Code of Practice
on the
Identification and Assessment
of Special Educational Needs

Operative Date: 1 September 1998
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GLOSSARY
PART I: INTRODUCTION - PRINCIPLES AND PROCEDURES

General

1.1 This Code of Practice addresses the identification, assessment and provision made for all children who may have special educational needs at some time in their school careers, or even earlier.

The Status of the Code

1.2 The Code is issued by the Department of Education under Article 4 of the Education (NI) Order 1996 and is operative from 1 September 1998. Schools and Boards, and others exercising relevant statutory functions (including the Special Educational Needs Tribunal), will need to be able to demonstrate, in their arrangements for children with special educational needs, that they are fulfilling their statutory duty under Article 4(2) of that Order to have regard to the Code. In the case of schools, the Education and Training Inspectorate will consider, in the context of their inspections, the effectiveness of schools’ policies and practices and the extent to which schools have had regard to the Code.

The Format of the Code

1.3 The Code should be read as a whole, so that a full picture can be gained of the various parts of the processes, the roles of all concerned, and the particular considerations affecting provision for children at different stages in their lives and school careers. For ease of access it is, however, set out in six parts, as follows:-

Part I: Introduction: Principles and Procedures

Part II: Stages 1-3: School-Based Stages of Assessment and Provision

Part III: Stage 4: Statutory Assessments

Part IV: Stage 5: Statements

Part V: Children Under Compulsory School Age

Part VI: The Annual Review of Statements

The Coverage of the Code

1.4 The term “special educational needs” is defined in the legislation as “a learning difficulty which calls for special educational provision to be made”. “Learning difficulty” means that the child has significantly greater difficulty in learning than the majority of children of his or her age, and/or has a disability which hinders his or her use of everyday educational facilities (or, where the child is below school age, would hinder such use if the child were of school age). “Special educational provision” means educational provision which is different from, or additional to, the provision made generally for children of comparable age.
1.5 The Code addresses all types of learning difficulties, ranging from children with short-term problems, where sensibly adapted classroom provision may meet their needs, to the most severe, where a statement of special educational needs and specialised teaching, equipment or other provision may be needed. It provides guidance for Education and Library Boards and the Boards of Governors of grant-aided schools - and to all those who help them, including the health services and social services - on the discharge of their statutory functions.

The Principles of the Code

1.6 The fundamental principles of the Code are that:-

- the needs of all pupils who may experience learning difficulties during their school careers must be addressed; the Code recognises that there is a continuum of needs and a continuum of provision which may be made in a variety of forms;
- children with special educational needs require the greatest possible access to a broad and balanced education, including the Northern Ireland Curriculum;
- the needs of most pupils will be met in mainstream schools, and without a statutory assessment or a statement. Children with special educational needs, including those with statements, should, wherever appropriate and taking into account the wishes of their parents, be educated alongside their peers in mainstream schools;
- even before a child reaches compulsory school age, he or she may have special educational needs requiring the intervention of the Boards as well as the health services;
- the knowledge, views and experience of parents are vital. Effective assessment and provision will best be secured where there is partnership between parents and schools, Boards and other agencies.

Essential Practices and Procedures

1.7 The essential practices and procedures which the Code embodies are that:-

- children with special educational needs should be identified as early as possible and assessed as quickly as is consistent with thoroughness;
- provision for children with special educational needs should be made by the most appropriate agency. In most cases this will be the child's mainstream school, working in partnership with the parents, and no statutory assessment will be necessary;
- Boards should complete assessments and statements as quickly as thorough consideration of the issues allows;
- Boards must produce clear and thorough statements, setting out the child's educational and non-educational needs, the objectives to be secured, the provision
to be made and the arrangements for monitoring and review; they must ensure the annual review of the special educational provision made for the child and the monitoring and revision of educational targets;

- the ascertainable wishes of the child should be considered, in the light of his or her age and understanding;

- there must be close co-operation between all the agencies concerned and a multi-disciplinary approach to the resolution of issues.

The Five Stage Approach

1.8 In recognising that there is a continuum of needs, the Code sets out a five stage approach to the identification of children having learning difficulties, the assessment of their special educational needs and the making of whatever special educational provision is necessary to meet those needs. The first 3 stages are based in the school, calling as necessary on external specialists; at Stages 4 and 5 the Board shares responsibility with schools.

Stage 1: teachers identify and register a child's special educational needs and, consulting the school's SEN co-ordinator, take initial action.

Stage 2: the SEN co-ordinator takes lead responsibility for collecting and recording information and for co-ordinating the child's special educational provision, working with the child's teachers.

Stage 3: teachers and the SEN co-ordinator are supported by specialists from outside the school.

Stage 4: the Board considers the need for a statutory assessment and, if appropriate, makes a multi-disciplinary assessment.

Stage 5: the Board considers the need for a statement of special educational needs; if appropriate, it makes a statement and arranges, monitors and reviews provision.

1.9 Consistent with the need for early identification, the Code also deals in Part V with how these school-focused principles, practices and procedures should be applied in the case of children below compulsory school age. The final Part discusses procedures surrounding the annual review of statements, including the key review at age 14+.
PART II: SCHOOL-BASED STAGES OF ASSESSMENT AND PROVISION

Introduction

2.1 At the heart of the work of every school and every class lies a cycle of planning, teaching and assessing. These general arrangements in a school take account of the wide range of abilities, aptitudes and interests which children bring to school. Most children learn and progress well within these arrangements; those who have difficulty in doing so may have special educational needs.

2.2 The proportion of children with special educational needs will vary from area to area and from time to time. Generally, about 20% of children may have special educational needs at some stage in their school careers. In nearly all cases, these needs will be met by their schools, if necessary with outside help. In only about 2% of cases should the child’s needs be such as to require a statement of special educational needs.

Duties of Boards of Governors

2.3 Article 9 of the Order requires that the Board of Governors of every grant-aided school must:

- determine, and keep under review, its policy in relation to the provision of education for children with special educational needs. In so doing, when it seems necessary or desirable for co-ordinating provision for children with special educational needs, it should consult the Board and other Boards of Governors and, in the case of a Catholic maintained school, the Council for Catholic Maintained schools (CCMS);

- have regard to its SEN policy in carrying out its functions; and

- report annually to parents on the steps taken to implement the school’s SEN policy.

2.4 Article 8 of the Order requires that the Board of Governors of each mainstream school must also report annually to parents on:

- any special arrangements for the admission of pupils who have special educational needs but for whom no statement is maintained;

- the steps taken to prevent pupils with special educational needs from being treated less favourably than other pupils; and

- the facilities provided to assist access to the school by pupils with special educational needs.

2.5 Article 8 of the Order also places on the Board of Governors of each mainstream school a number of specific duties towards all pupils registered at the school who have special educational needs. These are:
• to endeavour to secure that the necessary special educational provision is made for
  them;
• to secure that their needs are made known to all who are likely to teach them;
• to secure that teachers in the school know the importance of identifying their special
  educational needs and providing for them; and
• to ensure that they join in the activities of the school together with pupils who do not
  have special educational needs, in so far as that is reasonably practical and compatible
  with their receiving the necessary special educational provision, the efficient
  education of other children in the school and the efficient use of resources.

2.6 Many of these statutory duties are broadly stated, and the precise way in which they are
implemented will depend upon the individual circumstances of each school, eg age range,
organisation, size and location. In deciding the approaches to adopt, however, the Board of
Governors of every grant-aided school must, by virtue of Article 4(2) of the Order, have regard to
the provisions of this Code.

Allocation of Responsibilities in Mainstream Schools

2.7 In allocating SEN responsibilities within schools, it should be borne in mind that:-

• the Board of Governors should, in co-operation with the principal, determine the
  school’s general policy and approach, establish appropriate staffing and funding
  arrangements and maintain general oversight of the school’s work. It might be useful,
  particularly in larger schools, for an SEN committee to be appointed;
• the principal has responsibility for the day-to-day management of all of the school’s
  work, including its SEN provision, and should keep Governors informed and work
  closely with the SEN co-ordinator;
• the SEN co-ordinator, working closely with other teachers, should have responsibility
  for the day-to-day operation of the school’s SEN policy and for co-ordinating SEN
  provision; and
• teaching staff should be involved in the development of the school’s SEN policy and
  all staff should be made familiar with its SEN procedures.

Information (Including Information about SEN Policies)

2.8 Schools should make the following information available in the school prospectus and
otherwise as appropriate:-

a. Basic information about the school’s special educational provision:-

• the objectives of the school’s SEN policy;
• the name of the person responsible for the day-to-day operation of SEN policy;
• the arrangements for co-ordinating SEN provision;
• admission arrangements;
• any SEN specialism the school may have, and any special units;
• any special facilities which assist access to the school.

b. Information about the school’s policies for identification, assessment and provision for all pupils with special educational needs:-
• the allocation of the resources the school devotes to special education;
• identification and assessment arrangements and review procedures;
• arrangements for providing access to a balanced and broadly based curriculum, including the Northern Ireland Curriculum;
• arrangements for integration within the school as a whole;
• arrangements for considering complaints by parents about special educational provision within the school.

c. Information about the school’s staffing policies and partnership with other bodies, as they relate to its provision for children with special educational needs:-
• details of any specialised training courses undertaken and SEN qualifications held by teachers;
• use made of teachers, facilities and services from outside the school;
• arrangements for involving parents;
• links with other schools, institutions of further and higher education and other services or voluntary organisations.

2.9 In addition to the information that the Order requires to be included, the annual report of the Board of Governors of each grant-aided school should also provide information on:-
• the success of its SEN policy;
• any significant changes in the policy;
• the outcome of any consultation on the policy which has taken place with the Board, CCMS or other schools; and
2.10 In commenting on the success of its SEN policy for its annual report, the Board of Governors should consider the effectiveness of the school’s systems for:-

- identification
- assessment
- provision
- monitoring and record-keeping
- use which has been made during the previous year of outside support services and agencies.

2.11 In so doing, the Board of Governors may find it useful to establish evaluation criteria for the various aspects of its policy, and to consult other schools and relevant support services. The school should consider whether amendments to its policy are needed in the light of the evaluation.

**The SEN Co-ordinator**

2.12 In all mainstream schools, a designated teacher should be responsible for:-

- the day-to-day operation of the school’s SEN policy;
- responding to requests for advice from other teachers;
- co-ordination of SEN provision, including, in secondary schools, ensuring appropriate liaison with the various teachers who will teach any given child with special educational needs;
- maintaining an SEN register, with records on pupils with special educational needs;
- liaison with parents of children with special educational needs;
- establishing the SEN in-service training requirements of the staff, and contributing as appropriate to their training;
- liaison with external agencies.

2.13 This is the role of the SEN co-ordinator. In a small school, one person may take on this role, possibly the Principal or Vice-Principal. In larger schools, there may be an SEN co-ordinating or learning support team. The time and attention which SEN co-ordinators will need to devote to their responsibilities will depend on the circumstances of particular schools; Boards of Governors and Principals should therefore give careful thought to the SEN co-ordinator’s teaching commitments and responsibilities. Senior management should ensure that structures within the school allow the SEN co-ordinator’s functions to be carried out most
Identification and Assessment

2.14 It is important that children's special educational needs are identified at an early stage. The earlier that action is taken, the more responsive the child is likely to be. If a difficulty proves transient, the child will subsequently be able to learn and progress normally; if the difficulties are less responsive to provision made by the school, an early start can be made in considering any necessary additional provision that may be needed to support the child's progress. To assist in early identification, use should be made of all available indicators, including formative as well as summative assessment, and information obtained from parents. A school's practices may themselves make a positive difference through teaching approaches which take account of the abilities and needs of individual children. Schools may need to reconsider policies and practice in light of any changes in the incidence of pupils' special educational needs.

Children Not Fluent in the Medium of Instruction

2.15 The identification and assessment of the special educational needs of children whose first language is not English (and/or Irish in the case of Irish-medium schools) requires very careful consideration. Lack of competence in the language used in school must not be equated with, or allowed to mask, learning difficulties as understood in this Code. The child's needs should be considered in the context of his or her home, language, culture and community. Where necessary to ensure full understanding of the measures the school is taking, use should be made of interpreters and translators; and assessment tools should, as far as possible, be culturally neutral and applicable to children from a range of home backgrounds.

The Five Stages

2.16 This Code of Practice, acknowledging that there is a continuum of special educational needs, sets out a five stage approach, within which responsibility for pupils within Stages 1-3 lies at school level, (with close involvement by the Board at Stage 3) and with both Boards and schools at Stages 4 and 5.

2.17 Progress in response to action taken at one of the first 3 stages may well mean that the pupil will not have to move on to the next. Only for those children whose progress continues to cause concern at any one stage will the school need to move to the next stage. A relatively large proportion of children may be helped by the Stage 1 procedures, with smaller proportions at Stages 2 and 3. Only where children do not progress even with support at Stage 3, ie only in a very small minority of cases, should the school consider referral to the Board with a view to a statutory assessment. Information on the child's learning difficulty, and the special educational provision made up to and including Stage 3, will provide evidence for the Board in deciding whether to make a statutory assessment at Stage 4.

2.18 These stages will not usually be steps towards statutory assessment; nor are they hurdles to be crossed before a statutory assessment can be made. They are means of informing decisions to be made by schools, in consultation with parents, as to what special educational provision is
necessary to meet the child's needs. There may be cases where action at Stage 2 or 3 will be appropriate even if no action has previously been taken at Stage 1.

Record Keeping

2.19 Schools should keep a register of all children with special educational needs, recording the steps taken to meet those needs and the progress which has resulted. The SEN co-ordinator should ensure that these records are properly kept and available as needed. Records at each stage will inform the school’s approach at the next; and, where a Stage 4 referral is necessary, they should be made available to the Board. It would be helpful to have proformas agreed between Boards and schools for recording SEN work at Stages 1, 2 and 3.

Training

2.20 Schools should ensure that appropriate arrangements are in place for the in-service training and professional development of staff (where appropriate, including non-teaching staff) to help them work effectively with pupils with special educational needs. Such arrangements might appropriately be included in the school’s development plan. Schools and Boards should consider the particular training needs of SEN co-ordinators and Governors in the light of this Code.

Partnership with Parents

2.21 The relationship between the parents of a child with special educational needs and their child’s school has a crucial bearing on the child’s educational progress and the effectiveness of any school-based action. School-based arrangements should therefore ensure that assessment reflects a sound and comprehensive knowledge of a child and his or her responses to a variety of carefully planned and recorded actions which take account of the wishes, feelings and knowledge of parents at all stages. Children’s progress will be diminished if their parents are not seen as partners in the educational process with unique knowledge and information to impart. Professional help can seldom be wholly effective unless it builds upon parental involvement and provides reassurance that account is taken of what parents say and that their views and anxieties are treated as intrinsically important.

2.22 Stages 1-3 should therefore draw upon parents’ own distinctive knowledge and contribute to their own understanding of how best to help their child. Schools should not interpret any failure to participate as indicating a lack of interest or willingness. The identification of a special educational need may be alarming to parents; they may feel that they are being blamed for their child’s difficulties when the school first raises questions with them; in some instances they may consider that their early concerns were not given enough attention. Nonetheless, schools should seek at all times to foster the active participation and involvement of parents, offering encouragement to recognise their own responsibilities towards their child and emphasising the benefits of working in partnership with the school and others involved.

2.23 If the child has a behavioural difficulty, or is following a developmental activity which requires a structured approach in school, reinforcement at home by parents can be particularly important. Parents may become discouraged by their child’s continuing difficulties at home and at school, and feel themselves to be inadequate in dealing with the difficulty; in such cases,
Governors, principal and SEN co-ordinator should consider how the school can best offer support.

2.24 Schools should be aware of the statutory definitions of ‘parent’ and ‘parental responsibility’ (these are summarised in the Glossary) and should know who is to be regarded as a parent of each child for purposes of consulting on progress. Adults in more than one household may qualify as parents. All persons so qualified will have rights and responsibilities towards the child, though for practical purposes, a school may best be able to discharge its duties by dealing with the parent who has day-to-day care of the child. Where parents cannot agree about matters concerning their child’s education, they can apply to the Courts for resolution.

2.25 Arrangements for informing and involving parents of children with special educational needs should include information about:-

- the school’s SEN policy;
- the support available within the school and Board;
- parents’ involvement in assessment and decision-making, emphasising the importance of their contribution; and
- any relevant health or social services contacts, or voluntary organisations which might provide information or counselling.

2.26 This information should be available on tape, or provided in personal interviews, for parents who may have literacy or communication difficulties. It should be borne in mind that interpreters can be provided for parental interviews by certain organisations (eg the Royal National Institute for the Deaf and the Chinese Welfare Association), and that their costs will be met centrally by the Board.

2.27 Schools should ensure that adequate arrangements and procedures are in place for recording and acting upon parental concerns. These should include procedures for involving parents when a concern is first expressed within the school and for acknowledging their views in assessment and subsequent reviews. Where practicable, having regard to accommodation constraints, a room in the school might be designated for use as a parents’ room.

Involving the Child

2.28 As far as the child’s levels of maturity and understanding will allow, all reasonable efforts should be made to ascertain the views of the child or young person about his or her own learning difficulties and education, offering encouragement where necessary. Young people are more likely to respond positively to intervention programmes if they understand the rationale for them and are given some personal responsibility for their own progress. Such positive involvement can also enhance self-image and confidence.

2.29 In particular, schools should consider how best to:-

- involve pupils in decision-making processes which affect their own assessment,
provision and progress;

- determine pupils’ levels of participation, taking into account approaches to assessment and intervention which are suitable for their age, ability, past experiences and prior learning;

- record pupils’ views in identifying their difficulties, setting goals, agreeing a development strategy, monitoring and reviewing progress;

- involve pupils in implementing their individualised education plans.

Co-operation with Health and Social Services

2.30 Effective action on behalf of children with special educational needs will often depend upon close co-operation between education and health and social services, who have statutory duties to help each other. Each HSS Trust should designate an officer to act as a point of reference in dealing with parents, officers of Education and Library Boards and other professionals who might be involved.

Child Health Services

2.31 Where a school suspects that a child’s difficulty may be related to a medical condition, disability or developmental delay, it should seek parental consent to consult the school doctor or the child’s GP. If a problem is confirmed, the doctor should notify the designated officer of the HSS Trust.

2.32 Conditions such as hearing or visual impairment may, if undiagnosed, lead to the child losing interest and becoming alienated. Even when a known medical condition is effectively managed by medication, there may be secondary effects, or occasional side effects, which may adversely influence the child’s ability to participate fully in classroom activities and benefit from the provision being made.

