning and on a small group/individual basis - Dissemination of strategies/skills/understanding through modelling, training opportunities and discussion. - Ongoing assessment and evidencing progress throughout intervention period. - Strategic support to embed therapeutic strategies within daily planning and classroom support. - Intervention Coordinator to work to ensure that recommendations are implemented and embedded in the classroom through initial evaluation and feedback and planned follow up.
<p>Identification and Review of Needs</p>	<ul style="list-style-type: none"> - Referral to SPT Specialist Intervention Team made by class team/school - Initial information gathering completed by Intervention coordinator and provided alongside SIT referral. - Referral taken to triage and route agreed as Pathway 2 - Appropriate supervisor agreed, this could include an external/in house therapist. - Ongoing progress review throughout intervention period (6 weeks) via EFL. - Specialist Intervention Coordinator to observe, identify individual needs, and develop supporting documents for example Talk My Way Holistic Communication Profile, with supervision. - Effectiveness of intervention reviewed 6-8 weeks. (Impact Evaluation) - Progress and recommended action report completed* - Intervention and review of needs to be included in subsequent EHCP Annual review meeting if appropriate. - Any pupil that requires amended targets linked to SIT outcome, a member of the SIT will attend the Annual Review meeting.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> - Robust referral process in place to support access to communication support teams/therapists where appropriate. - If referral is not accepted to Pathway 3 then the pupil will be re triaged for SIT intervention to gather evidence of need. - <p><i>*This may include return to Pathway 1; continuation of pathway 2 or escalation to Pathway 3 and referral made to external agency and/or specialised in house therapist.</i></p>
<p>Families and Young People</p>	<ul style="list-style-type: none"> - Child/young person's feedback/engagement, forms valuable aspect of impact evaluation. - Teacher consultation with family during the Pathway 2 referral process including consent to join groups if deemed necessary by SIT or Class Team. - Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home in the form of documentation at the end of intervention block* - SIT may facilitate specific parent/carer coffee mornings/training if a communication priority is identified by a school/setting - Develop opportunities for shared practice and outreach within the wider school community, including parental engagement. <p><i>*Unless specifically requested meeting/discussion with SIT, this information is shared with class teams and it is their responsibility to share this with parents/carers.</i></p>
<p>Communities and Inclusion</p>	<ul style="list-style-type: none"> - Ongoing consultations with external therapeutic agencies, sharing intervention strategies and progress. - SIT develop opportunities for shared practice and outreach within the wider community, accessing a variety of networks and groups. - SIT identify and develop research opportunities with outside agencies/charities/providers etc. - Facilitate focus groups and professional working parties in relation to trends identified in triage, for example Eye Gaze tech use.

Pathway 3

Communication and Interaction

<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> - Specialist/specific therapeutic equipment/spaces in place to meet identified needs for learners receiving specialist input from external or in house therapy teams.
<p>Workforce</p>	<ul style="list-style-type: none"> - Referral for intervention/ assessment from external (NHS/Council)* SaLT, CAACAT, AAC West, Cornwall Sensory Support Service, CAMHS/LD, This should include: <ul style="list-style-type: none"> • Attendance at MDT meetings • Effective information sharing and joint multi-agency outcomes • Annual reports provided to inform EHCP outcomes/areas of need. - And/or internal referral made to in house SaLT to include: <ul style="list-style-type: none"> • Consultation • Comprehensive assessment and report with identified goals and outcome measures • 1-1 therapy/ specific advice for pathway 2 intervention (SIT) or Pathway 1 provision (in school) • Attend meetings as required • Provide instruction/training/modelling as required • Effective information sharing and joint multi-agency outcomes and working <p><i>*Will complete their own service responsibilities and pathways.</i></p>
<p>Teaching and Learning</p>	<ul style="list-style-type: none"> - Timetabled intervention opportunities, both within whole class teaching and learning and on a small group/individual basis. Facilitated by Outside Agency/Therapist* - Named therapist for discussion with class team. - Reports and recommendations circulated to class team via SIT and SLT Link. - Reports and recommendations to support outcome setting, including indicators of progress and listed provision in relevant area of need on EHCP annual review for learners currently open and active on caseload. - Strategic support to embed therapeutic strategies within daily planning and classroom management. <p><i>*This may also include SIT as additional capacity and dissemination of specialist skills and knowledge</i></p>