2.33 Children may be receiving treatment for diseases, such as childhood cancers, which will periodically affect their ability to participate fully and regularly in the school’s curriculum and other arrangements. Children with identified medical needs will not necessarily have an associated learning difficulty, but the consequences of their illness or condition, often combined with parental anxiety, may lead to difficulties if there is not close collaboration between the school, the relevant child health services, and parents.

2.34 Children’s progress may also be affected by emotional and behavioural difficulties, sometimes related to periods of depression or other mental health problems. Schools may also identify signs of eating disorders such as anorexia or bulimia. Children may be affected by peer relationships, such as bullying or difficulties in establishing personal relationships, which may be associated with emotional and social difficulties and may affect the child’s future health, development and education.

2.35 Schools should therefore seek to ensure that their pastoral care arrangements provide opportunities for pupils to discuss health-related and other problems with the relevant
professionals. They should liaise closely with the child's family in providing maximum support for the child.

2.36 Medical information about a child should not be disclosed without the consent of the parents and, where he or she has sufficient understanding, the child. Exceptionally, children under 16 who are judged to be competent by their doctors, may give consent independently of their parents. When they first form an opinion that a child has special educational needs, doctors may alert parents and children to the possibility that they will be asked to give information to schools and the Board and may indeed secure the necessary consent to disclosure at that stage.

Social Services

2.37 HSS Trusts have statutory duties to provide services for children regarded as being ‘in need’, as defined in the Children Order (see Glossary). Where such children also have special educational needs, the Children Order allows an integrated approach to be taken to meeting their educational, health and welfare needs. The co-operation of schools is required where children are ‘in need’ or at risk of significant harm (eg through abuse), although this would not automatically mean that the child had special educational needs.

2.38 If a child is being looked after by an HSS Trust, the Trust will maintain a Child Care Plan which will include information on the educational arrangements made for the child (including any special needs he or she may have) and which will involve parents and the child in forward planning.

2.39 Children living away from home may have had disrupted school lives because of frequent moves; they may have experienced trauma through family breakdown or ill-health and the disruption of moving from a known area; or they may have experienced homelessness with frequent moves between short-term accommodation. Such children will need careful observation and support. Where a child has missed developmental or health checks, the school health service should be consulted if there is any doubt about the child's health or well-being.

2.40 School principals, in consultation with SEN co-ordinators, should seek to ensure the effectiveness and confidentiality of the arrangements in place for:-

- keeping medical or welfare information on children with special educational needs;
- drawing together further information from those involved in the care, health and welfare of children; for example, GPs; health visitors; community nursing services; community paediatricians; child and adolescent mental health services; physiotherapy or speech and language therapy services;
- transferring relevant medical or welfare information between nursery and primary, or primary and post-primary schools;
- co-operating with health professionals to eliminate underlying medical causes as a possible explanation for observable learning and behaviour difficulties;
identifying early signs of depression, abnormal eating behaviour, and substance misuse;

liaising with HSS Trusts to register concern about a child’s welfare; or where the child is looked after by a HSS Trust; or to obtain information on services provided for children ‘in need’.

SEN Support Services

2.41 SEN support services provided by Boards can help schools identify, assess and make provision for children with special educational needs. Boards should notify schools of the services and expertise which they can arrange or make available in order to meet children's needs, with or without statements.

SCHOOL-BASED STAGES

2.42 The school-based stages should be seen as a continuous and systematic cycle of planning, action and review within the school to enable the child with special educational needs to learn and progress. The following paragraphs offer guidance to Boards and schools as to the detailed procedures to be followed at Stages 1-3. It will be for individual schools, in consultation with Boards, to adopt the procedures most suited to their circumstances so as to fulfil most effectively their duties towards pupils with special educational needs.

2.43 Regard should be had to the following key principles:

- provision for a child with special educational needs should match those needs;
- there should be careful recording of a child's needs, the action taken and the outcomes;
- appropriate consideration should be given to the ascertainable wishes and feelings of the child;
- parents should be closely consulted;
- outside specialists should be involved where appropriate at any stage, but particularly preceding any referral to the Board for a statutory assessment.

Use of the Term “Class Teacher”

2.44 For convenience, the term “class teacher” is used in this section of the Code to include certain teachers in secondary schools, in addition to its normal application in the primary school context. In secondary schools, the Governors and principal should ensure that each class, or teaching group, has a teacher who has specific responsibility for the pastoral and learning welfare of that group of pupils; and each teacher so designated is included within the definition of “class teacher” in this section. The identity of the class teacher responsible for each group should be made known to all staff. Where any teacher suspects that a child may have learning difficulties, he or she should draw this to the attention of the class teacher in the first instance.
STAGE 1

2.45 Stage 1 begins with the concern that a child may have special educational needs, normally expressed either to or by the class teacher. The class teacher has overall responsibility and should inform the SEN co-ordinator and the principal and consult the child’s parents.

Roles and Responsibilities

2.46 The class teacher should:

- collect and record information about the child, consulting other teachers as appropriate, and make an initial assessment of the child’s special educational needs;
- provide or arrange special help within the normal curriculum framework, exploring ways in which increased differentiation of class work, alternative teaching and learning strategies or different classroom organisation might better meet the child’s needs;
- monitor and review progress.

2.47 The SEN co-ordinator should:

- ensure that the child is included in the school’s SEN register;
- help the class teacher gather information and assess the child’s needs;
- advise and support the child’s teacher or teachers as necessary.

Information Required

2.48 The information required about the child includes:

from the school

- class records, including relevant records from all teachers who teach the child and any from previous schools;
- attainments in relation to the Northern Ireland Curriculum;
- standardised test results or profiles;
- Records of Achievement, where appropriate;
- observations about the child’s behaviour;

from the parent

- views on the child’s health and development;
• perceptions of the child’s performance, progress and behaviour at school and at home;
• factors contributing to any difficulty;

from the child
• personal perception of any difficulties and how they might be addressed;

from other sources
• any information already available to the school from health or social services or any other source.

2.49 This information will identify the perceptions of those concerned with the child and should reveal any immediate educational concerns. The class teacher should consult the SEN co-ordinator to determine whether to continue the existing educational arrangements, to seek advice and support, or to provide special help.

Action to be Taken

2.50 If it is decided that no further action is needed, the class teacher should record this and inform the child’s parents. The child’s name should still be kept on the SEN register until progress no longer gives cause for concern. If it is clear at the outset that information additional to that available to the school is required or that action at Stage 1 would be inadequate, the child should move straight to the appropriate stage. If it is decided that the child could benefit from a period of special attention and, in particular, carefully differentiated teaching within the normal classroom work, the nature and aims of such provision should be recorded, together with a note of targets, monitoring arrangements and review date.

Review

2.51 Parents should always be informed of proposed action and any review date. Review should focus on the child’s progress, the effectiveness of the special help and possible future action. The outcome of the review may be that:

• the child continues at Stage 1

If progress has been satisfactory, the class teacher should set targets to be achieved by the next review. If progress remains satisfactory after 2 reviews, the period between reviews may be extended; or

• the child no longer needs special help

If progress remains satisfactory for at least 2 review periods, the class teacher may decide that the child no longer needs special help; or
• the child moves to Stage 2

If, following one - or at most two - review period(s) at Stage 1, progress has not been satisfactory, the class teacher and SEN co-ordinator may decide to move the child to Stage 2.

2.52 Parents’ evenings and similar occasions may allow parents to contribute to Stage 1 review. Parents should always be told of the outcome and of any steps they can take to help their child at home. It is particularly important for schools to discuss with parents any intention to move the child to Stage 2.

STAGE 2

2.53 Stage 2 begins with a decision either at a Stage 1 review, or following discussions between teachers and parents, to proceed with early intensive action.

Roles and Responsibilities

2.54 The SEN co-ordinator takes the lead in assessing the child’s learning difficulty, and planning, monitoring and reviewing the special educational provision, working with the child’s teachers who remain responsible for working with the child in the classroom.

Information Required

2.55 All the available information should be reviewed, including that gathered at Stage 1. The SEN co-ordinator should seek advice from the school doctor or the child’s GP as to whether there may be educational implications connected with the child’s health; advice on any involvement with the child or family by the HSS Trust and/or the educational welfare service; and any other necessary information from other agencies closely involved with the child, including voluntary organisations. On this basis, the SEN co-ordinator should consider whether to seek further advice before proceeding to draw up an individualised education plan. If further advice is required on a particular area of the child’s development, the SEN co-ordinator should record the advice being sought and the interim arrangements made for the child.

Education Plan

2.56 The SEN co-ordinator, working with the class teacher and other subject teachers as appropriate, should ensure that an education plan is drawn up for the child, taking into account as far as possible the child’s own views on his or her difficulties and the proposed provision. The education plan should build on the curriculum the child is following alongside other pupils and should make use of other, readily available materials. The plan should usually be implemented fully, or at least in large part, in the normal classroom setting. The SEN co-ordinator should, therefore, ensure close liaison with and between all relevant teachers. Parents should also be told of the action to be taken and advised how best to help their child at home.

2.57 The education plan should set out:-

• the nature of the child’s learning difficulties;
• the special educational provision required, including staff involved, frequency of support and any specific programmes, activities, materials or equipment;
• the nature of the support required from parents at home;
• the targets to be achieved in a given time;
• any pastoral care or medical requirements;
• the monitoring and assessment arrangements;
• the review arrangements and date.

Review

2.58 The review should normally be conducted by the SEN co-ordinator, in consultation with the class teacher and, where possible, parents. It should focus on the child’s progress, taking account of his or her views, and in particular the effectiveness of the education plan and the need for any further advice and future action.

2.59 The outcome of the review may be:-

• **the child continues at Stage 2**
  If progress has been satisfactory, a new or revised education plan may be drawn up. This should set targets in the light of the experience of the first plan. If progress remains satisfactory after 2 review periods, the SEN co-ordinator may extend the period between reviews; or

• **the child reverts to Stage 1 or no longer needs special help**
  If progress continues to be satisfactory for at least 2 review periods, the SEN co-ordinator may decide that the child no longer needs special educational provision under Stage 2. The child may then be recorded as having special educational needs at Stage 1. If provision has been wholly successful, the child may no longer need special help; the child’s name should still be kept on the SEN register until there is no longer concern about progress; or

• **the child moves to Stage 3**
  If after one - or possibly two - review periods at Stage 2, progress is not satisfactory, additional expertise should be sought and the child should move to Stage 3. It is particularly important to talk with parents in person before moving the child to Stage 3.

STAGE 3

2.60 Stage 3 begins with a decision either at Stage 2 review, or following discussions about an
initial concern between the SEN co-ordinator, principal, teachers and parents, that early intensive action with external support is immediately necessary.

Roles and Responsibilities

2.61 The SEN co-ordinator continues to take a leading role, working closely with the child’s teachers and sharing responsibilities for the child with the appropriate external specialist services. Part III of this Code recommends that Boards should obtain information from schools about pupils who are at Stage 3. To ensure that such records are up-to-date, the principal or SEN co-ordinator should advise the special education section of the Board whenever a child moves to Stage 3.

Information Required

2.62 On the basis of information and specialist views obtained at this stage, the SEN co-ordinator should decide whether further professional advice is needed before drawing up a new education plan. The SEN co-ordinator should record any further advice being sought and the interim arrangements being made.

Education Plan

2.63 The new education plan should set out revised strategies for supporting the child’s progress and arrangements for monitoring and review. It should be developed with the help of outside specialists but should be implemented, as far as practicable, in the normal classroom setting. The SEN co-ordinator should ensure close liaison with and between relevant teachers.

2.64 The education plan should ensure a co-ordinated approach which takes due account of the child’s previous difficulties. It should set out in particular:

- the nature of the child’s learning difficulty;
- the special educational provision required, including school staff and other external specialists involved, frequency of support and any specific programmes, activities, materials or equipment;
- the nature of the support required from parents at home;
- the targets to be achieved in a given time;
- any pastoral care, medical or paramedical requirements;
- the monitoring and assessment arrangements;
- the review arrangements and date.

2.65 The SEN co-ordinator, working with the class teacher and other subject teachers as appropriate, and with the help of the external specialist(s), should ensure that the plan is drawn up. Together they should consider a range of different teaching approaches and appropriate
support materials, including the use of information technology.

2.66 The specialist(s) may be involved in working with the child directly; may act in an advisory capacity, supporting the class teacher or subject teachers in implementing the plan; or may recommend additional specialist support. In some instances medical treatment or different management of the child in school, based on medical advice, may considerably reduce the child’s special educational needs. Medical advice may include advice from the school health service, the child’s GP and from therapists.

2.67 Specific targets should be set for all aspects of the education plan and special monitoring and assessment arrangements made. Some of that assessment may be conducted by outside specialists, for example, educational psychologists. Parents should always be informed of the action the school proposes to take, and the child should be involved as far as practicable in the drawing up of the plan to meet his or her needs and the setting of educational targets.

Review

2.68 The SEN co-ordinator should set a review date, normally within a term; should determine, in consultation with the child’s teachers and the external specialists involved, arrangements for monitoring progress against the targets established in the plan; and should inform the parents about any special arrangements that will apply to their child and for how long.

2.69 The SEN co-ordinator should convene Stage 3 review meetings. The first Stage 3 review should focus on the child’s progress, the effectiveness of the education plan, the need for any further advice and future action, in particular whether the child is likely to be referred in future for statutory assessment. At the review, external specialists should consider whether the analysis of the child by the school and the subsequent action is appropriate, and offer relevant advice. Other specialists may need to be brought in as a consequence of that advice.

2.70 The outcome of the review may be that:-

- the child continues at Stage 3

If progress has been satisfactory, a new education plan may be drawn up. This should set new targets in the light of the experience of the first plan. If progress remains satisfactory after 2 review periods, the SEN co-ordinator, consulting the principal and the external specialists involved, may decide to increase gradually the period between reviews; or

- the child reverts to Stage 1 or 2

If progress continues to be satisfactory for at least 2 review periods, the SEN co-ordinator, consulting the principal and external specialists, may decide that the child no longer needs external specialist intervention and special educational provision under Stage 3. The child may then be recorded as having special educational needs at Stages 1 or 2, and action appropriate to those stages taken; or
• the principal considers referring the child to the Board for statutory assessment

If, by the second Stage 3 review, the child’s progress is not satisfactory, the principal, on the advice of the SEN co-ordinator, should consider advising the Board that a statutory assessment might be necessary.

2.71 Parents should always be invited to and encouraged to attend Stage 3 reviews, and should always be told the outcome. Where there is any question of the child being referred for a statutory assessment, parents should always be consulted in person.

**Consideration of Referral for Statutory Assessment**

2.72 By the time the principal considers referring the child for statutory assessment, there should be:-

**written information on:-**

• educational and other assessments, including any carried out by an advisory specialist support teacher or an educational psychologist;

• views of the parents and of the child;

• the child’s health;

• any involvement by social services or education welfare service;

**written evidence of:-**

• the school’s action under the 3 Stages;

• education plans for the child;

• the outcomes of regular reviews;

• the nature of the involvement of other professionals.

2.73 Where a school refers a child for statutory assessment, the principal may give a special direction either modifying or disapplying the Northern Ireland Curriculum for the child for a period of up to 6 months. Given the right of all pupils to the maximum possible access to the statutory curriculum and its flexibility, such directions should be very rare. In very exceptional circumstances, this may need to be extended to one year; any further extension would require the approval of the Department. In all cases, the Board should be notified.

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1 See the Education (Curriculum) (Temporary Exceptions) Regulations (NI) 1990 (SR&O 1990 No 288)
2.74 Principals should not prejude the outcome of any statutory assessment and should bear in mind that it may be more difficult to carry out an assessment if the child has been excepted from aspects of the statutory curriculum. It should be noted that when the Board is considering whether to make a statutory assessment or is conducting an assessment, the school, working in partnership with the parents and support services, remains responsible for the child’s education, including his or her special educational provision. This is equally true where the child is absent from school for prolonged periods, for example because of illness or while on a period of placement at a behavioural referral unit.

2.75 The information on the child’s learning difficulty and the evidence of the special educational provision made at Stages 1-3 will form the basis of the Board’s consideration at Stage 4 as to whether a statutory assessment is necessary. It will facilitate a speedy decision if the Board’s support services and, in particular, its educational psychologists have been involved in assessing the child and reviewing provision at Stage 3.

Summary

2.76 The action involved in the 3 school-based stages is summarised in the following charts.
SCHOOL-BASED STAGES: STAGE 1

Initial concern is expressed by teacher, parent, health or social services professional

Class teacher informs SEN co-ordinator, who registers child’s special educational needs

Class teacher gathers information, makes an initial assessment and informs parents

- No special education help needed, but keep under review
- Further advice and support clearly needed: go straight to appropriate stage
- Give special help within normal classroom setting, keeping record of nature and aims of such provision

When no longer any cause for concern, child removed from SEN register and parents informed

Review progress, with appropriate parental involvement

Move to Stage 2
Set new targets for review
SCHOOL-BASED STAGES: STAGE 2

Stage 1
Review

Initial concern is expressed by teacher, parent, health or social services professional

Class teacher informs SEN co-ordinator, who registers child’s special educational needs and agrees that Stage 2 advice and support is needed

SEN co-ordinator, with class teacher, reviews available information and obtains information from outside agencies

SEN co-ordinator seeks any necessary further advice

SEN co-ordinator and teacher(s) draw up individualised education plan (EP), and inform parents

EP implemented

Review progress, with appropriate parental involvement

Child moves to Stage 3

Child reverts to Stage 1 or no longer needs special help

Child continues at Stage 2; SEN co-ordinator and teacher(s) draw up revised EP
SCHOOL-BASED STAGES: STAGE 3

Stage 2 Review

Initial concern is expressed by teacher, parent, health or social services professional

Class teacher informs SEN co-ordinator, who registers child’s special educational needs and agrees, having consulted principal, that intensive action with specialist support is immediately necessary

SEN co-ordinator, with class teacher, reviews available information, consults support services and informs Board

SEN co-ordinator seeks any necessary further advice

SEN co-ordinator, teacher(s) and support services draw up EP, and inform parents

EP implemented

Review progress, preferably in the presence of parents

Child reverts to Stage 2 or Stage 1

Refer to principal

Principal requests statutory assessment

Child remains at Stage 3, SEN co-ordinator, teacher(s) and support services draw up revised EP
PART III: STATUTORY ASSESSMENT - STAGE 4

Introduction

3.1 The needs of the great majority of children with special educational needs will be met under the school-based stages, without the statutory involvement of the Board. In a small minority of cases, however, children’s needs will be such that the Board, working with the school, parents and any other agencies, will need to consider whether a statutory assessment of the child’s special educational needs is necessary. Stage 4 involves reaching that decision; and if appropriate, conducting the assessment.

3.2 An assessment under Article 15 of the Order should be undertaken only if the Board believes that it needs, or probably needs, to determine the child’s special educational provision itself by making a statement. Statutory assessment will not always lead to a statement; the information gathered during an assessment may indicate ways in which the child’s needs can be met by his or her school without the need for a statement. It may be, for example, that the provision of a particular piece of equipment would allow the school, guided as appropriate by expert help, to meet the child’s needs.

3.3 This Part of the Code sets out the means by which a child may be brought to the Board’s attention, the timescales within which assessments and statements should normally be made and the criteria and procedures for making statutory assessments.

Routes for Referral

3.4 A child will be brought to a Board’s attention as possibly requiring an assessment by a referral from a mainstream school or another agency or by a formal request for an assessment from the parent. All requests should be considered as quickly as possible, regardless of the source of the referral.

Referral by the School or Other Agencies

3.5 In some cases, a school will conclude, after it has taken action to meet the learning difficulties of a child, that the child’s needs remain so substantial that they cannot be met effectively within the resources normally available to the school, and it may draw the child to the attention of the Board with a view to a statutory assessment. Exceptionally, a school may consider that a statutory assessment may be necessary even though no action has been taken at Stages 1, 2 and 3.

3.6 Boards have a duty to identify, among those children in their area with special educational needs for whom they are responsible, those for whom they must make statements. To help fulfil this duty, each Board should obtain information from schools about registered pupils who live in its area and who have special educational needs at Stage 3.

3.7 When making a referral for a statutory assessment, the school should state clearly the reasons for the referral and submit the following:-
• the recorded views of parents and, where appropriate, the child on the earlier stages
of assessment and any action and support to date;

• evidence of any health checks, for example relevant information on medical advice to
the school;

• where appropriate, evidence relating to social services involvement;

• written individualised education plans at Stages 2 and 3 indicating the approaches
adopted, the monitoring arrangements followed and the educational outcomes;

• reviews of each education plan indicating decisions made;

• evidence of the involvement of specialists.

Notice of a Proposal to Make a Statutory Assessment

3.8 The Board will then consider whether to issue, under Article 15(1), a notice to the parents
that it proposes to make an assessment, giving its reasons. When issuing such a notice, the Board
is required to advise parents of:-

i. their right to make representations and submit written evidence to the Board within
a specified period, which must not be less than 29 days. The Board should encourage
parents to make representations and to submit evidence, pointing out the importance
of their contribution. When representations are made orally, the Board should agree
a written summary with the parents;

ii. the name of the Board officer who will be their contact point in matters relating to
statutory assessment and statementing;

iii. the procedures to be followed during statutory assessment. This should include
advice about the approaches it will make for educational, medical, psychological and
social services advice.

3.9 The Board should also advise parents:-

i. of the range of provision available in grant-aided schools within the Board area. This
information should be available at the earliest possible stage to inform parents’
preferences for their child’s future placement. If necessary, visits to particular schools
might be arranged. The Board should take care not to appear to pre-empt the
parents’ preference or any representations they may later make;

ii. that the parents themselves may present any private advice or opinions which they
may have obtained, and that any such advice will be shown for further comment to
relevant professionals giving advice to the Board and taken fully into account;

iii. that they may, if they wish, obtain the guidance and support of a person, independent
of the Board, at any time during the assessment process. This person may be a
relative, friend, neighbour or someone from a parent support group. The parents
should, however, be advised that it is important that the person should be someone
they can trust and rely upon to respond to a request for support and to keep a
confidence when the need arises. The Board should also advise the parents that if this
person is to attend meetings, the parents will themselves be expected to ensure that
notification is given in good time;

iv. about any other relevant sources of independent advice, such as local or national
voluntary organisations or appropriate local support groups.

3.10 Boards should bear in mind that assessment can be stressful for parents, and should seek to
present information in a manner which encourages participation and open discussion. Taped or
video-taped versions may be considered for parents who may find it more accessible in that form.
Boards may consider that the letter informing parents of a proposal to assess should be personally
delivered, for example by an educational welfare officer. Personal delivery, along with the
information about assessment, can provide an early opportunity for parents to put any questions
and for consent to be sought on a contingency basis to any medical examination and psychological
assessment of the child.

3.11 If relationships between the school and the parents have been working as they should, this
will not be the first indication to the parents of the possibility of a statutory assessment. Where
the proposal follows a sudden change in the child’s circumstances, (eg resulting from an accident
or a sudden acceleration of a degenerative condition, or if the child has just moved into the area,) the Board should seek, before writing formally, to explain its intentions to the parents in a familiar
setting.

Notification to Other Agencies of a Proposal to Assess

3.12 The Board must copy any such proposal to the designated officer of the HSS Trust and to
the school principal concerned. Copies should also be provided for the educational psychology
service and any other relevant agencies who might later be approached for advice, so as to provide
the opportunity to collate records and consult others who might be involved.

Formal Request from a Parent

3.13 A Board must comply with a request from a parent to conduct a statutory assessment, unless
one has already been made in the previous 6 months or the Board concludes, having examined
the available evidence, that one is not necessary. Where a Board reaches that conclusion, it must
inform the parents in writing, giving the reasons for its decision; it must also inform the parents
of their right to appeal to the Tribunal against the decision and give details of how this may be
done.

3.14 In some instances, a parental request for assessment may reflect dissatisfaction with action
taken in the school-based stages. The Board must follow the same procedure, regardless of the
background to the request, investigating evidence provided by the school and parents as to the
child’s learning difficulties and evidence about action taken by the school to meet those
difficulties.
3.15 Where a child attends an independent school, a parental request may provide the first indication to the Board that the child may have special needs. The procedure to be followed and the factors to be considered in deciding whether to make an assessment should be the same as for a child at a grant-aided school. Each Board may therefore find it helpful to inform independent schools in its area of:

- its duty to identify children who may require statements of special educational needs;
- the procedures it will adopt; and
- the information it would expect to be made available.

3.16 When a parental request for a statutory assessment is received, the Board should immediately contact the parents to investigate their concern. It is not necessary to issue a formal notice under Article 15(1) of the Board’s intention to make a statutory assessment, but the parents should be given details of the assessment process and any other relevant arrangements. The Board must inform the school principal of the request and should also ask the school for written evidence about the child, including an assessment of the learning difficulty and an account of the special educational provision that has been made. It should at the same time notify the educational psychology service and any other bodies which might later be asked for advice, including the relevant HSS Trust.

Children Who May Need Immediate Referral for Statutory Assessment

3.17 In a small minority of cases, children may demonstrate such significant difficulties that the school may consider it advisable to refer the child to the Board for statutory assessment without going fully through the school-based stages; for example, diagnostic assessment may have demonstrated a major sensory or other impairment which, without immediate specialist intervention beyond the capacity of the school, will lead to increased learning difficulties.

3.18 Where there is agreement between the school, the child’s parents and any relevant consultant or adviser about the child’s need for further multi-disciplinary assessment or concern that any delay might further damage the child’s development, the child may be referred to the Board immediately. In such circumstances, an emergency placement may be appropriate.

Considering Whether a Statutory Assessment is Necessary

3.19 Having notified the parents that a statutory assessment might be necessary, or having received a request from the parents for such an assessment, the Board should inform parents within 6 weeks as to whether or not it will make a statutory assessment. The period of at least 29 days within which parents may make representations to the Board is part of this 6 weeks.

Criteria for Deciding to Make a Statutory Assessment

3.20 In considering whether a statutory assessment should be made, Boards should pay particular attention to evidence provided by school and parents about the child’s learning difficulties, taking into account the action already taken by the school to overcome these. Decisions must be made in light of all the circumstances of each individual case, in consultation with parents, schools and
where appropriate, the child concerned.

3.21 The central question for Boards is whether there is convincing evidence that, despite relevant and purposeful action by the school, with the help of external specialists, the child's learning difficulties remain or have not been remedied sufficiently. Boards will always wish to see evidence of the school's assessment of the child's learning difficulties; to obtain evidence of the child's academic attainment in the school; and to examine that evidence to understand why the child has achieved the levels shown. Beyond that, the evidence Boards should seek and the questions they should ask will vary according to the child's age and the nature of the learning difficulty.

Academic Attainment

3.22 Academic attainment is the essential starting point, and key indicators are provided by the results of assessments and tests in the areas of study of the Northern Ireland Curriculum, whether carried out by the school as part of its regular internal monitoring of pupils' progress or as part of the formal Key Stage assessment arrangements. However, those facts in themselves will not be sufficient for Boards to decide whether a statutory assessment is necessary; they must always be interpreted in the context of the attainments of the child's peers, the child's progress over time and, where appropriate, expectations of the child's performance. A child's apparently weak performance may, for example, on examination of the evidence, be attributable to factors in the quality of the school's provision. Careful consideration of evidence of low attainment may reveal good progress from a low base. On the other hand, apparently satisfactory attainment may be found to fall far short of the performance expected of the child as assessed by his or her teachers, parents and others, including educational psychologists, who have observed the child closely, and, where appropriate, by standardised tests.

3.23 Boards should always be alert to significant discrepancies between:

- i. a child’s attainments in standardised tests and the attainment expected of the majority of children of his or her age;

- ii. a child’s attainments in assessments and tests in the programmes of study of the Northern Ireland Curriculum and the attainment of the majority of children of his or her age;

- iii. a child’s attainments in assessments and tests in the programmes of study of the Northern Ireland Curriculum and the performance expected of the child as indicated by a consensus among those who have taught and observed the child, including his or her parents, and supported by such standardised tests as can reliably be administered;

- iv. a child’s attainment within one of the areas of study of the Northern Ireland Curriculum, or between one area of study and another, or between attainment targets within a subject.

3.24 Assessments, both formative (continuous/diagnostic) and summative, whether formal or
informal, carried out in the context of the Northern Ireland Curriculum will therefore supply important evidence. Boards should have regard to teachers’ own recorded assessments of the child’s classroom work, the outcome of education plans and any portfolio of the child’s work compiled to illustrate progress.

**Non-academic Factors**

3.25 At the same time, Boards should always seek evidence of identifiable non-academic factors affecting attainment. In all cases, they should ask whether there is any evidence of:

i. problems with the child’s health which may have led to absences from school, or difficulty in concentrating or participating in the full range of curriculum activity while at school;

ii. sensory impairment, eg hearing loss or visual problems;

iii. speech and language difficulties;

iv. poor attendance;

v. problems in home circumstances;

vi. problems with, or deterioration in, peer relationships (including bullying) and/or relationships with adults;

vii. any emotional or behavioural difficulties.

**Learning Difficulties**

3.26 Boards will normally wish to see evidence of the learning difficulties identified and the action taken by teachers at Stage 1; the action taken by the SEN co-ordinator and teachers, and their evaluation at Stage 2; and the action formulated, monitored and evaluated in conjunction with external specialists at Stage 3. They should seek evidence that the school has made use of information from parents and has involved them in addressing their child’s learning difficulties. In cases where it is the parents who first express a concern to the school, the Board should seek evidence that the school has investigated that concern thoroughly, in the same way as it would have done if the child’s teacher had expressed a concern. Boards should also seek the medical advice which has been available to the school on the special educational needs of the child, and will wish to seek information from the parents as to any medical condition affecting the child’s learning.

3.27 The Appendix to this Code sets out the evidence which Boards should seek, and the questions they should ask, about children with particular learning difficulties or disabilities; (there is some repetition to enable each section to be self-standing). This guidance recognises that each child is unique; that children’s learning difficulties may encompass more than one area of need; and that the questions asked by Boards must closely relate to the particular circumstances of each child.
Decision Not to Make a Statutory Assessment

3.28 If, drawing on the criteria set out in the Appendix, the Board decides not to assess the educational needs of the child, it should write to the parents and the school principal, explaining the reasons for its decision.

3.29 Parents who have formally requested a statutory assessment under Article 20 may appeal to the Tribunal against a decision not to make an assessment. In writing to the parents, the Board must inform them of this right and give details about how an appeal may be made. The Board should also inform the parents about the school-based stages of assessment and its arrangements for monitoring and review and offer any guidance which might help the school to meet the child's needs. If there is disagreement between parents and school about the child's progress at school, or about the need for statutory assessment, the Board may consider arranging a meeting between the parents and the school.

Making the Assessment and the Statement

3.30 Having decided that the statutory assessment must be made the Board must seek parental, educational, medical, psychological and social services advice and any other advice it considers appropriate. It should do so immediately and should ask all concerned to respond within 6 weeks.

3.31 Having received all the advice, the Board must decide whether or not to make a statement. If it decides that a statement is necessary, it must draft a proposed statement and send a copy to the child's parents.

3.32 If it decides that a statement is not necessary, it must notify parents of that decision, giving reasons, preferably in the form of a note in lieu of the statement. In practice, the decision as to whether to write a statement or a note in lieu will often involve preparing a draft which can then take either form, according to the result of the Board's deliberations. Deciding whether to make a statement and recording the results of the decision will be part of the same process.

3.33 On receipt of the proposed statement, parents have a right to state a preference for the grant-aided school their child should attend and to make representations to, and hold meetings with, the Board.

Time Limits for Making Assessment and Statements

3.34 It is in the interests of all concerned that statutory assessments and statements are made as quickly as possible, having regard to the need for thorough consideration of the issues in individual cases.

3.35 In normal circumstances, the length of time taken for a Board to reach the stage of issuing a proposed statement must be no more than 18 weeks from the date of either the receipt of the parent's request for an assessment or the issue of the notice under Article 15(1), whichever is appropriate.

3.36 In recognition that circumstances may arise where it is impractical for the Board to meet this time limit, certain detailed exceptions apply where:-
a. further advice needs to be sought by the Board to complete its assessment;
b. parents wish to provide advice to the Board more than 6 weeks after they were invited to do so;
c. advice from a school principal is delayed because of school closure;
d. advice sought from a HSS Trust has not been provided within 6 weeks;
e. exceptional personal circumstances affect the child or parent;
f. the child or parent is away for at least 4 weeks during the 18 week period; or
g. an appointment for examination or test is not kept.

Boards should always strive to ensure that any delay arising from the exceptions is kept to a minimum.

3.37 The period from proposed statement to final statement is not prescribed by law, but Boards should aim to complete this process within a further 8 weeks.

**HSS Trust Advice**

3.38 HSS Trusts consulted must normally respond within 6 weeks of the date of receiving the request. Some weeks earlier, the Board will have notified the designated officer of the HSS Trust of the possibility of an assessment and should have, at the same time, sought the parents’ consent to their child being medically examined as part of any assessment.

3.39 The exceptions to the 6 week time limit within which HSS Trusts must provide information are where:-

a. exceptional personal circumstances affect the child or parent during the 6 week period;
b. the child or parent is away for at least 4 weeks during the 6 week period;
c. an appointment for an examination or test is not kept;
d. the HSS Trust has no information or records relevant to the assessment.

3.40 Where a HSS Trust has had no relevant knowledge of the child concerned prior to receiving a copy of the Board’s notice to parents that it proposes to make an assessment or the Board’s letter of notification that it has received a request for an assessment, every effort should nevertheless be made to respond promptly. In most cases, the HSS Trust will have some knowledge of the child as a result of the school seeking medical advice at Stages 1-3.
THE CONDUCT OF A STATUTORY ASSESSMENT

Decision to Proceed with a Statutory Assessment

3.41 Where the Board decides to assess the educational needs of the child, it should advise the parents that the child may be called for assessment. Parental agreement to a medical examination and psychological assessment should already have been sought. Parents should be informed of their right to be present with their child at any interview, test, medical or other assessment which may be necessary and should be told of the time and place of appointments. Where appropriate, it should be explained that some procedures are more effectively carried out without others being present; eg where a classroom observation forms part of an assessment, the child will behave differently if the parent is present.

Requests for Advice

3.42 The Board is required to seek parental, educational, medical, psychological and social services advice, together with any other advice which may be considered desirable.

3.43 All requests for advice should specify a date by which it must be submitted and should be accompanied by copies of any representations made, or evidence submitted, by the child’s parents. This will inform discussions between advisers and parents about the child’s needs. Such discussions, and the eventual written advice, may include consideration of options as to the type of school in which the child’s needs might best be met but advisers must be careful not to be influenced by consideration of the school placement itself. This will be determined by the Board at a later stage, in light of any parental preference or representations; it is most important that any discussions between advisers and parents should not appear either to commit the Board or to pre-empt the parents’ right to state a preference or make representations to the Board.

Parental Advice

3.44 Parents must be asked to give any advice they consider to be relevant. They may welcome guidance on how best to contribute to the assessment, and Boards may consider offering guidance notes; see below.

3.45 Parents may also find it helpful to talk to the Named Board Officer at this stage. This role will be particularly important if they have difficulty in writing or preparing a report or if their first language is not English; in such circumstances, the Named Board Officer should prepare an agreed note of their views for inclusion with the advice relating to the assessment. Moreover, where parents have been receiving guidance and support from someone independent of the Board, they should be encouraged to seek that person’s help in preparing their advice and to invite them to attend any meetings.
GUIDANCE NOTES FOR PARENTS

3.46 Guidelines along the following lines may be helpful to parents, with appropriate adjustment according to the child’s age:

Introduction

These guidelines are to help you with your contribution to the assessment. You do not have to use them if you do not want to. You may change the order, leave out anything you do not think is relevant or add anything you feel to be important. We would find it helpful, however, if you used the headings we have suggested. Your written contribution may be as short or as long as you wish.

A - THE EARLY YEARS

1. What do you remember about the early years that might help?
2. What was he or she like as a young baby?
3. Were you happy about progress at the time?
4. When did you first feel things were not right?
5. What happened?
6. What advice or help did you receive - from whom?

B - WHAT IS YOUR CHILD LIKE NOW?

1. General Health - eating and sleeping habits; general fitness, absences from school, minor ailments - coughs and colds. Serious illnesses/accidents - periods in hospital. Any medicine or special diet? General alertness - tiredness, signs of use of drugs - smoking, drinking, glue-sniffing.

2. Physical Skills - walking, running, climbing - riding a bike, football or other games, drawing pictures, writing, doing jigsaws; using construction kits, household gadgets, tools, sewing.

3. Self-Help - level of personal independence - dressing, etc; making bed, washing clothes, keeping room tidy, coping with day to day routine; budgeting pocket money, general independence - getting out and about.

4. Communication - level of speech, explains, describes events, people, conveys information (eg messages to and from school), joins in conversations; uses telephone.
5. **Playing and Learning at Home** - how ........ spends time, watching TV, reading for pleasure and information, hobbies, concentration sharing.

6. **Activities Outside** - belonging to clubs, sporting activities, happy to go along.