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

<p>Identification and Review of Needs</p>	<ul style="list-style-type: none"> - Appropriate referral to External Therapeutic Teams based on collated previous input/recommendations if appropriate - External referral made to appropriate multi-agency services by SIT collaboratively with class teams/SLT. - Consent gained and referral discussed with parents/carers alongside class team. - Individual needs assessment completed by external therapist/service. - Intervention plan/recommendations/report completed by external therapist. - Ongoing assessment/consultations throughout intervention period. - Progress and recommended actions report completed (which may include continuation of support, or transfer to open access) - Intervention and review of needs to be included in subsequent EHCP review meeting. - Evidence gathered for exceptional needs educational review meeting with the LA, where requested by SENDCo or where a need is apparent. - Some pupils will need to remain on pathway 3 due to the ongoing need from external agencies which education cannot provide in house, eg Dysphagia Team - Therapy teams will work closely with schools and SIT, ensuring open caseloads and related actions are shared. - SIT will facilitate termly meetings for Communication Focus caseloads to ensure sharing of information between Council, NHS, In house and school teams. - A multi-agency approach to learners accessing AAC with competency to ensure effective referral and ongoing support from SaLT/CAACAT /AAC West and AAC providers.
<p>Families and Young People</p>	<ul style="list-style-type: none"> - External practitioner and/or in house therapist consultation with family during the referral process - External practitioner and/or in house therapist to consult with families during the assessment phase if appropriate. - Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home- with the understanding that input has been provided with an educational engagement focus.
<p>Communities and Inclusion</p>	<ul style="list-style-type: none"> - Ongoing consultations with external agencies, sharing intervention strategies and progress. - Network map developed and updated to show services available to support with specific SEN needs. - SIT facilitates focus groups and development days to allow space for external services to meet face to face, discuss shared caseloads and identify priorities for development.

Sensory and/or Physical

Pathway 1

<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> • Access to regular movement throughout the school day- multi-sensory learning opportunities. • Support transitions and access to nurturing environment • Co-regulation to support self-regulation and intensive interaction • Sensory room available for all learners • Classroom groupings aimed to be led by individual needs • Sensory enrichment spaces available/timetabled for all learners • Trauma Informed embedded whole school practice • Access to outdoor space/learning including physical based playground equipment • Access to life skills environment and opportunities for development of life skills • Sensory regulation/enrichment resources including: <ul style="list-style-type: none"> - Weighted blankets - Exercise/peanut balls - Seating - Fidget toys • Breakout spaces identified throughout the school • Sensory break choosing options available to all learners • Trampoline for rebound therapy • Hydrotherapy pool/Swimming Pool Access • Movement/Dance and Yoga activities • Hoists and slings/ changing beds/Mats • Moving and Handling passports, risk assessments and PEEPs
<p>Workforce</p>	<ul style="list-style-type: none"> • Induction level training to achieve a fundamental understanding of: <ul style="list-style-type: none"> - Intensive Interaction - Sensory integration introduction - Timetables and TEACCH strategies - TIS Training • Ongoing whole school training needs to be monitored and strategically planned in line with development in sensory and physical research • Strategic CPD to support the development of skilled staff teams in the key areas of need with EHCPs • Advanced Sensory and Physical training including: <ul style="list-style-type: none"> - Rebound therapy - Move - Sensory profiles/diet strategies - Moving and handling • Staffing strategically deployed based on the needs of the cohort • A school based team of moving and handling specialists available to support and develop practice throughout the school

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> • A close working practice between school and OT/Physiotherapy providers including Loans store and wheelchair services
Teaching and Learning	<ul style="list-style-type: none"> • A differentiated curriculum designed around the complex needs of our learners, which includes a Pathways approach to ensure targeted strategies are delivered to the most appropriate cohorts of learners. • An embedded approach, where Sensory and Physical strategies are embedded within core subject offers, with a particular emphasis within the PE/PD offers. • Skilled teaching staff, experienced in planning for and delivering a differentiated, multi-sensory curriculum, which is inclusive for all. • Personal Learning Goals planned for within medium term and short-term planning. • Environment and resources available, planned for and utilised by teaching staff.
Identification and Review of Needs	<ul style="list-style-type: none"> • All learners must have an EHCP. • All learners to have an identified Sensory/Physical outcome within their EHCP. • A review of current EHCP is completed annually for all learners. • Termly PLG targets designed for all learners. • PLG targets evidenced and reviewed on a termly basis. • PLG targets to inform medium term and short-term planning. • Ongoing assessment of needs and robust referral process in place
Families and Young People	<ul style="list-style-type: none"> • Pupil views collected regularly, highlighting strengths and areas for development. • Pupil representatives to play an active role in the evaluation of the therapeutic offer, supported by school parliament/council, SENCO and relevant school Governors. • Daily communication between school and home (through home/school communication books/email/phone calls. • Regular sensory/physical activities and strategies shared with families. • Training opportunities provided for families. • Links shared to information and support networks. • Family Liaison Officer employed by the school. • Support for families with referral processes. • Resources developed with parents/created at school are shared with home for consistent approaches.
Communities and Inclusion	<ul style="list-style-type: none"> • Community links established with local education providers including nurseries, primary schools, secondary schools and colleges. • Community links established with local charities, leisure centres and care providers. • Sensory enrichment strategies and total communication approach applied during community visits and built into risk assessments. • Close working practice with community therapy teams, sharing practice and CPD. • Local settings to be considered alongside intervention strategies highlighted within individual plans. • Community opportunities and experiences explored for all. • Outreach support provided for local ARB/mainstream setting supporting learners with sensory and physical needs.

Sensory and/or Physical

Pathway 2

<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> • Therapeutic intervention spaces developed within schools. • Development of bespoke resources directly linked to a child’s function. • Resources specifically linked to Sensory/Physical needs stored on Sharepoint to be shared alongside interventions or to support pathway 1 provision.
<p>Workforce</p>	<ul style="list-style-type: none"> • Therapy team to review EHCP targets for all EYFS cohorts to ensure accuracy of target setting and identified needs. Advice and guidance provided to the class teacher/teams. • SIT maintains a close working relationships with TIS practitioners and moving and Handling Team - Specialist Intervention coordinator will: <ul style="list-style-type: none"> • Plan, resource and deliver interventions • Collect evidence towards EHCP/ therapeutic/ SIT outcomes and record this on Evidence for Learning (EfL) to support teacher evidence gathering and information sharing. • Complete an Impact Evaluation that shows dissemination of recommendations and next steps. • Make further recommendation for referral to specialist service (Pathway 3) if appropriate. - SIT Manager, with support of clinical lead, through weekly triage and evaluation process: <ul style="list-style-type: none"> • Identifies need of referred pupil • Coordinates intervention and resourcing • Supervises and quality assures interventions • Identifies whole school/Trust CPD priorities • Supports with the sourcing and delivery of appropriate training across the Trust <p><i>*Group Intervention Plans are written in draft by SIT and adapted for cohort’s specific needs by facilitating Intervention Coordinator. Group plans are reviewed by relevant supporting professional and ongoing supervision is provided.</i></p> <p><i>**SIT manager/Clinical Lead supervise intervention plan/identified outcomes. This can also be supervised by NHS/in house therapists if appropriate. These interventions identify any relevant EHCP/Therapy outcomes and combine these with a SIT outcome. These outcomes and any strategies/recommendations are evidenced throughout and evaluated at the end of each intervention block.</i></p>
<p>Teaching and Learning</p>	<ul style="list-style-type: none"> • Timetabled intervention support opportunities, both within whole class teaching and learning and on a small group/individual basis. • Child/young person may access specific therapeutic groups that meet their identified need such as sensory motor group or interoception/fine motor skills group. Groups to be led by SIT Intervention Coordinator - reviewed and signed off by OT/Clinical Lead. • Child may receive 1-1 targeted support/intervention plan developed collaboratively with therapy team recommendations. Clinical Lead would oversee intervention plan/identified targets.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> • Time specific six-week intervention developed with a progress outcome meeting held by the SIT who will identify next steps alongside class team and supervising professional. Clinical lead to review and sign off group plans. • Ongoing assessment/record keeping and evidencing progress throughout intervention period. • Strategic support (SIT Manager/Clinical Lead) to embed therapeutic strategies within daily planning and classroom support
Identification and Review of Needs	<ul style="list-style-type: none"> • All pupils in EYFS (or first academic school year) to be reviewed by the SIT Intervention Coordinator alongside the class team and needs identified in accordance with the pathway offer. • SIT Intervention Coordinator to observe and identify individual needs and develop a supporting document such as SERP (sensory engagement and regulation plan). OT/Clinical Lead to review and finalise these prior to circulation. • Individual needs assessment completed by Specialist Intervention Team • Initial screening and documents completed by SIT Intervention coordinator and supervised by Manager/Clinical Lead. • Ongoing assessment throughout intervention period (6-8 weeks). Effectiveness of intervention reviewed 6-8 weeks. • Progress and recommended action report completed, which may include return to Pathway 1; continuation of pathway 2 or escalation to Pathway 3. • Specialist Intervention Team to join MDTs, school based safeguarding/behaviour meetings on a minimum termly basis. • SIT Manager and Clinical Lead through triage process: <ul style="list-style-type: none"> - Identify need of specific pupil - Coordinate intervention and resourcing - Provide instructions and training to class team - Provide instruction and training to the Specialist Intervention Assistant • Any pupil that requires amended targets, a member of the therapy team will attend the Annual Review meeting. • Intervention and review of needs to be included in subsequent EHCP review meeting may include SIT evidence, evaluation or provision recommendations.
Families and Young People	<ul style="list-style-type: none"> • Learner consultation to take place as part of the referral process, including completion of a pupil view when appropriate. A variety of resources/strategies will support staff to gain pupil voice during interventions. • Teacher consultation with parent/carers during the Pathway 2 referral process. • Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home in the form of documentation on a regular basis. • Resources developed with parents/created at school are shared with home for consistent approaches
Communities and Inclusion	<ul style="list-style-type: none"> • Ongoing consultations with external therapeutic agencies, sharing intervention strategies and progress made. • Local settings to be considered alongside intervention strategies highlighted within individual plans-bespoke learning provision