7. **Relationships** - with parents, brothers and sisters; with friends; with other adults (friends and relations) at home generally, 'outside' generally.

8. **Behaviour at Home** - co-operates, shares, listens to and carries out requests, helps in the house, offers help, fits in with family routine and 'rules'. Moods good and bad, sulking - temper tantrums; demonstrative, affectionate.

9. **At School** - relationships with other children and teachers; progress with reading, writing, number, other subjects and activities at school. How the school has helped/not helped with your child. Have you been asked to help with school work - hearing child read - with what result?

Does ............ enjoy school?

What does he/she find easy or difficult?

### C - YOUR GENERAL VIEWS

1. What do you think your child's special educational needs are?

2. How do you think these can be best provided for?

3. How do you compare your child with others of the same age?

4. What is your child good at or what does he or she enjoy doing?

5. What does ............ worry about - is he or she aware of having any difficulties?

6. What are your worries, concerns?

7. Is there any other information you would like to give:-

   a. about the family - major events that might have affected your child? - any relevant family history?

   b. reports from other people?

8. With whom would you like more contact?

9. How do you think your child's needs affect the needs of the family as a whole?
Educational Advice

3.47 Advice must be sought from the principal of each school attended by the child in the preceding 18 months and, if appropriate, from anyone involved in educating the child otherwise than at school. The Board must ask for relevant information about the child and seek evidence of the identification and assessment of, and provision for, the child’s special educational needs. A summary of the records of the school’s work with the child at each stage should be appended to the educational advice. If a school principal has not personally taught the child within the preceding 18 months, the advice should be given only after consultation with a teacher who has so taught the child.

3.48 In light of the evidence received from the school, the Board should consider whether it should seek separate advice from a teacher or professional from any learning support service involved with the child over the preceding year, usually the specialist working with the child and the school at the stage before referral for statutory assessment. If it appears to the Board that the child is visually and/or hearing impaired, it must obtain educational advice from a teacher qualified to teach classes of visually and/or hearing impaired children.

Medical and Social Services Advice

3.49 In every case, the Board must seek advice from the HSS Trust through the designated officer, who will co-ordinate advice from all the health and social services professionals concerned. Where parents submit reports made by private professionals, the Board should consider these along with the advice provided by the designated officer.

Medical Advice

3.50 Medical advice may include advice from the child's GP and the school doctor, and from nurses, therapists, health visitors and/or child health workers and any other medical specialists who may be involved, eg orthopaedic surgeons and paediatric neurologists. It may include information on specific medical conditions or treatment; general health or developmental problems; mental health problems which may cause emotional and behavioural difficulties; and shorter term medical problems necessitating special arrangements being made on a temporary basis.

3.51 Any medical advice should state the likely consequences for the child’s education. It may include advice on how best to manage the child’s medical condition in the school context; special aids or equipment; the management of incontinence; feeding; independence and risk taking; and participation and supervision in the playground, while swimming and bathing, and taking part in out-of-school activities; and any non-educational provision which may be needed.

3.52 Medical information about a child should not be disclosed without the consent of the parents and, where he or she has sufficient understanding, the child. Where a child has a serious or life-threatening condition, medical advice should be sought. It is important that parents are sensitively informed of the probable outcomes. It should never be the case that parents first receive the information about their child’s condition (with possible reference to terminal illness) when they see the draft statement.
3.53 For some children with complex needs or specific disabilities or medical conditions, a health perspective will be crucial both in the initial assessment and in any subsequent reviews. In these circumstances, the HSS Trust will not only contribute relevant information on the child’s special needs, but may also contribute to the setting of objectives and the review process.

**Social Services Advice**

3.54 The HSS Trust will also give the Board any relevant social services information which it may have about the family or the child. In particular:

i. if the family is not known to social services, and if there is no reason to suppose from evidence provided by the school or the Board that the HSS Trust should seek further information, the HSS Trust should say so and need provide no further written advice. However, HSS Trusts may combine assessment of children in need under the Children Order with statutory assessment under education legislation, and the HSS Trust may therefore wish to check whether any information or services might usefully be provided for the child or family;

ii. if the child is receiving social services provision such as day care or is living in a residential or foster home, the HSS Trust should make available to the Board any relevant observations, information and reports arising from such placements;

iii. full details of any Child Care Plan should be provided;

iv. if the child is in the care of a HSS Trust, it should ensure that any relevant information is provided and that social services staff attend assessments and medical examinations as appropriate;

v. if the child is, or may become, subject to child protection procedures, the HSS Trust should give appropriate advice.

**Psychological Advice**

3.55 The educational psychologist from whom psychological advice is sought must be employed by the Board, or engaged by it for the purpose. A wide range of factors which might affect the child’s functioning should be addressed. These may include cognitive functioning; communicative skills; perceptual skills; adaptive and personal and social skills; the child’s approaches and attitudes to learning, including capacity to concentrate; educational attainments; and the child’s self-image, interests and behaviour. Educational psychologists may need to liaise with occupational therapists and physiotherapists for advice when investigating motor skills and their relationship to perceptual skills.

3.56 In some instances, the educational psychology service will have had a long-term relationship with a particular child and will be able to contribute a considerable body of information and opinion about the child’s progress. In other cases, in addition to examining the child, it may be necessary for the educational psychologist to observe the child over a period of time in order to formulate a clear picture of his or her needs. As part of these observations and depending on the age of the child, the educational psychologist may wish to visit the child and parents at home.
3.57 The educational psychologist from whom the Board seeks advice must consult, and record any advice received from, any other psychologist, such as a clinical or occupational psychologist, who may have relevant knowledge of or information about the child. He or she should also be asked by the Board to consider any advice which parents may submit independently from a fully qualified educational psychologist.

Other Advice

3.58 Boards should as far as possible follow up suggestions from parents of other agencies or individuals who might be able to provide relevant advice. In addition, the Board should approach any other body which it considers might be able to contribute to the assessment. Where the child's parent is a serving member of the armed forces, advice should always be sought from Service Children’s Education.

Involvement of the Child

3.59 Boards should seek wherever possible to establish the views of children and young people themselves on their special educational needs and the way in which they might be met. Where these are available, they should be set out separately from those of parents and professionals. Report forms may be provided for pupils themselves to submit their views, if necessary with appropriate help from adults close to the child, who should seek to establish the pupil's wishes and feelings.
PART IV: STATEMENTS - STAGE 5

Criteria for Deciding to Draw Up a Statement

4.1 On receipt of advice from all concerned, the Board must decide whether the degree of the child’s learning difficulty or disability, and the nature of the provision necessary to meet the child’s special educational needs, require it to determine the child’s special educational provision through making a statement. The main consideration for the Board will be whether or not all the special educational provision necessary to meet the child’s needs can reasonably be provided within the resources normally available to mainstream schools in its area, including, as appropriate, any specialist provision which the Board would routinely make available to schools, for example peripatetic teaching or advisory support.

4.2 Controlled and maintained schools will have within their delegated budgets some funding which reflects the additional needs of pupils with special needs and will receive this through Local Management of Schools schemes which are weighted for the incidence of special needs within the Board area. Grant- maintained integrated schools also receive this through their annual budget share as determined by the GMI schools formula. Funding to meet any additional costs arising for statemented pupils is not delegated but is treated as an excepted item of expenditure.

4.3 In deciding whether to draw up a statement the Board should consider all the information provided by the statutory assessment in the light of the evidence put forward by the school at the beginning of the assessment. Boards may therefore wish to ask the following questions:

i. the child’s learning difficulties

• is the information from the statutory assessment broadly in accord with the evidence presented by the school?

• if not, are there aspects of the child’s learning difficulties which the school may have overlooked and which, with the benefit of advice, equipment or other provision, the school could effectively address within its own resources?

ii. the child’s special educational provision

• do the proposals for the child’s special educational provision emerging from the statutory assessment indicate that the provision being made by the school, including teaching strategies or other approaches, is appropriate to the child’s learning difficulties?

• if not, are there approaches which, with the benefit of advice, equipment or other provision, the school could effectively adopt within its own resources?

Consideration of Appropriate Provision

4.4 If assessment confirms that the provision made by the school is appropriate, but the child is not progressing sufficiently or at all, the Board should consider what further provision may be needed and whether it can be made within the school’s resources. Where, for example, the child’s
learning difficulties require only occasional advice or support from an external specialist or a non-teaching assistant, or access to a particular item of portable equipment (e.g., a keyboard or tape-recorder), the school might reasonably be expected to make the provision from within its own resources.

4.5 The following indicators, on the other hand, would suggest that it might be appropriate for a Board to make a formal statement identifying the child’s needs, the full range of provision to be made and the review arrangements to apply, depending on the precise circumstances of each case:

i. where the child requires regular direct teaching by a specialist teacher, daily individual support from a non-teaching assistant, or a major piece of equipment which would put an unreasonable demand on the school’s resources;

ii. where a new placement is appropriate, even if such a change involves moving from a mainstream school to a special unit at the same school or from one mainstream school to another;

iii. where the child’s parents are in the armed forces, and their frequent moves might significantly disrupt effective special educational provision for the child; or

iv. where a day or residential special school placement might be necessary.

4.6 Boards should seek to arrange for the provision specified in a child’s statement to be made in a cost-effective manner, but that provision must be consistent with the child’s assessed needs. The efficient use of resources must be taken into account when a Board is considering the placement of a child with a statement, once the parents have had an opportunity to express a preference of grant-aided school.

4.7 Where a child arriving unexpectedly in a Board area exhibits such learning difficulties as would normally warrant a statement, the Board should consult the parents and those immediately concerned, including the previous Board or other responsible authority, about the most appropriate placement, and should seek to place the child where his or her needs may most appropriately be met. A statutory assessment should be initiated simultaneously, on completion of which the Board should consider the need for a statement as well as the suitability of the placement. If the child has been placed and will remain in a special school or unit, a statement should always be made.

Emergency Placements

4.8 In exceptional cases it may be necessary to make an emergency placement for a child, for example where:

a. the child’s medical circumstances have changed suddenly, causing a rapid and serious deterioration in health or development;

b. the parents, school, relevant professionals and the Board agree that a sudden and serious deterioration in the child’s behaviour make the current placement untenable or unsafe.
4.9 An emergency placement should be made only when the Board, parents, school and any relevant professionals who will be involved in the statutory assessment are all agreed that the child's needs are such that action must be taken immediately and an emergency placement is the best way forward.

4.10 When an emergency placement is made, the Board should immediately initiate a statutory assessment. Decisions about how the child's needs should be best met in the longer term should not be prejudiced by the nature of the emergency placement. Statements drawn up in these circumstances should include detailed objectives with clearly specified review arrangements to monitor the provision made for the child. In such cases, Boards may wish to review the statements more frequently than annually and to ask for interim progress reports.

4.11 No child should be placed in a special school or special unit at a mainstream school except by a Board, either on foot of a statement or for the immediate commencement of the statutory assessment procedure. Where the assessment procedure leads the Board to conclude that a statement is not warranted, the Board should take immediate steps, in consultation with the parents, to secure a more appropriate placement for the child.

**Decision Not to Issue a Statement: The Note in Lieu**

4.12 The statutory assessment process may lead the Board to conclude that the child's special educational needs can be met from within the school's own resources, with or without the intervention of a professional service from outside the school. The decision not to issue a statement may be disappointing to parents and care should be taken to accompany the decision with a full explanation so that they do not see it as a denial of additional resources for their child, or indeed a denial that their child has special educational needs. The Board should explain to parents that resources are available within schools to meet the majority of special needs of their pupils and ensure that they understand the school-based stages of assessment and the monitoring and review arrangements which will ensure that their child's needs are met by the school, with external support if necessary, in an appropriate way.

4.13 The statutory assessment will have contributed significantly to the school's, parents' and the Board's knowledge of the child. The Board should therefore consider issuing a note in lieu of a statement. This would set out the reasons for the Board's decision, with supporting evidence from the statutory assessment of the child. Where a Board decides to issue a note in lieu, this, together with all the advice collected, should be sent to the parents, to the child's school and to any professionals who have given advice during the assessment process. The information from the assessment will thereby be available to those working with the child in school to augment their strategies for meeting the child's special educational needs. The Board may wish to arrange a meeting with the parents and the school to discuss the decision and the note. Should the Board decide not to issue a note in lieu, the child's parent must still be given the reasons for the Board's decision and has the statutory right to receive on request a copy of any advice relevant to that decision.

4.14 In some cases, the Board may be able to decide very quickly that it is not necessary to make a statement; in such cases, parents should be informed immediately by the issue of a notice under Article 17(1), giving reasons. However, a comprehensive note in lieu may require as much
thought and time to draft as a proposed statement itself; indeed, it may well be that the decision as to whether to make a statement or issue a note in lieu will not become clear until all the relevant information has been collated and the child’s needs and required provision set out.

4.15 There may therefore be advantage in the format of the note in lieu broadly following the statutory format of the statement, although it will be important to stress the different legal status of the two documents. The note in lieu might begin by describing the child’s special educational needs, with supporting evidence attached in the form of the parental, educational, medical and psychological advice, any advice from the social services department and any other advice gathered during the assessment, including the views of the child. The second part of the note might set out the reasons for declining to make a statement and offer guidance as to the special educational provision which might appropriately be made for the child, with specialist advice if necessary, but without being determined by the Board. The third part might then, again reflecting the advice received and agreement between the Board and the agencies concerned, describe any non-educational needs and appropriate provision.

**Decision to Make a Statement**

4.16 Where in light of a statutory assessment made under Article 15, a Board decides that it is necessary for it to determine the special educational provision necessary to meet a child’s special educational needs, it must make and maintain a formal statement of those needs under Article 16.

**Form and Content of Statement**

4.17 The format of a statement of special educational needs is as follows:-

<table>
<thead>
<tr>
<th>Part 1</th>
<th><strong>Introduction:</strong> The child’s name, address and date of birth. The child’s home language (if not English) and religion. The names and addresses of the child’s parents, guardians or carers.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 2</td>
<td><strong>Special Educational Needs (Learning Difficulties):</strong> Details of each of the child’s special educational needs as identified during statutory assessment and on the advice received and attached as appendices to the statement.</td>
</tr>
<tr>
<td>Part 3</td>
<td><strong>Special Educational Provision other than Placement:</strong> The special educational provision considered necessary to meet the child’s special educational needs.</td>
</tr>
<tr>
<td></td>
<td>a. The objectives which the special educational provision should aim to meet.</td>
</tr>
<tr>
<td></td>
<td>b. The special educational provision which the Board considers appropriate to meet the needs specified in Part 2 and to meet the specified objectives.</td>
</tr>
</tbody>
</table>
c. The arrangements to be made for monitoring progress in meeting the objectives set, particularly for setting short-term targets for the child’s progress, and for reviewing his or her progress on a regular basis.

Part 4  Special Educational Provision - Placement: The type - and wherever appropriate the name - of the school where the provision specified in Part 3 is to be made or the arrangements for the education to be made otherwise than in school.

Part 5  Non-Educational Needs: Any relevant non-educational needs of the child as agreed between the health services, social services or other agencies and the Board.

Part 6  Non-Educational Provision: Specification of any relevant non-educational provision required to meet the non-educational needs of the child as agreed between the health services and/or social services and the Board, including agreed arrangements for its provision.

Signature and date.

APPENDICES

4.18 All the advice obtained and taken into consideration during the assessment process must be attached as appendices to the statement. This must include the following:-

1. parental representations, evidence and advice;
2. educational advice;
3. medical advice;
4. psychological advice;
5. social services advice;
6. any other advice, such as the child’s views, which the Board or any other body from whom advice is sought consider desirable. In particular, where the child’s parent is a serving member of the armed forces, advice from Service Children’s Education.

4.19 Boards should seek to draft clear, unambiguous statements. Where diagnostic or technical terms are necessary or helpful, for example in referring to specific disabilities, their meaning should be amplified in terms which parents and other non-professionals will readily understand. Boards should take particular care to ensure that the text is placed in the correct part, so as to correspond with the form set out in the Regulations.
Part 2: Special Educational Needs (Learning Difficulties)

4.20 Part 2 of the statement should describe all the child’s learning difficulties identified during the statutory assessment. It should also include a description of the child’s functioning - what the child can and cannot do. The description in Part 2 should draw on and may refer to the professional advice attached in the appendices. Where the Board adopts that advice in its description of the child’s learning difficulties, it should say that it has done so; it is insufficient merely to state that it is adopting the advice in the appendices. The appendices may contain conflicting opinion open to interpretation, which the Board must resolve, giving reasons for the conclusions reached.

Part 3: Special Educational Provision other than Placement

4.21 Part 3 of the statement is divided into three sub-sections:

- the first sub-section should set out the main educational and developmental objectives to be achieved by the special educational provision over the expected duration of the statement;

- the second sub-section should set out all the special educational provision that the Board considers appropriate for all the learning difficulties identified in Part 2, even where some of the provision is to be made by direct intervention by the Board and some is to be made by the child’s school within its own resources. It may be helpful to specify which elements of the provision are to be made by the school, and which elements are to be made by the Board. The Board will be responsible for arranging all the special educational provision specified in the statement.

This sub-section should also specify any modifications or disapplications of the provisions of the Northern Ireland Curriculum (in terms of attainment targets, programmes of study and assessment arrangements, and including Religious Education and attendance at collective worship if these are inappropriate for the child) which the Board considers necessary to meet the child’s special educational needs, with details as to how a broad and balanced curriculum is to be maintained.

For pupils whose assessment is close to their preparation date for GCSEs or vocational examinations, this sub-section should also indicate any special examination provision recommended to enable the pupil to have full access to the examination and properly demonstrate his or her attainment, and for which special approval will have to be sought from the examining body in advance. It should be noted, however, that a pupil does not require a statement in order to benefit from any concessions or special arrangements that might be granted to a pupil with special educational needs.

The provision set out in this sub-section should normally be specific, detailed and quantified (in terms, for example, of hours of ancillary or specialist teaching support) although there will be cases where flexibility should be retained in order to meet the changing special educational needs of the child concerned;
• the third sub-section should specify the arrangements to be made for setting short-term educational targets. The targets themselves should not be part of the statement. By their nature, the targets will require regular revision, while the longer term objectives in the first sub-section remain stable. Targets should be set by the child's school, in consultation with his or her parents, within 2 months of the child's placement. The child's achievements in the light of those targets should then be considered at the first annual review and new targets set.

This sub-section should also specify any special arrangements for the annual review and recognise the need for the monitoring and evaluation of the child’s progress during the course of the year.

4.22 It is important that all the information in Part 3 should be easily understood by all involved in the child's education, including the parents.