Pathway 3

Sensory and/or Physical

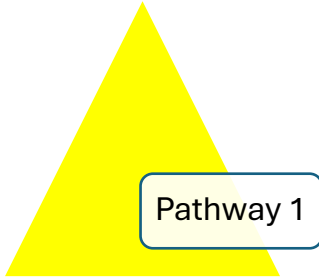
<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> • Appropriate Therapy/Intervention spaces available within the school environment • Individual needs equipment sourced through the NHS team including: Seating/wheelchairs.
<p>Workforce</p>	<ul style="list-style-type: none"> • External referral made to appropriate multi-agency statutory services • Intervention/ assessment from external (NHS) OT, physiotherapists, CAMHS/LD, social care who will complete their own service responsibilities and pathways. This should include: <ul style="list-style-type: none"> - Attendance at MDT meetings - Effective information sharing and joint multi-agency outcomes - Annual reports provided to inform EHCP outcomes/areas of need • And/or internal referral made to in house OT: <ul style="list-style-type: none"> - Comprehensive assessment and report with identified goals and outcome measures linked to child's function potential 1-1 therapy (within school). - Attend meetings as required. • SIT Manager who will: <ul style="list-style-type: none"> - Coordinate intervention and resourcing as required. - Provide/coordinate sharing of instructions and training to class team as required. - Provide/coordinate sharing of instruction and training to the SIT Coordinators. - Ensure all recommendations are adhered to and evidenced through regular evaluation. - Attend meetings where appropriate. • SIT Intervention coordinator who will: <ul style="list-style-type: none"> - Support with implementation and resourcing of plans. - Collect evidence for specialist intervention plan. - Attend meetings AR and multi-agency meetings as required

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

<p>Teaching and Learning</p>	<p>At Pathway 3 in addition to the whole school environmental provisions, we offer:</p> <ul style="list-style-type: none"> • Timetabled intervention support opportunities, both within whole class teaching and learning and on a small group/individual basis • Ongoing assessment and evidencing progress throughout intervention period <p>Strategic support to embed therapeutic strategies within daily planning and classroom support</p>
<p>Identification and Review of Needs</p>	<p>At Pathway 3 in addition to the provisions made within Pathways 1 and 2, we also offer:</p> <ul style="list-style-type: none"> • Referral to External Therapeutic Team • Individual needs assessment completed by external therapist • Intervention plan completed by external therapist • Ongoing assessment/consultations throughout intervention period • Progress and recommended actions report completed (which may include continuation of support, or transfer to open access) • Intervention and review of needs to be included in subsequent EHCP review meeting • If referral is not accepted then the pupil will remain on pathway 2 for further intervention and evidence of need and/or if felt necessary, following a (SLT) safeguarding meeting, a MARU referral may be made. • Evidence gathered for exceptional need educational review meeting with the LA. • For some pupils they will need to remain on pathway 3 due to the ongoing need from external agencies which education cannot provide in house (pathway 3 pupil- static) PS3
<p>Families and Young People</p>	<p>At Pathway 3 in addition to the provisions made within Pathways 1 and 2, we also offer:</p> <ul style="list-style-type: none"> • Learner consultation to take place as part of the referral process, including completion of a pupil view • External practitioner and/or in house therapist consultation with family during the referral process if appropriate • External practitioner and/or in house therapist to consult with families during the assessment phase if appropriate <p>Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home- with the understanding that input has been provided with an educational engagement focus. The Specialist Intervention Team will not support in the home environment.</p>
<p>Communities and Inclusion</p>	<p>At Pathway 3 in addition to the provisions made within Pathways 1 and 2, we offer:</p> <ul style="list-style-type: none"> • Ongoing consultations with external agencies, sharing intervention strategies and progress made • Local settings to be considered alongside intervention strategies highlighted within individual plans- bespoke learning provision

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

Social, Emotional, Mental Health (SEMH)



Environmental and Resourcing	<ul style="list-style-type: none"> • Trauma Informed School Accreditation in place across all settings and embedded into daily practice. • Transition supports using a strengths-based and person-centred approach. • Access to spaces that support arousal states such as low arousal and up regulating. Sensory enrichment spaces available/timetabled for all learners including those in specialist equipment or with additional mobility needs. • Access to appropriate pastoral/therapeutic spaces. • Trauma Informed resources and activities available at all times • Access to Areas of Interest as hooks for engagement including, outdoor space/learning including physical based playground equipment, nature and horticulture opportunities. • Sensory regulation/enrichment resources/equipment to support up and down regulation: such as resistance bands, heavy muscle work, light and sound, vestibular and proprioceptive. • Access to regular meaningful movement and multi-sensory learning opportunities throughout the school day • Breakout/safe spaces identified throughout the school. • Regulation break options available to all learners • Empowerment Groups available for identified learners • Appropriate resources to support understanding of and coping strategies for bereavement and loss • Staff use a range of evidence-based resources to support learners' communication and understanding of regulatory needs. These could include Energy Meters, Zones of Regulation, Incredible 5-point Scale. • Where appropriate a resource library for learners, to support independent and self-directed education on the use of regulation tools such as understanding the 3-brain model and/or The Scared Gang Books. • Appropriate resources to support pastoral intervention for example Draw and Talk, Lego Therapy, Sand Tray Therapy, Motional Activities, THRIVE/TIS intervention. • Access to a variety of books and games that support understanding of emotions, sensory systems, neurodiversity, bereavement and trauma. • Access to a range of creative arts, wellbeing and outdoor activities/experiences
Workforce	<ul style="list-style-type: none"> • All staff have level 2 Safeguarding and suicide awareness training including the appropriate use of CPoms to inform a coordinated response. • Induction level training to achieve a fundamental understanding of: <ul style="list-style-type: none"> - Co and Self-Regulation Strategies - Sensory Processing and the impact on functioning and regulation - Restorative practice - The impact of trauma on CYP's presentation and regulation for example Beacon House – Window of Tolerance, Polyvagal Theory, ACEs, Sensory Attachment - Trauma Informed Schools (TIS)/THRIVE