Part 4: Special Educational Provision: Placement

4.23 In the final statement, Part 4 will specify the type of school and any particular school which the Board considers appropriate for the child, or the provision for education otherwise than at school considered appropriate. But this Part must be left blank when the proposed statement is issued, so that the Board does not appear to pre-empt consideration of any parental preference or representations made.

Part 5: Non-Educational Needs

4.24 Part 5 should specify any non-educational needs of the child which the Board either proposes to meet, or is satisfied will be met, either by arrangement with HSS Boards or Trusts or otherwise.

Part 6: Non-Educational Provision

4.25 Part 6 should specify the non-educational provision which is required to meet the needs identified in Part 5 and which the Board either proposes to make available, or it is satisfied will be made available by a health authority or otherwise. It should also state the objectives to be achieved by such non-educational provision and should set out the arrangements which have been agreed by the Board and the providing body for its delivery.

4.26 When considering a child’s non-educational needs and provision, the Board should ensure that the needs are clearly and accurately described and that there is full agreement on the nature and quantity of the provision necessary to meet those needs, consulting the relevant responsible professionals as necessary.

Speech and Language Therapy

4.27 Speech and language therapy may be regarded as either educational or non-educational provision, depending upon the health or developmental history of the child. In general terms, for the purposes of statements of special educational needs, it should be regarded as educational provision unless it is provided for the purposes of helping a child regain a level of speech or
language lost through illness or accident. Prime responsibility for the provision to children of speech and language therapy, and indeed other therapeutic services, rests with health and social services. This applies generally and also to any specification of such services in a statement of special educational needs, whether in Part 3 as educational provision or in Part 6 as non-educational provision. HSS Boards are responsible for purchasing therapy services through the contracts they make with HSS Trusts. These provide a professionally-managed speech and language therapy service, covering pre-school, school-age and adult age groups and which has close links with the other child health services.

4.28 Schools, Boards and health authorities should co-operate closely in meeting the needs of children with communication difficulties. It is important that the nature and extent of provision required for individual children should be examined very carefully and that full consideration is given as to how such provision can best be delivered. In some cases, for example, children may need regular and continuing help from a speech therapist, either individually or in a group. In other cases, it may be appropriate for staff at the child’s school to deliver a programme of support in liaison with a speech therapist.

4.29 Where speech and language therapy for a child whose statement specifies such therapy as educational provision is not provided by a health authority, ultimate responsibility for ensuring that the provision is made rests with the Board, unless the child’s parents have made appropriate alternative arrangements. In each such case, therefore, it is advisable for the Board to satisfy itself that the arrangements for service provided, or to be provided, by the relevant health authority are sufficient to enable the Board to fulfil its statutory obligations. In any instance where a Board is not so satisfied, it will need to consider alternative arrangements whereby it can fulfil its statutory duties, for example, by employing speech therapists directly or acquiring such services on a private basis.

The Proposed Statement

4.30 The Board must draw up a proposed statement, completing all Parts except Part 4: the proposed statement must not contain any details relating to where the proposed special educational provision should be made.

4.31 The Board must send the proposed statement and copies of the advice which has been submitted during the assessment to the child’s parents. At the same time, it must send the parents a notice in the prescribed form, which sets out the procedures to be followed, including procedures for naming the appropriate school.

4.32 When making statements, the needs of children of families from different linguistic and cultural backgrounds should be borne in mind, especially where parents are not fluent in English. Boards should seek appropriate advice to help ensure that such parents and children are involved in all aspects of the process and that the parents fully understand the terms of the statement and its practical implications.

Naming a School

4.33 The Board must explain to parents the statutory arrangements which it has made under
paragraph 3 of Schedule 2 of the Order for expressing a preference for a particular grant-aided school. Parents have the statutory right to make representations, which the Board must consider, about the content of the statement, and the right to request meetings to discuss any aspect of the content of the proposed statement, including the advice obtained during the statutory assessment.

4.34 Three conditions govern the naming of a school in a statement: the placement must be appropriate to the child’s needs, while also compatible with the interests of other children already in the school and with the efficient use of the Board’s resources. Boards have a qualified statutory duty to secure that children with statements are educated in mainstream schools, so long as the 3 conditions above are met. If those conditions would not be met in the mainstream school preferred by the child’s parents, the Board’s statutory duty to secure that the child is educated in a mainstream school nevertheless continues to apply if the conditions would be satisfied at a different mainstream school.

4.35 The Board should inform parents that all grant-aided schools must publish information on their policies on special educational needs. It should encourage parents both to visit schools and to see the policies and any other relevant documentation to assist them in stating their preference. Discussions with other parents may be helpful. In some circumstances, and if parents request such help, a Board officer may wish to visit particular schools with parents to ensure that their questions and concerns are dealt with effectively and promptly and to make certain that they fully understand the range of provision that the schools can offer.

4.36 When a Board sends parents a copy of a proposed statement, it must advise them of their right to make representations in favour of a placement other than at a grant-aided school in Northern Ireland and that, if they wish to make such representations, they should do so within 15 days of receiving the proposed statement. If the Board does not accept the parents’ representations, it should inform them of its decision before naming any school in the final statement so that they may then have the opportunity to reconsider their preference of school.

4.37 Where parents are unsure about a choice of school, or are unhappy about the choice of a school within the Board area, it may be particularly helpful to ensure that they can talk both to a Board officer and to someone from a voluntary organisation. The Board should make every effort to arrange meetings quickly and issue the final statement promptly.

4.38 Boards should consider carefully any preferences which parents may state for schools with a particular ethos. While such considerations should not over-ride the statutory conditions governing placements, they may enhance the capacity of a school for meeting the child’s needs. Boards should have particular regard to this consideration in circumstances where several schools, one of which has a particular ethos favoured by the parents, could meet the statutory conditions.

4.39 It is important that the spiritual development of all children, including those with statements, is addressed as part of their education. To help meet this requirement, every pupil attending either a mainstream or special school must receive religious education and attend collective worship, unless this would be against the wishes of the parents or the pupil’s statement indicates otherwise.

4.40 If it is agreed that a residential school should be named in the statement, the Board and
parents should also agree the arrangements for the child’s contact with his or her family and for any special help, such as transport, which may be needed to maintain home/school contact.

4.41 Where the Board decides that the final statement will not name the parents’ first choice of school, it should explain its decision in writing to the parents. Visits by parents to the school proposed by the Board, with an opportunity to discuss their child’s special needs with the principal, SEN co-ordinator or any specialist teaching staff may be helpful.

Consultation Before Naming a School

4.42 The Board must consult the Board of Governors of any grant-aided school which it proposes to name in a statement. If the school is in another Board’s area, it must also consult that Board. It should give due consideration to the views expressed by those consulted, though the final decision as to whether to name the school remains with the Board.

4.43 The Board of Governors of a school may not refuse to admit a child solely because he or she has special educational needs. A grammar school should not, however, be named in a statement unless it is clear that the placement would be appropriate to the child’s ability.

4.44 There may be instances where the admission of a child with a statement to a mainstream school will take the school over its approved admissions number or enrolment number for that year. The statutory requirements relating to approved admissions and enrolment numbers do not apply to children with statements, and Departmental approval to such admissions is not therefore required.

4.45 Where a Board decides not to name the parents’ preferred school in a statement because the statutory conditions do not apply, it should consult the parents about any other schools they would like the child to attend.

4.46 The parents’ preferred school may be further away from the child’s home than another school which is appropriate to the child’s special educational needs. In such a case it would be open to the Board to name the nearer school, because that would be compatible with the efficient use of resources.

Placements Other Than at Grant-aided Schools in Northern Ireland

4.47 Boards may arrange for all or part of a child’s special educational provision to be made otherwise than at school, or at an independent school or other non-grant-aided institution in Northern Ireland, or at an institution outside Northern Ireland. In all cases, the Board must consult with the child’s parent, and must be satisfied that the interests of the child require the arrangements to be made and that they are compatible with the efficient use of resources. Any such arrangements should be specified in Part 4 of the statement.

4.48 Reference to the Department is not required in such cases, except where the proposed placement is at an institution in Northern Ireland which is not for the time being approved by the Department under Article 26 as suitable for the admission of children with special educational needs. Where such circumstances apply, the prior consent of the Department must be sought, giving full information as to why the placement is considered appropriate for the child and
providing copies of any professional advice which may be relevant to the consideration. The Department will as a matter of course advise Boards of all approvals given under Article 26, updating this information as necessary, and of any case where approval may subsequently be withdrawn.

4.49 Before a Board arranges through a statement for a child to attend an institution outside Northern Ireland, it must be satisfied that it specialises in providing for children with special educational needs. In such cases, Boards must pay the fees of the institution and the reasonable travelling and other expenses of the child and any person, including a parent, who might accompany the child.

4.50 Where a Board decides to place a child with a statement at an independent school in Northern Ireland, it must pay any fees payable in respect of the education of the child at the school. It may also pay any fees payable in respect of board and lodging provided for the child at the school and may provide transport for the child to facilitate attendance.

4.51 Where a Board decides to place a child with a statement at an institution in Northern Ireland other than a school, it may contribute to the costs of providing education to the child at the institution or assist the institution in the provision of that education. This may include the payment or part-payment of any fees in respect of education or board and lodging for the child; the provision of transport for the child to facilitate his or her attendance at the institution; and the provision of equipment and services to the institution.

Children Educated at Parents’ Expense

4.52 Parents may choose to place a child with a statement in an independent school (whether or not approved under Article 26) at their own expense. If parents choose to make such provision for their child, the Board should satisfy itself that the school is able to make the special educational provision specified in the statement before it is relieved of the duty to arrange that provision. Once so satisfied, the Board has no obligation to contribute towards the cost of educating the child at the school of the parents’ choice. It is, however, still under a duty to maintain the child’s statement and to review it annually.

Parental Representations Over the Proposed Statement

4.53 If parents have been fully consulted at the earlier stages of assessment, they are more likely to consider that the proposed statement presents a positive and accurate appraisal of their child’s special educational needs and that the provision proposed represents an appropriate response to those needs.

4.54 The Board should, however, inform parents that:

i. they may within 15 days make representations, and require that a meeting be arranged with an officer of the Board to discuss the contents of the statement;

ii. within 15 days of any such meeting, the parents may make further representations or, if they disagree with any part of the assessment, require further meetings to be arranged with appropriate people within the Board to discuss the advice given;
iii. within a final 15 days from the last meeting the parents can make further comments to the Board.

4.55 Every effort should be made to ensure that parents are satisfied with the proposed statement and that they understand the background to the proposals made for their child and consider that their wishes and feelings have been given full and sensitive consideration. Similar effort should be made to ensure that, as far as possible, the child’s views are reflected in the proposed statement and that the child understands the reasons for the proposals.

4.56 At any meetings arising from the proposed statement, parents should have sufficient time and information to discuss their anxieties with the Named Board Officer, and mutual agreement should be sought where possible. Parents should be told that they may be accompanied by a friend, relative or adviser at any meetings. The Board may wish to refer parents to professionals in health or other services for clarification of any relevant aspect of the provision proposed which is giving cause for concern.

The Final Statement

4.57 When amendments are suggested to the proposed statement and agreed by the Board and the parents, the final statement should be issued immediately. Boards must arrange the special educational provision specified from the date on which the statement is made. Every effort should be made to ensure that parents understand the significance of any amendments and the nature of the provision which is proposed to meet the child’s special educational needs.

4.58 Where, despite opportunities to discuss the situation with a Board officer, and any relevant professionals, the parents’ proposals for amendments to the proposed statement are refused, or they are unwilling to accept other amendments to the proposed statement, the Board may nonetheless proceed to issue the final statement. It must, however, inform the parents of their right to appeal to the Tribunal with regard to the provision specified in the statement, including the named school, and the procedures to be followed if they wish to do so.

4.59 Recourse to the Tribunal will inevitably be stressful for parents and time-consuming for the Board concerned. To minimise appeals, it is important that Boards seek to ensure that parents have the fullest possible access to information and support during the statutory assessment process and that they are fully involved in contributing to their child’s statement.

Keeping, Disclosure and Transfer of Statements

4.60 A statement must not be disclosed without the consent of the child’s parents except for certain statutory purposes, or in the interests of the child. These purposes are set out in detail in the Regulations.

4.61 Statutory purposes include appeals; investigation of complaints; criminal proceedings; social services assessments; and school inspections. The interests of the child include the provision of information to the child’s school and teachers. It is important that teachers working closely with the child should have a full knowledge of the child’s statement; so too should the Careers Service officers who provide careers guidance to the child’s school and who participate in reviews.
of the child’s statement. Boards of Governors should also have such access to statements as is
commensurate with their duties towards pupils with special educational needs. Any person
properly having access to a child’s statement should bear in mind the need to maintain
confidentiality about the child.

4.62 Disclosure in the interests of the child also includes disclosure to any agencies other than
the Board, who may be referred to in the statement as making educational or non-educational
provision.

4.63 Boards may also give access to the statement to persons engaged in research on special
educational needs on the condition that the researchers do not publish anything derived from or
contained in the statement which would identify the child or parents concerned.

4.64 When the responsibility for a statemented child changes from one Board to another, the
statement must be transferred to the new Board, together with any opinion which may have been
provided under the Disabled Persons (NI) Act 1989 that the child is disabled. Upon the transfer
of the statement, the receiving Board becomes responsible for maintaining the statement, and for
providing the special educational provision specified in the statement.

4.65 The duty to maintain the child at the school specified in Part 4 of the statement therefore
also transfers to the receiving Board. It may place the child temporarily at a school other than
that specified in Part 4 where appropriate - for example, where the distance between the child’s
new home and the school would be too great - prior to the statement being amended in
accordance with the statutory procedures. Otherwise, it must accept any current responsibilities
in relation to payment of fees etc. unless and until it has formally amended the statement.

4.66 The receiving Board may, on the transfer of the statement, bring forward arrangements for
the review of the statement, and may conduct a new assessment regardless of when the previous
assessment took place. It must tell the parents, within 6 weeks of the date of transfer, when it will
review the statement, and whether an assessment is proposed. The former Board and the child’s
school should have alerted the parents to the educational implications of their proposed move.
Where a child with a statement moves outside Northern Ireland, the Board should seek the
agreement of the parents to send a copy of the child’s statement to the new authority.
PART V: CHILDREN UNDER COMPULSORY SCHOOL AGE - ASSESSMENTS AND STATEMENTS

Introduction

5.1 Boards should arrange for young children to be assessed in a place where child and family feel comfortable. The parents’ perspective will be particularly important with these children, and Boards should consider the use of parental guidelines on assessment to encourage parental participation. They should provide full information for parents as to their rights in relation to requesting a statutory assessment and the implications of a statement.

Assessment of Children Under 2

5.2 When a child under 2 is referred to a Board, it is probable that the child will have a particular condition or major health problem which has caused concern at an early stage.

5.3 Assessment of children under 2 need not follow the statutory procedures which are applicable to assessments of children who are aged 2 and over. Statements will be rare for children under 2 and procedures are not specified in legislation. Individual programmes of support should first be considered according to the child’s particular needs. For very young children Boards should consider home-based programmes, or peripatetic services for children with hearing or visual impairment. Some parents may prefer to attend a centre, perhaps in combination with home-based support.

Statements

5.4 If a decision is made to issue a statement, it should include:

- all available information about the child, with a clear specification of the child’s special educational needs;
- a record of the views of the parents and any relevant professionals;
- a clear account of the services being offered, including the contribution of the education service and the educational objectives to be secured and contributions required from any statutory and voluntary agencies; and
- a note of the arrangements for monitoring and review.

5.5 Boards should ensure that any specific educational targets are regularly reviewed and, if necessary, revised. For very young children, reviews more frequently than once a year are likely to be necessary. Any action will require close collaboration with child health services.

Monitoring of Progress

5.6 Careful monitoring of the child’s progress should be a priority and may require liaison with other service providers for young children. Records should contain all information relevant to
identifying and meeting the child's special educational needs so as to avoid duplication of investigations when the child is over 2.

Children Aged 2 and Over

5.7 Nursery schools and classes are expected to follow broadly the same procedures for identifying and meeting young children's special educational needs as are recommended for children of compulsory school age.

Identification of Special Educational Needs

5.8 If the educational and/or developmental progress of a child gives rise to concern, the teacher, if the child is at school, should prepare a written report of the child’s strengths and weaknesses noting evidence for the concern. Use of parent assessment material and developmental checklists should be considered.

5.9 The child health services will alert the parents or school, where appropriate, to the child's potential difficulties. A child development centre or team will provide a multi-professional view at a very early stage. Very early contact with child health services will be important in order to ensure that there is no physical cause for the difficulty in question (such as a hearing or visual impairment) or to secure advice on the possible cause and the effective management of difficult behaviour.

5.10 Children's development and subsequent progress in school will also be affected by their general health status, and all nursery classes, nursery schools and other settings for the care of young children should be aware of how to obtain information and advice on health related matters.

5.11 Boards should seek to make information widely available on procedures for the identification of the special educational needs of young children. This might include an initial record form on which to set out causes for concern and the views of any relevant people; confirm that the parents have been informed; and provide evidence that the child has been observed and that the request for assistance is firmly based. HSS Trusts have duties to register and to review day care arrangements in the statutory and voluntary sectors for children under the age of 12.

5.12 Where a HSS Trust considers that a child may have special educational needs, it must inform the parents of its views, give them an opportunity to discuss those views with one of its officers and then inform the relevant Education and Library Board.

5.13 HSS Trusts must give parents the names of voluntary organisations which might be of assistance when they consider that a child under compulsory school age may have special educational needs. They should give parents information on the full range of local statutory and voluntary services which might help them. Under the Children Order, they must also produce written information on the full range of services in their areas for children in need and ensure that such information reaches those who might need it.
5.14 There should be agreed procedures for acting speedily in order to ascertain whether the needs of such children require specific intervention. The Board may invite an educational psychologist to discuss with the HSS Trust how best to take the matter forward. At this stage advice may be sufficient; referral to a child development centre or team may be made; or the child’s difficulties may require a statutory assessment.

5.15 If a child is already attending a nursery school or class, the broad principles of the school-based stages of assessment, action and review should be followed as for older children. Where the child is attending non-educational provision, the staff will be likely to need advice from the Board about the basis for referral for formal assessment and about the nature of the information or record keeping required.

5.16 Where referral for statutory assessment is made, the child will have demonstrated significant cause for concern. The Board will seek evidence from the referring agency that any strategy or programme has been continued for a reasonable period of time without success, and that there is documentation of the child’s difficulties and any action undertaken to deal with them, including parental involvement.

5.17 In considering statutory assessment, the Board should ascertain:-

i. where the child is attending a school

what school-based strategies may have been used and with what outcome; or

ii. where the child is attending health services, social services, voluntary or private provision

whether concerns have been raised about his or her development, and if outside advice has been sought regarding physical health and function; communication skills; perceptual and motor skills; self-help skills; social skills; emotional and behavioural development; or responses to learning experiences.

5.18 The Board will then assess the evidence and decide whether the child’s difficulties or developmental delays are likely to be resolved only through a multi-professional approach which will require monitoring and review over a period of time. Contributions from other service providers are likely to be of key importance.

**Statements**

5.19 Where a statement is required to be made, this should follow the same format as for other children.

5.20 The Board should ensure that parents have full information on the range of suitable provision available within its area and may wish to offer parents the opportunity to visit such provision and discuss any aspect of the provision with the Named Board Officer.
5.21 Boards should informally review very young children’s statements at least every 6 months to ensure that the provision continues to be appropriate to their needs. Such reviews would complement the statutory annual review and would not require the same range of documentation, though they should reflect the significant changes which can take place in the progress of a child at this age.

**Special Educational Provision**

5.22 For very young children, access to a home-based learning programme or the services of a peripatetic teacher for the hearing or visually impaired may provide the most appropriate help. In the case of a child with a behavioural difficulty, the advice of the clinical psychologist at a child development centre or an educational psychologist may enable the child to remain within an existing service. In some cases it may be appropriate for the child to attend a nursery class or school (either within a mainstream or special school setting) or other pre-school provision.

5.23 All services who work with young children, including home-based learning programmes, should have clearly articulated arrangements for access to their services which should be readily understandable by parents of children with special needs. They should indicate the kind of support which can be provided and any priority admission arrangements.

5.24 If a child is on a child protection register, or there is otherwise a welfare concern, the Board and the HSS Trust may jointly arrange to specify and monitor the provision required to meet the child’s needs. If the child is looked after by the HSS Trust, the Board’s assessment could form part of the Child Care Plan and be regularly reviewed.

**Moving to Primary School**

5.25 In some instances a child may have received considerable support without the need for a statement. If it is decided that the child’s needs will require a statement before entry to primary school, attention should be paid to parental views and all information available from the full range of agencies involved in the assessment process.

5.26 All schools will wish to devise strategies to assess pupils’ current levels of attainment on entry to ensure that they build upon the pattern of learning and experience already established during the child’s pre-school years. If there is a special educational need, the principal, SEN co-ordinator and the child’s class teacher should:

- use information arising from the child’s early years experience to provide starting points for learning;
- identify and focus attention on the child’s strengths and weaknesses and highlight areas for support within the class;
- take action to develop an individualised education plan, as appropriate, and alert relevant professionals;
- ensure that ongoing monitoring provides regular feedback to teachers and parents;
• seek to determine what the child knows, understands and can do, as well as to identify any learning difficulties;

• involve parents in developing and implementing learning programmes at home and in school.

5.27 The outcome of observations of a wide range of service providers will help schools to prepare an entry profile for children who may experience difficulties. Boards should seek to ensure that all such providers, as well as parents, understand the assessment and referral arrangements and that children’s progress is carefully observed and recorded in order to inform any assessment procedure.

5.28 Children with a learning difficulty or developmental delay, and whose parents are deaf or do not have English as a first language, are likely to be particularly disadvantaged if any special educational needs are not identified at the earliest possible stage. Boards should ensure that appropriate help is provided, including interpreter services if necessary, so that early concerns may be shared about the child’s behaviour, health and development. Without such support early identification and intervention may be delayed or ineffective.
PART VI: ANNUAL REVIEW

Introduction

6.1 Boards are required to review all statements at least annually and these reviews should be seen as part of the process of continuous assessment. The first annual review after the child’s 14th birthday is particularly significant in preparation for transition to adult life, for which purpose this review, and any subsequent reviews, will include a formal Transition Plan.

6.2 Annual reviews should normally be based on written reports by schools, incorporating the views of staff and, as far as possible, acknowledging parents’ views, which should always be sought. Where a child’s educational environment has changed during the year, eg at a hospital school or through home tuition, reports should be obtained from those involved. Boards should arrange a reasonable spread of annual review dates with the schools concerned, and parents should always be informed of arrangements.

Objectives

6.3 The annual review should aim to:-

   i. assess progress towards meeting the objectives specified in the statement; and collate information for use in planning future support for the child;

   ii. assess progress towards meeting targets -
    
   a. agreed following the making of the statement, in the case of the first annual review; and
   
   b. set at the previous annual review, in other cases;

   iii. review the special provision made for the child, including the appropriateness of any special equipment provided, in the context of the Northern Ireland Curriculum and associated assessment arrangements. Where appropriate, the school should provide a profile of the child’s levels of attainment and progress. Where the statement modifies or disapplies the statutory curriculum or statutory assessment arrangements, the school should indicate what special arrangements have been made for the child;

   iv. consider, in light of the child’s performance and any additional needs which may have become apparent, whether it might be appropriate to cease to maintain, or amend, the statement; any proposed amendment to a statement should always be discussed with the parents and their views taken into account;

   v. where appropriate, set fresh targets for the coming year.

Annual Reviews for Children at School: Reviews Except the First Review After the Child’s 14th Birthday

6.4 This section applies to all annual reviews except the first review after the child’s 14th birthday.
6.5 The Board initiates the review. It concludes the process by considering a review report and recommendations prepared by the principal, and then makes its own recommendations. These are sent to the school, the child’s parents and all those invited to the review meeting. However, most of the process is school-based, involving close co-operation between everyone concerned.

6.6 Where the principal delegates any prescribed duties to a teacher at the school, all those involved in the review should be informed. The principal should ensure that the designated teacher is aware of all relevant health and social services representatives, and any individual professionals who should be invited to the review.

**Preparation for the Review**

6.7 The Board must initiate the review by formally requesting the principal in writing, with a copy to the child’s parents, to convene a review meeting and prepare a review report. At least 2 months’ notice must be given of the day by which the review report must be returned to the Board. The Board must tell the principal who should be asked to contribute to the review and attend the review meeting. Those invited to the review meeting must include:

- a representative of the Board;
- the child’s parents, or if the child is looked after by a HSS Trust, his or her carer or social worker;
- a relevant teacher, (who may be the child’s teacher, the school’s SEN co-ordinator, or some other person responsible for the provision of education for the child, the choice resting with the principal.) In some schools, for example small schools, the functions of principal and relevant teacher may be fulfilled by one person.

6.8 The Board may advise that health or social services representatives should be invited to contribute to the review and attend the meeting; or the principal may invite such representatives as he or she sees fit, even if not asked to do so by the Board. It is advisable when inviting professionals to attend a review meeting to indicate the priority attached to their attendance. Schools should explain to parents that professionals will not always be able to attend all review meetings and that if, beyond the review meeting, parents wish to discuss matters of concern in the professionals’ reports, they should first approach the Named Board Officer. Where a child is placed outside the area of the Board responsible for the statement, a representative of that Board, and relevant professionals, should where possible attend the review meeting.

6.9 In preparing for the review meeting, the principal must request written advice from the child’s parents, all those specified by the Board and any others considered to have a contribution to make. The principal must circulate the advice received at least 2 weeks in advance, inviting additional comments, including comments from people who may be unable to attend.

6.10 Health and Social Services Boards and Trusts are required by Article 14 to respond to requests for written advice, subject to the exceptions stated in paragraph (4) of that Article. Other people from whom the principal requests written advice should also respond, although they are not under a statutory duty to do so.
6.11 The evidence and comments received, together with an account of the meeting, form the basis of the review report. Where a parent does not respond to an invitation to contribute in writing to the review, or to attend a review meeting, this should be noted in the report with any reasons given. Where possible, pupils should be encouraged to provide their own account of their progress and any difficulties encountered.

**Involvement of Parents**

6.12 Where a parent or pupil seeks independent support or guidance, referral to a relevant voluntary organisation may be helpful. They may of course bring a friend, relative or adviser to the meeting.

6.13 If communication problems arise because of a sensory or physical impairment, or because the parents are not fluent in English, appropriate arrangements should be made to ensure the availability of all relevant information in an appropriate form, for example in Braille, large print or on tape, and to facilitate communication at the review meeting, e.g. through interpreters.

6.14 Where a statemented child is subject to a care order, the HSS Trust designated by the order will share parental responsibility with the child’s parents. The extent of the contribution to be made by parents and carers should be determined by the HSS Trust. Where a statemented child is looked after by a HSS Trust, but is not the subject of a care order, the child’s parents retain complete parental responsibility; i.e. it is not shared with the HSS Trust.

6.15 Where a HSS Trust maintains a Child Care Plan, this will be subject to regular review involving the child or young person, and the annual review of the statement might usefully be linked with this process to provide an integrated approach to meeting the child’s needs.

**Review Meeting**

6.16 The review meeting will normally take place in the child’s school and should be chaired by the principal or the teacher to whom responsibility for the school-based elements of the review has been delegated. The following questions should be addressed and appropriate recommendations made:

- what are the parents’ views of the past year’s progress and their aspirations for the future?
- what are the pupil’s views of the past year’s progress and his or her aspirations for the future?
- what is the school’s view of the child’s progress over the past year? What has been the child’s progress towards meeting the overall objectives in the statement? What success has the child achieved in meeting the targets set?
- have there been significant changes in the child’s circumstances which affect his or her development and progress?
is current provision, including the Northern Ireland Curriculum, or arrangements substituted for it, appropriate to the child’s needs?

• what educational targets should be adopted against which the child’s educational progress will be assessed during the coming year and at the next review?

• is the Transition Plan (where the child is over 14) helping the pupil’s progress to adult life?

• is any further action required and if so, by whom?

• does the statement remain appropriate?

• are any amendments to the statement required or should the Board be recommended to cease to maintain it?

**The Annual Review for Children with Statements whose Education is Otherwise Than at School**

6.17 When a child is educated otherwise than at school, the arrangements for annual review will remain generally the same as for children in schools. However, the Board will convene the review meeting and the range of professionals involved may be wider and in some respects different from those involved in a school-based review. The review meeting might take place in the Board’s offices or at hospital; it should be chaired by a Board officer and the parents should be invited to attend. When a child is educated otherwise than at school because of major difficulties relating to health or a disability, the views of the child’s doctor should be sought. The attendance of professional advisers from the relevant child health services will be particularly important.

6.18 In the case of a child who has been excluded from school and is being educated through home tuition or otherwise, the views of the child’s teacher and any other professionals who know the child should be sought. Parents may wish to be accompanied to the review meeting by a friend, relative or adviser.

**Action Following Annual Reviews**

6.19 Following the annual review meeting, the principal (or the Board, if the child is being educated otherwise than at school) must prepare and circulate to all concerned a report summarising outcomes and setting out any educational targets for the coming year. Boards may wish to offer guidance as to the preferred form of such reports. The Board must then review the statement, in the light of the review report and any other relevant information, and make its own recommendations. If the child is over 15, it should consider whether any amendment is necessary to the Transition Plan. The Board’s recommendations, and any amended Transition Plan, should be conveyed to the child’s school, parents and all those invited to the review meeting, before the statutory deadline for review.

6.20 A review meeting may recommend amendments to a statement if:-

i. significant new needs have emerged which are not recorded on the statement;
ii. significant needs which are recorded on the statement are no longer present;

iii. the provision should be amended to meet the child’s changing needs and the targets specified at the review meeting; or

iv. the child should change schools, either at the point of transfer between school phases, or when his or her needs would more appropriately be met in a different school, for example by integration into mainstream.

6.21 The review meeting and the review report may also recommend that the Board should cease to maintain the statement.

A Change of School

6.22 The child’s transfer between phases should be carefully considered at the review meeting during the last year in the child’s current school. If necessary, it should be brought forward to allow sufficient time for consideration of the school which will be appropriate for the child in the next phase. Arrangements for a child’s placement should be finalised by the beginning of the child’s last term before transfer so as to allow time for any advance arrangements relating to that placement to be made and to ensure that parents feel confident and secure about the arrangements. Secondary and primary schools in an area should consider developing a common system of record-keeping to ease transfer of pupils between schools.

6.23 Parents have the statutory right to request the Board to substitute the name of a grant-aided school for the school named in the statement. The Board must comply with the request:

- so long as it is made more than 12 months after a similar request; the issue of a final copy of the statement or of an amendment to the statement; or the conclusion of an appeal to the Tribunal about the provision specified in the statement, whichever is the latest;

- and so long as the school is suitable for the child; and attendance would be compatible with the efficient education of other children at the school and with the efficient use of resources.

6.24 If these conditions apply, the Board must amend the statement to name the school proposed by the parents, having first consulted the Board of Governors of the school to be named, and, if the school is in the area of another Board, that Board. In some cases it may be reasonable for the Board to specify in the statement the date on which the child is to start attending the new school; eg to coincide with the start of a new term, or give sufficient time for the school to make necessary preparations for the child’s arrival. If the Board concludes that it cannot name the school proposed by the parents, it must tell the parents, in writing, of the reasons for its decision and their right to appeal to the Tribunal. Normally, parents should be told of the Board’s decision within 8 weeks of their initial request.

6.25 If the child is due to transfer between phases, the Board must name a school which will be appropriate for that child. It should do so in consultation with the child’s parents, following the
statutory procedures for amending statements.

**Amending the Statement**

6.26 Where the Board proposes to amend a statement, whether to change the name of the school in Part 4 or for any other reason, it must write to the child’s parents, informing them of that proposal and of their right to make representations within 15 days of the receipt of that proposal. Boards should always explain the reasons for the proposal and provide copies of relevant evidence. A proposal to amend the statement will most often arise from the annual review, in which case the parents should have already received copies of the review report and the Board’s recommendations.

6.27 The Board must consider any representations made by the parents before deciding whether and how to amend the statement. Any amendment must be made within 8 weeks of sending the letter of proposal to the parents. The Board must write to the parents informing them of the decision, enclosing a copy of the amended statement and any relevant advice, and giving details of the parents’ rights of appeal. If the Board decides not to go ahead with the amendment, it must again write to the parents within 8 weeks of the original letter. In either case, the parents should be advised of the reason for the Board’s decision.

**Ceasing to Maintain the Statement**

6.28 A statement will remain in force until the Board ceases to maintain it, or until the child is no longer its responsibility, for example, on moving to further or higher education or to social services provision, in which case the statement will lapse. The Board may cease to maintain a statement for a child only if it considers that it is no longer necessary to maintain it. It must first write to the child’s parents to give notice of the decision, and may not cease to maintain the statement until 2 months after it has so written. The Board must then cease to maintain the statement within a further period of 4 weeks. The Board must always explain its decision to the parents and their right of appeal to the Tribunal, and should provide copies of any relevant evidence.

6.29 There should therefore be no assumption that, once the Board has made a statement, it should be maintained until the Board is no longer responsible for the young person. Statements should be maintained only when necessary: if the Board concludes that it should cease to maintain a statement, any additional resources attached to it can be released to help other children. Such decisions should, however, be made only after careful consideration of all the circumstances and consultation with the parents. The Board should take into account the outcomes of recent annual reviews and should consider whether the objectives of the statement have been achieved. Notwithstanding the (partial) achievement of these objectives, the Board should particularly consider whether progress might be halted or reversed if the provision specified in the statement were not made.

**Further Statutory Assessments**

6.30 Where the parents of a child with a statement request a new assessment of their child, the Board must comply, so long as no such assessment has been made within the previous 6 months.
and the Board concludes that it is necessary to make a further assessment. In considering such requests, account should be taken of whether there have been any significant changes in the circumstances of the child. If the request follows an annual review, much of the information on which to base a decision will already be available.

6.31 If the Board concludes that a further assessment is not necessary, it must write to the parents, telling them of the decision and the reasons for it, and of their right to appeal to the Tribunal. The Board should also write to the child’s school. The Board may wish to arrange a meeting between the parents and the school.

6.32 If the Board decides that a further assessment is necessary, the procedures in Part 3 of this Code apply. Thereafter, if the Board decides to amend the statement, the relevant procedures described above apply. The resultant statement will supersede the previous statement.

**Annual Reviews from Age 14 to 19**

6.33 Some pupils with statements of special educational needs will remain at school after the age of 16 and Boards remain responsible for such pupils until the end of the term during which they reach 19. Whether the child is to remain at school or not, however, the annual review has an additional significance as he or she approaches the age of 16.

6.34 The first annual review after the young person’s 14th birthday should involve the agencies who will play a major role during the post-school years. The transfer of relevant information should ensure that young people receive any necessary specialist help or support during their continuing education and training after leaving school.

**The First Annual Review After the Young Person’s 14th Birthday**

6.35 The annual review procedure described above applies with the following exceptions:

- the Board convenes the review meeting, whether or not the young person is at school. It must invite the child’s parents and relevant member of staff, anyone specified by the principal (if the young person is at school) and anyone else the Board considers appropriate;

- the Board must invite a representative of the health and social services authority to the meeting;

- the Board must invite the careers service to be represented at the review meeting, to enable all options for further education and training opportunities to be given serious consideration. The careers service will also be able to identify any specific targets which should be set as part of the annual review to ensure that independence training, personal and social skills, and other aspects of the wider curriculum are fully addressed during the young person’s last years at school;

- the Board prepares the review report and the Transition Plan after the meeting, and circulates these to the parents, the principal, all those from whom advice was sought, all those attending the review meeting and any others whom it considers appropriate.
The Transition Plan

6.36 The first annual review after the young person's 14th birthday (and any subsequent annual reviews) should include a Transition Plan, drawing together information from a range of individuals within and beyond the school in order to plan coherently for the young person's transition to adult life. The Board should seek an opinion from the HSS Trust as to whether the child is a disabled person (Section 5 of the Disabled Persons Act 1989 refers) and consult any other professionals who may have a contribution to make.

6.37 The Transition Plan should address the following questions:-

The School

- What are the young person’s curriculum needs during transition? How can the curriculum help the young person to play his or her role in the community; make use of leisure and recreational facilities; assume new roles in the family; develop new educational and vocational skills?

- What approaches should the school be making to other institutions or agencies to ensure smooth transition for the young person?

The Professionals

- How can they develop close working relationships with colleagues in other agencies to ensure effective and coherent plans for the young person in transition?

- Which new professionals need to be involved in planning for transition, for example occupational psychologists or therapists?

- Does the young person have any special health or welfare needs requiring HSS Trust support?

- What specific independence skills need to be particularly fostered during the remaining year(s) in school?

- Are assessment arrangements for transition clear, relevant and shared between all agencies concerned?

- How can information best be transferred from children's to adult services to ensure a smooth transition?

- Do the arrangements for transition include appropriate training and technological support, (eg in encouraging independence in travel, coping with money)?