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	<ul style="list-style-type: none"> - Team Teach/Price - Bereavement Training - MHFA – Suicide awareness • Ongoing whole school training needs to be monitored and strategically planned in line with development in SEMH research. • Strategic CPD to support the development of skilled staff teams in the priority areas of need within EHCPs. • Advanced SEMH practitioners including: <ul style="list-style-type: none"> - TIS practitioners - ELSA (Emotional Literacy Support Assistants) - Draw and Talk Practitioners - MHFA (Mental Health First Aiders) - Special Yoga for ADHD and ASD - ELKLAN trained staff • Access to specific programs to support SEMH needs <ul style="list-style-type: none"> - Sulp (Social Uses of Language Program) - Lego Therapy - Coping Cats - BLANKs Level Questioning - CogMed - Motional Assessments - TEACCH Approach • Promote a close working practice between school and CAMHS/CAMHS LD/Occupational Therapy • Staff trained to support bereavement and loss and able to adapt strategies to effectively support a wide variety of SEN. • Staffing strategically deployed based on the needs of the cohort • Access to SIT Intervention Coordinator • Robust, standardised process for staff debrief after crisis/behaviour perceived as challenging/traumatic event to allow for reflection, identification of next steps/review of needs
<p>Teaching and Learning</p>	<ul style="list-style-type: none"> • A differentiated curriculum and timetable offering a reflexive approach to learners’ changing needs, social emotional regulation and circumstances. • A bespoke pathway designed around the needs of individuals at any given time, to ensure targeted strategies are delivered to the most appropriate cohorts of learners. • Skilled teaching staff, experienced in planning for and delivering a differentiated, multi-sensory curriculum, which is inclusive for all. • Personalised Learning Goals planned for within medium term and short-term planning. • Environment and resources available, planned for, and utilised by teaching staff. • Library of SEMH specific resources, advice and guidance available nationally and signposted by schools. E.g Autism Level Up, NAC Wellbeing

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

<p>Identification and Review of Needs</p>	<ul style="list-style-type: none"> • All learners must have an EHCP which is reviewed annually. • All learners to have an identified SEMH target within their EHCP. • Termly PLG targets are designed for all learners and ongoing progress is measured against these to ensure they remain appropriate and relevant. • PLG targets are evidenced and reviewed on a termly basis. • PLG targets inform medium term and short term planning • Ongoing assessment of needs across all 4 areas of need. • Robust and effective referral process in place to support when targeted or specialist support is required. • Specialist Intervention Team available to support with school-based advice and guidance as well as offering observation and evidence for review/referral. • Social emotional Growth Profile/Motional/Positive Behaviour Plans, Wellbeing Plans in place
<p>Families and Young People</p>	<ul style="list-style-type: none"> • Pupil views collected regularly, highlighting strengths and areas for development. • Class Teams have regular communication between school and home (through home/school communication books/email/phone calls). • Training opportunities provided for families/carers including information workshops and coffee mornings. • Links shared to information and support networks. • Family Liaison Officer/pastoral team employed by the school. • Support for families with referral processes • Resources developed with parents/created at school are shared with home for consistent approaches.
<p>Communities and Inclusion</p>	<ul style="list-style-type: none"> • Community links established with local education providers including: <ul style="list-style-type: none"> - Nurseries - Primary schools - Secondary schools - Colleges - SEN provisions • Community links established with: <ul style="list-style-type: none"> - Local charities - Leisure centres - Care providers • Knowledge of learner's social emotional and regulation needs when accessing the community, with built in risk assessment and strategies to support these where appropriate. • Close working practice with community therapy teams and council teams. • Local settings to be considered alongside intervention strategies highlighted within individual plan.

Pathway 2

Social, Emotional, Mental Health (SEMH)