- Is education after the age of 16 appropriate, and if so, at school or at a college of further education?
The Family

- What do parents expect of their son's or daughter's adult life?
- What can they contribute in terms of helping their child develop personal and social skills, an adult life-style and acquire new skills?
- Will parents experience new care needs and require practical help in terms of aids, adaptations or general support during these years?

The Young Person

- What information do young people need in order to make informed choices?
- What local arrangements exist to provide advocacy and advice if required?
- How can the young person be encouraged to contribute to his or her own Transition Plan and make positive decisions about the future?
- If the young person is living away from home or attending a residential school outside his or her own Board area, are there special issues relating to the location of services when he or she leaves school which should be discussed in planning?
- What are the young person's hopes and aspirations for the future, and how can these be met?

6.38 The Transition Plan should build on the conclusions reached and targets set at previous annual reviews, including the contributions of teachers responsible for careers education and guidance. It should focus on strengths as well as weaknesses and cover all aspects of the young person's development, allocating clear responsibility for different aspects of development to specific agencies and professionals. Boards should advise schools on the proper balance of the transition programme components and ensure that all relevant information is available, together with advice and support as required. HSS Trusts and the careers service should be actively involved in the plan.

Involvement of Health and Social Services

6.39 The first annual review after a child's 14th birthday will have a special significance because of the Board's statutory duty under Section 5 of the Disabled Persons (NI) Act 1989 to seek an opinion from the HSS Trust as to whether a child with a statement is a disabled person and may require services from a HSS Trust when leaving school.

6.40 The Board should inform the designated officer of the HSS Trust:-

a. of the date of the first annual review after the child's 14th birthday;

b. if at any time after this review the child's circumstances change and as a result the child may be considered to be disabled; and
c. of the expected school leaving date between 8 and 12 months in advance (if it is agreed the child is disabled).

6.41 It should be noted that young people may choose not to be assessed as disabled and may similarly choose not to request help through the HSS Trust community care arrangements. Boards should be in a position to provide information about any relevant voluntary organisations or professional agencies, if required, and schools should have appropriate information available on local sources of help and advice.

6.42 HSS Trusts have statutory duties to make arrangements for young people over 18 who are regarded as being in need and who have been looked after by them, or received services from them, prior to that date, and Boards should ensure that the young person is aware of this. Where a young person has been looked after in a foster placement or a residential home, or has attended a residential school outside his or her own area, the Board should seek to ensure liaison between all relevant Boards and HSS Trusts.

The Role of the Careers Service

6.43 Careers service representation must be invited to the first annual review following the young person’s 14th birthday, and should also be invited to all subsequent annual reviews. Vocational guidance should be presented in the wider context of information on further education and training courses and should take fully into account the wishes and feelings of the young person concerned, as far as these can be ascertained. The careers officer with specialist responsibilities should provide continuing oversight of, and information on, the young person’s choice of provision, and assist the Board and school in securing such provision and providing advice, counselling and support as appropriate. In some circumstances, careers officers may also wish to involve occupational psychologists, who can contribute to the development of a vocational profile of a young person for whom future planning is giving cause for concern. Schools may in particular welcome guidance on curriculum development in independence, social or other skills, and ways of involving young people themselves in assessment and in strategies to address any behavioural or other problems which may otherwise adversely affect their further education or further employment.

6.44 Records of Achievement should be used, with the young person’s consent, to provide information to colleges or any other provision to which the young person may move on leaving school. Where appropriate, Records of Achievement may need to be produced in Braille as well as in print, make use of pictorial or abstract symbol systems, or include a range of illustrative material (including supporting photographs, tapes or videos) which provide information on the young person.

Transfer to Further Education or Training

6.45 Statements of special educational needs are not maintained in respect of students enrolled at institutions of further or higher education or young persons attending training courses.

6.46 Where, however, a Board has maintained a statement in respect of a young person who is transferring from school to further education or training, it should seek the agreement of the
young person to pass on relevant information to the college or other provision to be attended. Relevant information would include the statement and the report of the most recent annual review, including the transition plan.

6.47 Boards should seek to explain the importance of the information and the potential benefit to be gained from its transfer, but should respect the wishes of the young person. Where there is reluctance to consent to the transfer because the information might appear to present too negative a picture, the Board should consider in consultation with the young person whether the essential information might be expressed more positively, perhaps in terms of an action plan for future development. The Board should also consider including information such as Records of Achievement which present a more positive light and provide information about wider interests and abilities.

6.48 Where schools have fostered links with local further education colleges, this can help inform the decision-making process. Link provision with colleges can be of particular benefit to a young person with special educational needs by providing opportunities for integration, extending the curriculum and offering induction into an adult environment.

**The Involvement of Young People in Assessment and Review**

6.49 The views of young people should be sought and recorded wherever possible in any assessment, reassessment or review during the years of transition. Some young people may wish to express these views through a trusted professional, family, independent advocate or adviser, or through an officer of the Board. Effective arrangements for transition will involve young people addressing issues of personal development, self-advocacy, awareness of the implications of any long-term health problem or disability and the acquisition of independent living skills.

6.50 The regular involvement of young people themselves in the annual review process should also be encouraged, for example:

- by incorporating their own views in planning for transition; this might involve the use of student counsellors, advocates or advisers, social workers or peer support;
- by focusing curriculum planning on activities which encourage young people to review their own experiences and formulate their own views;
- where appropriate, by providing help for a young person to come to terms with the wider implications of a disability or special need in adult life;
- by supporting such involvement with information, careers guidance, counselling, work experience and the opportunity to consider a wide range of options during the transition phase.

**Pupils Without Statements but with Special Educational Needs**

6.51 In some instances, a pupil approaching the age of 16 may have special educational needs which do not call for a statement, but which are nevertheless likely to require some support if he or she goes on to further education or training, and Boards and schools should seek to provide
appropriate help and guidance. This might include the provision of school/college link courses or work placements. In some cases, schools may wish to prepare their own transition plans for non-statemented students with special educational needs.
APPENDIX

EVIDENCE TO BE SOUGHT, AND QUESTIONS ASKED, BY BOARDS ABOUT CHILDREN WITH CERTAIN LEARNING DIFFICULTIES OR DISABILITIES

LEARNING DIFFICULTIES

A.1 Some children with learning difficulties will be identified before school age and the great majority should be identified very early in their school careers. Their general level of academic attainment will be significantly below that of their peers. In most cases, they will have difficulty acquiring basic literacy and numeracy skills and many will have significant speech and language difficulties. Some may also have poor social skills and may show signs of emotional and behavioural difficulties.

A.2 Where children have severe learning difficulties (SLD) or profound and multiple learning difficulties (PMLD), the Board will be able to draw upon a considerable body of existing knowledge arising from assessments and provision made by child health and social services, who may have been involved with the children and their families from a very early stage. Many children with SLD or PMLD will have additional secondary disabilities, and assessment arrangements should take account of the possibility of such disabilities.

The Child's Learning Difficulty

A.3 The Board should seek clear recorded evidence of the child's academic attainment and ask, for example, whether:

i. the child is not benefiting from working on programmes of study relevant to the Key Stage appropriate to his or her age, or is the subject of any direction making a temporary exception from the Northern Ireland Curriculum;

ii. the child is working at a level significantly below that of his or her contemporaries in any of the areas of study of the Northern Ireland Curriculum - for example, under the current 8-level graduation of achievement, an 8 year old child who is working towards Level 1 or a 13 year old working at Level 2;

iii. there is evidence that the child is falling progressively behind the majority of children of his or her age in academic attainment in any of the Northern Ireland Curriculum programmes of study as measured by NI Curriculum assessments, other standardised tests or teachers' own recorded assessments of a child's classroom work, including any portfolio of the child's work;

iv. there is any evidence of impaired social interaction or communication or a significantly restricted repertoire of activities, interests and imaginative development;

v. there is evidence of significant problems in the child's home or family circumstances or in his or her school attendance record;
vi. there is evidence of significant emotional or behavioural difficulties, as indicated by clear recorded examples of withdrawn or disruptive behaviour; a marked and persistent inability to concentrate; difficulties in establishing and maintaining balanced relationships with his or her fellow pupils or with adults; and any other evidence of a significant delay in the development of life and social skills;

vii. there is any evidence of contributory medical problems or evidence from assessments or interventions by child health or social services. Information from such assessments and interventions will be particularly important in the case of children with SLD or PMLD, whose needs are unlikely to be appropriately assessed without an interdisciplinary perspective.

The Child’s Special Educational Provision

A.4 In the light of evidence about the child’s learning difficulty, Boards should consider the action taken by the school and, in particular, should ask whether:-

i. the school has, consulting outside specialists, formulated, monitored and regularly evaluated individualised education plans, including structured literacy and/or numeracy support programmes, with clear targets; and the child’s progress within such programmes, measured by criterion-referenced or standardised tests, is significantly and consistently less than that which may be expected for the majority of children following such programmes;

ii. the school has sought the views of and involved the child’s parents at each stage;

iii. the school has explored the possible benefits of information technology and/or school/classroom organisational strategies;

iv. the school has implemented its policy on pastoral care and guidance and sought external advice to meet any social, emotional or behavioural difficulties;

v. the school has, with the parents’ consent, notified and sought the assistance of the school doctor and/or the child’s general practitioner, as appropriate.

A.5 Where the balance of evidence presented to and assessed by the Board suggests that the child’s learning difficulties:-

- are significant and/or complex;
- have not responded to relevant and purposeful measures taken by the school and any external specialists involved; and
- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
SPECIFIC LEARNING DIFFICULTIES
(FOR EXAMPLE DYSLEXIA)

A.6 Some children may have significant difficulties in reading, writing, spelling or manipulating numbers, which are not typical of their general level of performance, especially in other areas of the curriculum. They may gain some skills in some subjects quickly and demonstrate a high level of ability orally, yet may encounter sustained difficulty in gaining literacy or numeracy skills. Such children can become severely frustrated and may also have emotional and/or behavioural difficulties.

The Child's Learning Difficulty

A.7 The Board should seek clear, recorded evidence of the child's academic attainment and ask, for example, whether:

i. there are significant discrepancies between attainment in different programmes of study of the Northern Ireland Curriculum or within one programme of study. Boards should be especially alert if there is evidence that, in English, a child has attained average or high levels in speaking and listening, but significantly lower levels in reading and/or writing;

ii. expectations of the child, as indicated by a consensus among those who have taught and closely observed him or her, supported, as appropriate, by appropriately administered standardised tests of cognitive ability or oral comprehension, are significantly above his or her attainments in Northern Ireland Curriculum assessments and tests and/or the results of appropriately administered standardised reading, spelling or mathematics tests;

iii. there is clear, recorded evidence of clumsiness; significant difficulties of sequencing or visual perception; deficiencies in working memory; or significant delays in language functioning;

iv. there is evidence of problems sometimes associated with specific learning difficulties, such as severe emotional and behavioural difficulties, as indicated by clear, recorded examples of withdrawn or disruptive behaviour, an inability to concentrate or to organise his or her work, or signs that the child experiences considerable frustration or distress in relation to his or her learning difficulties. Boards should be particularly alert if there is evidence of such difficulties in some classes or tasks such as reading or writing but not in others.

The Child's Special Educational Provision

A.8 In the light of evidence about the child's learning difficulty, the Board should consider the action taken by the school and, in particular, should ask whether:

i. the school has taken action to make both the curriculum and the school day accessible to the child by alerting all teachers to the child's particular needs, helping the child
develop appropriate practices for taking down and recording information (including, where appropriate, the use of material photocopied in advance), adopting appropriate marking policies and promoting the use of such devices as personal dictionaries;

ii. the school has formulated, closely monitored and fully evaluated, in conjunction with external experts, individualised education plans, including structured literacy programmes involving, for example:-

- **for reading:** a reading programme structured to respond to the child’s particular strengths and weaknesses as revealed by a diagnostic assessment of the child’s reading performance;

- **for spelling:** a structured spelling support programme promoted and monitored by teachers across the curriculum, such as simultaneous oral spelling linked to the development of connected writing;

- **the use of multi-sensory teaching strategies:** directed to developing the basic skills of reading, spelling or number;

iii. the school, consulting external specialists, including educational psychologists, has monitored the child’s progress as a result of the action taken and has clearly demonstrated through, for example, appropriately applied reading and spelling tests and teacher assessment, that the child has not made significant progress and/or that the child’s level of attainment is falling further behind that of the majority of children;

iv. the school has taken into account, investigated and recorded parental concern, and has sought to enlist the support of parents by involving them in creating, delivering and evaluating detailed plans to help their child inside and outside school;

v. the school has explored the possible benefits of information technology, eg word processing/spell-checker, for use across the curriculum;

vi. the school has closely monitored the child’s emotional and behavioural responses to his or her learning difficulties and, if necessary, has provided help to reduce anxiety and enhance self-esteem;

vii. the school has, with the parents’ consent, notified and sought the assistance of the school doctor and/or the child’s general practitioner, as appropriate.

A.9 Where the balance of evidence presented to and assessed by the Board suggests that the child’s learning difficulties:-

- are significant and/or complex;

- have not responded to relevant and purposeful measures taken by the school and external specialists; and
may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area, the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
EMOTIONAL AND BEHAVIOURAL DIFFICULTIES
(EBD)

A.10 Pupils with EBD have learning difficulties as defined above. They may fail to meet expectations in school and in some, but by no means all, cases may disrupt the education of others. Such difficulties may result, for example, from abuse or neglect; physical or mental illness; sensory or physical impairment; a specific learning difficulty; or psychological trauma. In some cases, they may arise from, or be exacerbated by, circumstances within the school environment. They may become apparent in a wide variety of forms, sometimes depending on the age of the child - including withdrawn, depressive or suicidal attitudes; obsessional preoccupation with eating habits; school phobia; substance misuse; disruptive, anti-social and uncooperative behaviour; and frustration, anger and threat of or actual violence. They may be associated with other learning difficulties. Teachers should always carefully record instances of behavioural disturbance, even when there is no apparent cause.

The Child's Learning Difficulty

A.11 The Board should seek clear, recorded evidence of both the child's academic attainment and the nature of the difficulties, asking, for example, whether:-

i. there is a significant discrepancy between a. the child's cognitive ability and expectations of the child as assessed by his or her teachers, parents and others directly concerned, supported, as appropriate, by appropriately administered standardised tests and b. the child's academic attainment, or aspects of attainment, as measured by Northern Ireland Curriculum assessments and/or teachers' own recorded assessments of classroom work, including any portfolio of the child's work compiled to illustrate progress;

ii. the child is unusually withdrawn, lacks confidence and/or is unable to form purposeful and lasting relationships with peers and adults: the Board will look for clear, detailed evidence from the school and external specialists based on close observation of the child;

iii. there is evidence of severely impaired social interaction or communication, or a significantly restricted repertoire of activities, interests and imaginative development;

iv. school attendance is irregular: the Board will wish to establish whether there is any pattern to or cause of the child’s non-attendance;

v. there is clear, recorded evidence of any obsessional eating habits;

vi. there is clear, recorded evidence of any substance or alcohol misuse;

vii. the child displays unpredictable, bizarre, obsessive, violent or severely disruptive behaviour. The board will wish to establish whether there is any pattern to such behaviour, for example whether it is confined to a particular class, teacher, task or
given set of circumstances, and will seek clear examples in the form of specific recorded instances over a period of time, usually not less than a term;

viii. the child has participated in or has been subject to bullying at school; has been subject to neglect and/or abuse at home; and/or has faced major difficulties at home: again, the Board will seek clear, recorded evidence;

ix. there is any suggestion that the child may have a significant mental or physical health problem: the Board should be alert to any sudden unpredictable changes in the child's behaviour which have no obvious cause, but which might indicate a developing neurological impairment, epilepsy, or another physical cause.

The Child's Special Educational Provision

A.12 In the light of this evidence, the Board should consider the action taken by the school and others to meet the child’s needs and, in particular, may wish to ask whether:-

i. the school has sought appropriate external advice and then, following thorough discussions with the child, has formulated, implemented, monitored and evaluated individualised education plans, including a behaviour management programme;

ii. the school has followed, as appropriate in the individual case, the provisions of its policies on behaviour and on pastoral care and guidance;

iii. all staff have been fully informed of the child’s difficulties and a consistent approach to remedying these difficulties has been taken across the school;

iv. the school has sought a constructive relationship with the child’s parents/carers, encouraging them to participate in their child’s education, including visiting the school on a regular basis;

v. the school has, where appropriate, notified and sought the involvement of the education welfare service and/or social services;

vi. the school has explored the possible benefits of information technology across the curriculum as a means of motivating and stimulating the child;

vii. the school has, with the parents’ consent, notified and sought the assistance of the school doctor and/or the child’s general practitioner, as appropriate.

A.13 Where the balance of evidence presented to and assessed by the Board suggests that the child’s emotional and behavioural difficulties:-

- are significant and/or complex;

- have not responded to relevant and purposeful measures taken by the school and external specialists; and
may call for special educational provision which cannot be reasonably be provided within the resources normally available to mainstream schools in the area, the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
A.14 A child's physical disabilities may be the result of an illness or injury, which might have short- or long-term consequence, or may arise from a congenital condition. Such difficulties may, without action by the school or the Board, limit the child’s access to the full curriculum. Some children with physical disabilities may also have sensory impairments, neurological problems, behavioural problems and/or learning difficulties.

**The Child's Learning Difficulty/Disability**

A.15 The Board should seek clear, recorded evidence of both the child’s academic attainment and the nature of his or her physical disability, asking, for example, whether:-

i. there is a significant discrepancy between the child’s attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers’ own recorded assessments of the child’s classroom work, including any portfolio of the child’s work, and the attainments of the majority of children of his or her age;

ii. there is a significant discrepancy between expectations of the child as assessed by the child’s teachers, parents and external specialists who have closely observed him or her, supported, as appropriate, by the results of standardised tests of cognitive ability, and the child’s attainment as measured by NI Curriculum assessments and tests and/or teachers’ own recorded assessments of his or her classroom work;

iii. the child is unable fully to take part in particular aspects of the school’s curriculum without close adult supervision and/or substantial adaptation of teaching materials or the environment;

iv. there are significant difficulties with mobility; significant self-help difficulties in, for example, dressing, toileting or feeding; and/or serious safety issues;

v. there is clear substantiated evidence based on specific examples that the child’s inability to take full part in school life places the child under significant emotional or physical stress.

**The Child's Special Educational Provision**

A.16 In the light of evidence about the child’s academic attainments and physical disability, the Board should consider the action taken by the school and, in particular, should ask whether the school has:-

i. explored the possible benefits of information technology across the curriculum;

ii. formulated, implemented, monitored and evaluated individualised education plans to support full access to the curriculum and has given consideration, for example, to the child’s space requirements in the classroom and such matters as the storage and maintenance of equipment;
iii. fully applied the access provisions of its SEN policy in the case of the individual child concerned and has taken all reasonable steps to improve access to independent learning and the physical environment of the school for the child, seeking external advice on basic adaptations from, for example, the Board, social services, health and safety experts and voluntary organisations;

iv. with the parents’ consent, notified and sought the assistance of the school doctor and/or the child’s general practitioner as appropriate.

A.17 Where the balance of the evidence presented to and assessed by the Board suggests that the child’s learning difficulties and/or disabilities:

- are significant and/or complex;
- have not been met by relevant and purposeful measures taken by the school and external specialists; and
- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
SENSORY IMPAIRMENTS: HEARING DIFFICULTIES

A.18 A significant number of children have some degree of hearing difficulty. Temporary hearing losses are usually caused by the condition known as ‘glue ear’ and occur most often in the early years. Such hearing losses fluctuate and may be mild or moderate in degree. They can seriously compound other learning difficulties. Schools should be alert to such evidence as persistently discharging ears.

A.19 Permanent hearing losses are usually sensori-neural and vary from mild through moderate, to severe or profound. Children with severe or profound hearing loss may have severe or complex communication difficulties. Early recognition, diagnosis and treatment, and specialist support for pupils with hearing difficulties, are essential to ensure that the child’s language acquisition, academic achievement and emotional development are not adversely affected.

The Child's Learning Difficulty/Disability

A.20 The Board should seek clear recorded evidence of both the child’s academic attainment and the extent and nature of his or her hearing difficulty, asking, for example, whether:

i. there is a significant discrepancy between the child’s attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers’ own recorded assessments of a child’s classroom work, including any portfolio of the child’s work, and the attainment of the majority of children of his or her age;

ii. there is a significant discrepancy between the expectations of the child as assessed by the child’s teachers, parents and external specialists who have closely observed the child, supported, as appropriate, by the results of standardised tests of cognitive ability, and the child’s attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers’ own recorded assessments of his or her classroom work;

iii. there is clear recorded evidence of the extent and nature of the child’s hearing loss in the form of the results of any recent audiometric assessment, with relevant audiograms;

iv. there is clear recorded evidence that the child’s hearing difficulty significantly impairs his or her emotional or social development, access to the curriculum, ability to take part in particular classroom activities or participation in aspects of school life;

v. there is clear substantiated evidence, based on specific examples, that the child’s hearing difficulty places the child under stress, with associated withdrawn or frustrated behaviour.

The Child's Special Educational Provision

A.21 In the light of evidence about the child’s academic attainment and hearing difficulty, the Board should consider the action taken by the school and, in particular, should ask whether:
i. the school has taken the advice of appropriate external specialists, including for example qualified teachers of the deaf and, where appropriate, other specialists employed by the Board or by voluntary bodies such as the National Deaf Children’s Society or RNID;

ii. the school has formulated, implemented, monitored and evaluated individualised education plans to support full access to and active involvement in the curriculum and the school’s life, addressing such matters as the child’s positioning in the class, the scope for paired activities with hearing children or adults and the use of hearing aids and other relevant equipment;

iii. all teachers and adults in the school have been alerted to the nature of the child’s deafness and are aware of basic measures they should take to overcome or circumvent the child’s hearing difficulty;

iv. the school has sought the views of, and involved, the child’s parents at each stage;

v. the school has explored the possible benefits of information technology across the curriculum;

vi. the school has, with the parents’ consent, notified and sought the assistance of the school doctor and/or the child’s general practitioner, as appropriate.

A.22 Where the balance of the evidence presented to and assessed by the Board suggests that the child’s learning difficulties and/or disabilities:

- are significant and/or complex;
- have not been met by relevant and purposeful measures taken by the school and external specialists; and
- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
SENSORY IMPAIRMENTS: VISUAL DIFFICULTIES

A.23 Visual difficulties take many forms with widely differing implications for a child's education. They range from relatively minor and remedial conditions to total blindness. Some children are born blind; others lose their sight, partially or completely, as a result of accidents or illness. In some cases visual impairment is one aspect of multiple disability. Whatever the cause of the child's visual impairment, the major issue in identifying and assessing the child's special educational needs will relate to the degree and nature of functional vision, partial sight or blindness, and the child's ability to adapt socially and psychologically as well as to progress in an educational context.

The Child's Learning Difficulty/Disability

A.24 The Board should seek clear recorded evidence of both the child's academic attainment and the nature of his or her visual difficulty, asking, for example, whether:-

i. there is a significant discrepancy between the child's attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers' own recorded assessments of a child's classroom work, including any portfolio of the child's work, and the attainment of the majority of children of his or her age;

ii. there is a significant discrepancy between the expectations of the child as assessed by the child's teachers, parents and external specialists who have closely observed the child, supported, as appropriate, by the results of standardised tests of cognitive ability, and the child's attainment as measured by Northern Ireland Curriculum assessments and tests and/or teachers' own recorded assessments of his or her classroom work;

iii. there is clear recorded evidence of the extent of the child's visual difficulty, in the form of assessments of the level of the child's functional vision;

iv. there is clear recorded evidence that the child's visual difficulty significantly impairs his or her mobility, emotional or social development, access to the curriculum, ability to take part in particular classroom activities or participation in aspects of school life;

v. there is clear substantiated evidence, based on specific examples, that the child's visual difficulty places the child under stress, with associated withdrawn or frustrated behaviour.

The Child's Special Educational Provision

A.25 In the light of evidence about the child's academic attainments and visual disability, the Board should consider the action taken by the school and, in particular, should ask whether the school has:-

i. taken the advice of appropriate external specialists;
ii. formulated, implemented, monitored and evaluated individualised education plans to support full access to and involvement in the curriculum and school life, ensuring that all teachers are aware of the child's difficulty and adopting appropriate classroom management measures;

iii. fully applied the access provisions of its SEN policy in the case of the individual child and, seeking external advice as appropriate, explored the scope for and followed recommendations regarding physical adaptations - for example in the use of handrails or lighting - to support the child's mobility;

iv. in consultation with external specialists, explored the possible benefits of information technology across the curriculum;

v. sought views of, and involved, the child's parents at each stage;

vi. with the parents' consent, notified and sought the assistance of the school doctor and/or the child's general practitioner, as appropriate.

A.26 Where the balance of the evidence presented to and assessed by the Board suggests that the child's learning difficulties and/or disabilities:

- are significant and/or complex;
- have not been met by relevant and purposeful measures taken by the school and external specialists; and
- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child's special educational needs.
SPEECH AND LANGUAGE DIFFICULTIES

A.27 Although most speech and language difficulties will have been identified before a child reaches school, some children will still have significant speech and language delay or difficulties which impair their ability to participate in the classroom by the time they start school. This may in turn have serious consequences for the child’s academic attainment and also give rise to emotional and behavioural difficulties. The early identification of such speech and language difficulties and prompt remedial action are therefore essential.

The Child’s Learning Difficulty/Disability

A.28 The Board should seek clear recorded evidence of both the child’s academic attainment and the nature of his or communication difficulty, asking, for example, whether:

i. there is a significant discrepancy between the child’s attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers’ own recorded assessments of classroom work, including any portfolio of the child’s work, and the attainment of the majority of children of his or her age;

ii. there is a significant discrepancy between the expectations of the child as assessed by the child’s teachers, parents and external specialists who have closely observed the child, supported, as appropriate, by the results of standardised tests of cognitive ability, and the child’s attainment as measured by Northern Ireland Curriculum assessments and tests and/or teachers’ own recorded assessments of his or her classroom work;

iii. the child’s expressive and/or receptive language development is significantly below that of the majority of children of his or her age as measured by a standardised language assessment test, or there is a major discrepancy between the child’s expressive and receptive levels of functioning;

iv. there is clear substantiated evidence, based on specific examples, that the child’s communication difficulties impede the development of purposeful relationships with adults and/or fellow pupils and/or give rise to other emotional and behavioural difficulties;

v. there is any evidence of a hearing impairment which may co-exist with, or cause, the speech and language difficulty.

The Child’s Special Educational Provision

A.29 In the light of evidence about the child’s academic attainment and communication difficulties, the Board should consider the action taken by the school and, in particular, should ask whether the school has:

i. with the parents’ consent, sought the advice of the school doctor and/or the child’s general practitioner, as appropriate, and of a speech and language therapist and other
external specialists, and together with the child’s parents and involving all teachers concerned with the child, implemented, monitored and evaluated individualised educational plans for the child to support full access to, and involvement in, the school and social life;

ii. closely monitored the child’s emotional and behavioural condition and, where necessary, has provided pastoral help to reduce anxiety and enhance self-esteem;

iii. explored the possible benefits of information technology across the curriculum.

A.30 Where the balance of the evidence presented to and assessed by the Board suggests that the child’s learning difficulties and/or disabilities:

- are significant and/or complex;
- have not been met by relevant and purposeful measures taken by the school and external specialists; and
- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
MEDICAL CONDITIONS

A.31 Some medical conditions may, if appropriate action is not taken, have a significant impact on the child's academic attainment and/or may give rise to emotional and behavioural difficulties. These conditions may include congenital heart disease, epilepsy, asthma, cystic fibrosis, haemophilia, diabetes, renal failure, eczema, rheumatoid disorders, myalgic encephalomyelitis (ME) and leukaemia and childhood cancers.

A.32 Medical conditions such as these may in themselves significantly impair the child's ability to participate fully in the curriculum and the wider range of activities in the school. Some medical conditions will affect the child's progress and performance intermittently, others on a continuous basis throughout the child's school career. Drug therapies, such as those required for the treatment of leukaemia and childhood cancers, may compound the problems of the condition and have implications for the child's education. The medication required for the control of epilepsy may similarly impair concentration and cause difficulties in the classroom. In some instances, children and young people with potentially life-threatening conditions such as cystic fibrosis or heart disease may have periods of hospitalisation and emotional and behavioural difficulties related to their conditions and the associated restrictions on everyday living and the nature of the treatment required.

A.33 Consultation and open discussion between the child's parents, the school, the school doctor or the child's general practitioner, the community paediatrician and any specialist services providing treatment for the child will be essential to ensure that the child achieves maximum progress and also that the child is not unnecessarily excluded from any part of the curriculum or school activity because of anxiety about his or her condition, care and treatment.

The Child's Learning Difficulty/Disability

A.34 The Board should seek clear recorded evidence of both the child's academic attainment and the nature of his or her medical condition, asking, for example, whether:

i. there is a significant discrepancy between the child's attainment, as measured by Northern Ireland Curriculum assessments and tests and/or teachers' own recorded assessments of classroom work, including any portfolio of the child's work, and the attainment of the majority of children of his or her age;

ii. there is a significant discrepancy between the expectations of the child as assessed by the child's teachers, parents and external specialists who have closely observed the child, supported, as appropriate, by the results of standardised tests of cognitive ability, and the child's attainment as measured by the Northern Ireland Curriculum assessments and tests and/or the teachers' own recorded assessments of classwork;

iii. there is clear recorded evidence that the child's medical condition significantly impedes or disrupts his or her access to the curriculum, ability to take part in particular curricular activities or participation in aspects of school life;

iv. there is clear substantiated evidence, based on specific examples, that the child's
medical condition has given rise to emotional or behavioural difficulties, including problems with peer relationships;
v. there is evidence of significant and recurrent absences from school.

The Child's Special Educational Provision

A.35 In the light of evidence about the child’s academic attainment and medical condition, the Board should consider the action taken by the school and, in particular, should ask whether:-

i. the school has, with the parents’ consent, notified and sought the assistance of the school doctor, the child’s general practitioner or any specialist child health service, as appropriate;

ii. all staff have been fully informed of the child’s medical condition and a consistent approach to managing the child’s education has been taken across the school;

iii. the school has sought the views of, and involved, the child’s parents at each stage;

iv. the school has tried to sustain the child’s education, as far as his or her condition permits, during any temporary periods of absence through illness; and, where appropriate, has sought the co-operation of those responsible for the education of children who are at home for longer periods and/or are in hospital.

A.36 Where the balance of the evidence presented to and assessed by the Board suggests that the child’s learning difficulties and/or disabilities:-

- are significant and/or complex;

- have not been met by relevant and purposeful measures taken by the school and external specialists; and

- may call for special educational provision which cannot reasonably be provided within the resources normally available to mainstream schools in the area,

the Board should consider very carefully the case for a statutory assessment of the child’s special educational needs.
GLOSSARY

These definitions relate to terms used in the Code. In the case of terms defined in legislation, the definitions given here are simplified and the full legal definitions can be found in the legislation referred to.

**Annual review:** the review of a statement of special educational needs which an Education and Library Board must make within 12 months of making the statement or, as the case may be, of the previous review.

**Carer:** for the purpose of this Code, a carer is a person named by a HSS authority to care for a child for whom it has parental responsibility, i.e., a child who is the subject of a care order and who has been placed in a residential or foster placement. The carer may qualify as a parent for the purposes of the Education Orders because he or she has care of the child (see the definition of **Parent** below). If so, he or she will have a role to play in the consideration of a child’s special educational needs.

**Child protection register:** a central register which lists all the children who are considered to be suffering from, or are likely to suffer, significant harm and for which there is a child protection plan. This is not a register of children who have been abused but of children for whom there are currently unresolved child protection issues.

**Children ‘in need’:** a child is deemed to be ‘in need’:-

- if he or she is unlikely, or does not have the opportunity to achieve or maintain a reasonable standard of health or development without provision made by a HSS authority; or

- this or her health or development is likely to be significantly impaired, or further impaired, without such provision; or

- he or she is disabled. (Article 17, Children (NI) Order 1995.)

**Disapplication:** removal or lifting of a programme of study, attainment target, assessment, or any other component of the curriculum, or any combination of these including entire subjects or the entire curriculum. (See also **Modification**, below.)

**Education supervision order:** an order that an Education and Library Board may apply for under Article 55 of the Children (NI) Order 1995 to place a child of school age who is not being properly educated under its supervision, with the intention of ensuring that he or she receives efficient full-time education suited to his or her age, aptitude, ability and any special educational needs, and that sufficient support, advice and guidance are provided to the parents.

**Education Welfare Officer:** a person employed by an Education and Library Board to help parents and Boards meet their respective statutory obligations in relation to school attendance. Education Welfare Officers also carry out related functions such as negotiating alternative educational provision for excluded pupils.
Grant-aided school: a school which receives grants from the Department or an Education and Library Board.

Independent school: a school which is not grant-aided, and which is registered under Article 38 of the Education and Libraries (NI) Order 1986.

Information Technology (IT): covers a range of microcomputers, both portable and desktop; generic or integrated software packages, such as word processors, spreadsheets, databases and communication programmes; input devices such as keyboards, overlay keyboards, specialised access switches and touch screens; output devices such as monitors, printers and plotters; storage devices such as CD-ROM, and microelectronics controlled devices such as a floor turtle.

Integration: educating children with special educational needs together with children who do not have special educational needs in mainstream schools wherever possible, and ensuring that children with special educational needs engage in the activities of the school together with children who do not have special educational needs.

Modification: amendment or alteration of a programme of study, attainment target, assessment or any other component of the curriculum in order to give the child access to that area of the curriculum (see also Disapplication above).

Named Board Officer: the person from an Education and Library Board who liaises with parents over the arrangements relating to statutory assessment and the making of a statement. Boards inform parents of the identity of the Named Officer when they issue a notice of a proposal to make a statutory assessment of a child.

Note in lieu: a note issued to the child’s parents and school when, following a statutory assessment, the Board decides not to make a statement. The note should describe the child’s special educational needs, explain why the Board will not make a statement and make recommendations about appropriate provision for the child. All the advice received during the assessment should be attached to the note sent to the parents and, with their consent, should also be sent to the child’s school.

Parent: this is defined in Article 2(2) of the Education and Libraries (NI) Order 1986, as amended by the Children (NI) Order 1995.

Unless the context otherwise requires, parent in relation to a child or young person includes any person:-

- who is not a parent of the child but who has parental responsibility for him or her; or
- who has care of the child.

Parental responsibility has the same meaning as in the Children (NI) Order 1995; and in determining whether an individual has care of a child or young person, any absence of the child or young person at a hospital or boarding school and any other temporary absence shall be disregarded.
Parental responsibility: under Article 5 of the Children (NI) Order 1995, parental responsibility falls upon:-

- a child’s father and mother who were married to each other at the time of the child’s birth (including those who have since separated or divorced);
- a mother who was not married to the father at the time of the child’s birth; and
- a father who, though not married to the mother at the time of the child’s birth, has acquired parental responsibility either by a `parental responsibility agreement’ with the child’s mother or through a court order.

Under Article 12 of the Children (NI) Order 1995, where a court makes a residence order in favour of any person who is not the parent or guardian of the child, that person has parental responsibility for the child while the residence order remains in force.

Under Article 50(3) of the Children (NI) Order 1995, while a care order is in force with respect to a child, the authority designated by the order will have parental responsibility for that child, and will have the power (subject to certain provisions) to determine the extent to which a parent or guardian of the child may meet his or her parental responsibility for the child.

A person holding parental responsibility may make arrangements for another person to exercise that responsibility on his or her behalf - for example when the parent is on an extended visit abroad or during a time in hospital. This delegation does not, however, remove the original parental responsibility.

Parental responsibility is defined by Article 6(1) of the Children (NI) Order 1995 as covering all the rights, duties, powers, responsibilities and authority which parents have with respect to their children and their children’s property.

Peripatetic teacher (or specialist, advisory, or support teacher): a teacher with specific expertise who travels from school to school and is employed by the Board to give appropriate specialist advice and support to the child and the school. Often he or she will also teach children with special educational needs on a sessional basis, usually when an individual school does not justify the services of a full-time teacher for the purpose.

Service Children’s Education: Service Children’s Education oversees the education of U.K. service children abroad. It is funded by the Ministry of Defence and operates its own schools as well as providing advice to parents.

SEN co-ordinator: member of staff of a school who has responsibility for co-ordinating SEN provision within that school. In a small school the Principal or vice-Principal may take on this role. In larger schools there may be an SEN co-ordinating team.

SEN Tribunal: an independent body established from September 1997 to decide appeals by parents against Board decisions on assessments and statements. The Tribunal’s decisions are binding on both parties to the appeal.
Special school: a school which is specially organised to make special educational provision for pupils with special educational needs and is recognised by the Department as a special school.

Transition Plan: a plan which should form part of the first annual review after the child’s 14th birthday, and any subsequent annual review. The purpose of the plan is to draw together information from a range of individuals within and beyond the school, in order to plan coherently for the young person’s transition to adult life.
Code of Practice on the Identification and Assessment of Special Educational Needs