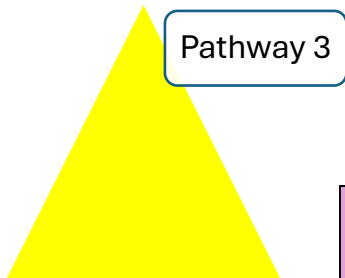
<p>Environmental and Resourcing</p>	<ul style="list-style-type: none"> • Timetabled access to therapeutic intervention spaces within all school environments related to pupils identified needs during and post intervention • A variety of interventions and plans to support learners with SEMH needs to access learning. • Development of bespoke resources directly linked to a child's SEMH needs and SIT led interventions <ul style="list-style-type: none"> - SERP (Sensory Engagement and Regulation Passport) - Motional Assessments - Talk My Way Holistic Communication Profile - SAfER plan (Sensory Engagement Activities for Regulation) • Access to planned sensory regulation groups via referral for specific regulation needs, including use of equipment requiring additional training • Resources to support those presenting with Self-harm/Self injurious Behaviour
<p>Workforce</p>	<ul style="list-style-type: none"> • School based Intervention Coordinator specialised in specific strategies/programmes to support SEMH needs. • Access to a team of highly specialised Intervention Coordinators across the Trust, including TIS practitioners. • Advice and guidance provided to the class teacher/teams based on assessment of needs and/or identified strategies. Targeted supervision for key staff. • Specialist Intervention Coordinator to observe, identify individual needs, and develop supporting documents for example SERP/Motional Assessment with clinical supervision. • Close working relationships with outside agencies such as AST, CAMHS/CAMHS LD • Child/young person may access specific therapeutic groups that meet their identified need such as sensory regulation/ Interoception/ Lego Therapy/ Social Communication Groups* • Child/young person may receive time specific, 1-1 targeted support/intervention developed collaboratively between SIT and any involved therapists** • Close working relationship with relevant school-based teams, including: <ul style="list-style-type: none"> - Pastoral teams - Behaviour leads/teams - Communication leads/teams - Safeguarding Team • Specialist Intervention coordinator will: <ul style="list-style-type: none"> - Plan, resource and deliver interventions - Collect evidence towards EHCP/ therapeutic/ SIT outcomes and record this on Efl to support teacher evidence gathering and information sharing. - Complete an Impact Evaluation that shows dissemination of recommendations and next steps.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> - Make further recommendation for referral to specialist service (Pathway 3) if appropriate. • SIT Manager, with support of clinical lead, through weekly triage and evaluation process: <ul style="list-style-type: none"> - Identifies need of referred pupil - Coordinates intervention and resourcing - Supervises and quality assures interventions - Identifies whole school/Trust CPD priorities - Supports with the sourcing and delivery of appropriate training across the Trust <p>Music/Yoga/Dance/Drama/Art therapy</p> <ul style="list-style-type: none"> • School based Intervention coordinators have a good working relationship with visiting/in house creative arts/wellbeing practitioners to ensure complimentary practice and holistic approaches to learners needs. • Where appropriate settings have access to therapy pets • Where appropriate settings have access to youth workers • Where appropriate bespoke services to support engagement are utilised e.g Bishops Forum/Take2 <p><i>*Group Intervention Plans are written in draft by SIT and adapted for cohort's specific needs by facilitating Intervention Coordinator. Group plans are reviewed by relevant supporting professional and ongoing supervision is provided.</i></p> <p><i>**SIT manager/Clinical Lead supervise intervention plan/identified outcomes. This can also be supervised by NHS/in house therapists if appropriate. These interventions identify any relevant EHCP/Therapy outcomes and combine these with a SIT outcome. These outcomes and any strategies/recommendations are evidenced throughout and evaluated at the end of each intervention block.</i></p>
<p>Teaching and Learning</p>	<ul style="list-style-type: none"> • Timetabled and outcome specific intervention support opportunities, both within whole class teaching and learning and on a small group/individual basis. • Dissemination of strategies/skills/understanding through modelling, training opportunities and discussion. • Ongoing assessment/record keeping and evidencing progress throughout intervention period. • Intervention Coordinator to work to ensure that recommendations are implemented and embedded in the classroom through initial evaluation and feedback and planned follow up.
<p>Identification and Review of Needs</p>	<ul style="list-style-type: none"> • Referral to SPT Specialist Intervention Team made by class team/school • Initial information gathering completed by Intervention coordinator and provided alongside SIT referral. • Referral taken to triage and route agreed as Pathway 2 • Appropriate supervisor agreed, this could include an external/in house therapist. • Ongoing progress review throughout intervention period (6 weeks) via EFL. • Effectiveness of intervention reviewed 6-8 weeks. (Impact Evaluation) • Progress and recommended action report completed* • Intervention and review of needs to be included in subsequent EHCP Annual review meeting. • Any pupil that requires amended targets, a member of the SIT will attend the Annual Review meeting. • Transition support and after care to next service/external services. • Opportunities for self-identification of SEMH Needs.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<p>*This may include return to Pathway 1; continuation of pathway 2 or escalation to Pathway 3 and referral made to external agency and/or specialised in house therapist.</p>
<p>Families and Young People</p>	<ul style="list-style-type: none"> • Child/young person's feedback/engagement, forms valuable aspect of impact evaluation • Teacher consultation with family during the Pathway 2 referral process including consent to join groups if deemed necessary by SIT or Class Team. • Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home in the form of documentation at the end of intervention block.* • SIT may facilitate specific parent/carer coffee mornings/training if an SEMH priority is identified by a school/setting • Develop opportunities for shared practice and outreach within the wider community, including parental engagement <p><i>*Unless specifically requested meeting/discussion with SIT, this information is shared with class teams and it is their responsibility to share this with parents/carers.</i></p>
<p>Communities and Inclusion</p>	<ul style="list-style-type: none"> • Ongoing consultations with external therapeutic agencies, sharing intervention strategies and progress. • SIT develop opportunities for shared practice and outreach within the wider community, accessing a variety of networks and groups. • SIT identify and develop research opportunities. • Facilitate focus groups and professional working parties in relation to trends identified in triage, for example Genital stimulation or ARFID.



Social, Emotional, Mental Health (SEMH)

Environmental and Resourcing	<ul style="list-style-type: none"> Specialist/specific therapeutic equipment/spaces in place to meet identified needs for learners receiving specialist input from external or in house therapy teams. Development of bespoke resources directly linked to SEMH needs. Resources specifically linked to SEMH needs stored on Sharepoint to be shared alongside interventions or to support pathway 1 provision.
Workforce	<ul style="list-style-type: none"> Referral for intervention/ assessment from external (NHS) OT, physiotherapists, CAMHS/LD, social care* This should include: <ul style="list-style-type: none"> Attendance at MDT meetings Effective information sharing and joint multi-agency outcomes Annual reports provided to inform EHCP outcomes/areas of need And/or internal referral made to in house OT/SaLT/Counselling to include: <ul style="list-style-type: none"> Consultation Comprehensive assessment and report with identified goals and outcome measures 1-1 therapy/ specific advice for pathway 2 intervention (SIT) or Pathway 1 provision (in school) Attend meetings as required Provide instruction/training/modelling as required Effective information sharing and joint multi-agency outcomes and working <p><i>*who will complete their own service responsibilities and pathways.</i></p>
Teaching and Learning	<ul style="list-style-type: none"> Timetabled intervention opportunities, both within whole class teaching and learning and on a small group/individual basis. Facilitated by Outside Agency/Therapist* Named therapist for discussion with class team. Reports and recommendations circulated to class team via SIT and SLT Link. Reports and recommendations to support outcome setting, including indicators of progress and listed provision in relevant area of need on EHCP annual review. Strategic support to embed therapeutic strategies within daily planning and classroom management. <p><i>*This may also include SIT as additional capacity and dissemination of specialist skills and knowledge</i></p>
Identification and Review of Needs	<ul style="list-style-type: none"> Appropriate referral to External Therapeutic/Mental Health Teams based on collated previous input/recommendations if appropriate. External referral made to appropriate multi-agency services by SIT or school SLT collaboratively with class teams. Consent gained and referral discussed with parents/carers alongside class team.

The Specialist Intervention Service Offer for settings across the Special Partnership Trust (SPT)

	<ul style="list-style-type: none"> • Individual needs assessment completed by external therapist/service. • Intervention plan/recommendations/report completed by external therapist. • Ongoing assessment/consultations throughout intervention period • Progress and recommended actions report completed (which may include continuation of support, or transfer to open access) • Intervention and review of needs to be included in subsequent EHCP review meeting. • If referral is not accepted then the pupil will be re triaged for SIT intervention to gather evidence of need and/or if felt necessary, following an (SLT) safeguarding meeting, a MARU referral may be made. • Evidence gathered for exceptional needs educational review meeting with the LA where requested by SENDCo or where a need is apparent • Some pupils will need to remain on pathway 3 due to the ongoing need from external agencies which education cannot provide in house (pathway 3 pupil- static) PS3 • Therapy teams will work closely with schools and SIT, ensuring open caseloads and related actions are shared. • SIT will facilitate termly meetings for focus caseloads to ensure sharing of information between Council, NHS, In house and school teams.
Families and Young People	<ul style="list-style-type: none"> • External practitioner and/or in house therapist consultation with family during the referral process • External practitioner and/or in house therapist to consult with families during the assessment phase if appropriate. • Strategies implemented at school during intervention phase to be shared with families and relevant resources shared with home- with the understanding that input has been provided with an educational engagement focus.
Communities and Inclusion	<ul style="list-style-type: none"> • Ongoing consultations with external agencies, sharing intervention strategies and progress. • Network map developed and updated to show services available to support with specific SEN needs. • SIT facilitates focus groups and development days to allow space for external services to meet face to face, discuss shared caseloads and identify priorities for development

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