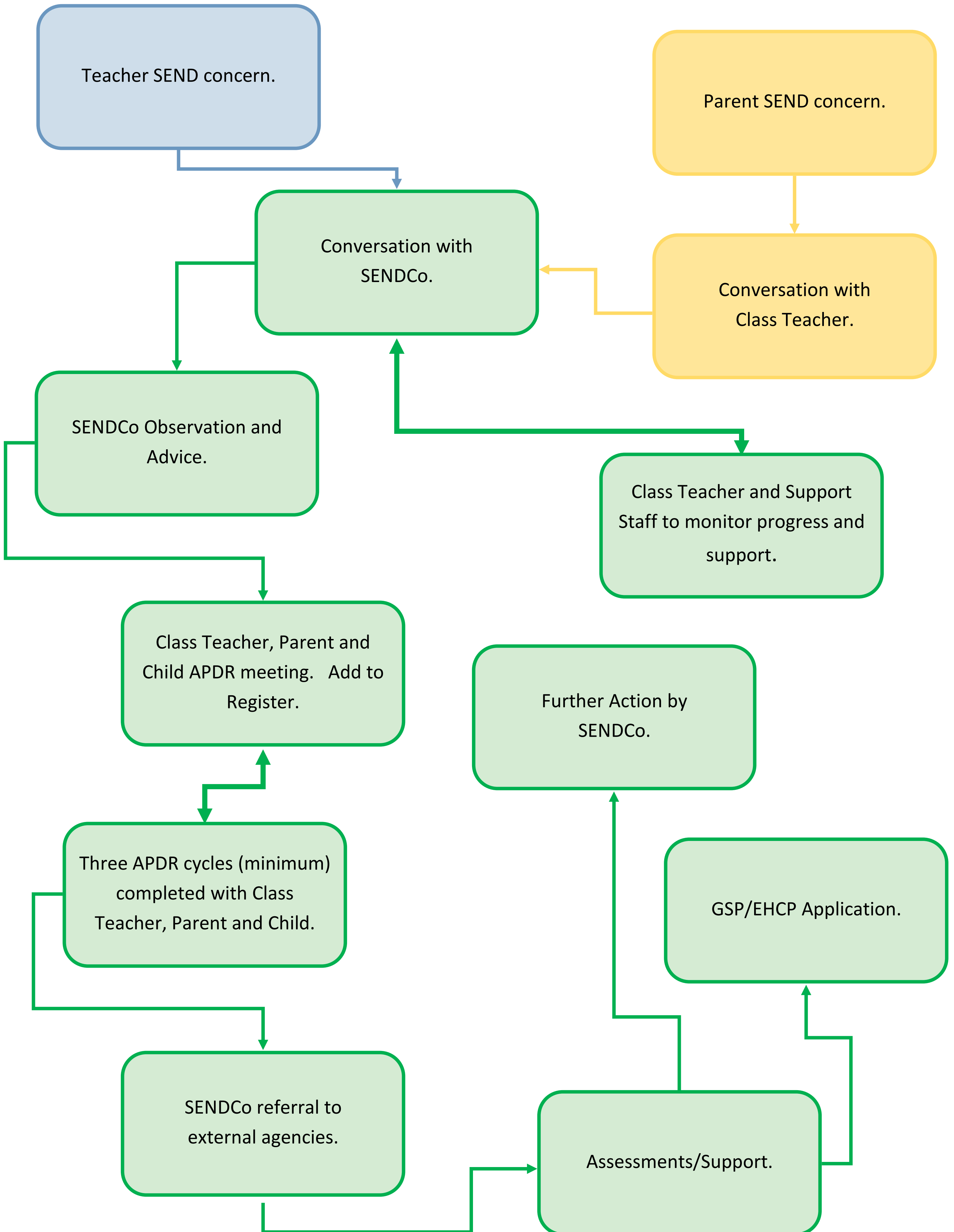
SEND Lines of Communication for Identification and Assessment of Need



Acceptance Criteria

Evidence across multiple settings (e.g home, and school, and socially) of:

- persistent difficulties in initiating and sustaining social communication and reciprocal social interactions that are outside the expected range of typical functioning given the person's age and level of intellectual development
- persistent restricted, repetitive, and inflexible patterns of behaviour, interests, or activities that are clearly atypical or excessive for the person's age and socio-cultural context
- the onset of the difficulties started during the developmental period, typically in early childhood
- the symptoms result in significant impairment in personal, family, social, educational, occupational, or other important areas of functioning

Exclusion Criteria

- an assessment may not be provided if there is not sufficient evidence of difficulties
- an assessment may not be provided if the child / young person, their family / carers will not, or refuse to, give consent to access the service
- an assessment may not be provided if the symptoms and difficulties do not result in significant impairment of functioning

Acceptance Criteria

Understanding that while ADHD-like symptoms are found in many people some of the time, (and especially in children) in people with ADHD they are severe, persistent over time, and lead to **clinically significant impairments in functioning**. There is a need for evidence across multiple settings (e.g. home, and school, and socially) of:

- hyperactivity:
  - acting before thinking of consequences
  - difficulty maintaining attention for any period on a task
  - jumping from one activity to another
  - having difficulty with organization and time management
  - poor sleep
- impulsivity:
  - restlessness (inability to sit still, fidgeting, etc)
  - undertaking risky behaviours
  - tendency to interrupt others conversations
  - inability to wait their own turn / queue / raise hand prior to calling out
- inattention:
  - easily distracted
  - thoughts drifting / daydreaming
  - inability to complete work or tasks
  - difficulties with listening

Exclusion Criteria

- an assessment may not be provided if there is not sufficient evidence of difficulties
- an assessment may not be provided if the child / young person, their family / carers will not, or refuse to, give consent to access the service
- an assessment may not be provided if the symptoms and difficulties do not result in significant impairment of function

BeeU
Emotional Health and Wellbeing

Acceptance Criteria

A service will be offered where there is information and evidence about a mental health difficulty. Difficulties should be considered within an age-appropriate and situational context. Consider the amount that a difficulty impacts on: Functioning (the ability to take part in daily activities) and the amount of Distress or discomfort this causes.

	Impact on functioning	Level of distress
None	'Typical', 'normal' difficulties and everyday worries, which occasionally get out of hand (e.g. anxiety triggered by an exam).	No noticeable difficulties over and above those typical or expected difficulties and worries we all experience.
Mild	Occasional disruption. Most age appropriate activities can be completed given the opportunity with some reasonable adjustments.	Distress may be situational and / or irregular. Most people who do not know the child would not think there was a problem.
Moderate	Functioning is significantly impaired in at least one context (home / school / social).	Distress occurs most days in a week. It is apparent to most people who see the child.
Severe	Child / Young person is completely unable to participate in all daily activities, in all settings.	Distress is extreme and constant on a daily basis and would be clear to anyone.

Table showing degree of difficulties related to functioning and distress

Exclusion Criteria

A direct service (an assessment, or clinical intervention) may not be provided if there is not a sufficient emotional wellbeing or mental health need requiring targeted interventions from a specialist mental health service.

A service will not be provided if the child / young person, or their family / carers will not, or refuse to, give consent to access the service (whereby the child / young person has the capacity to consent, consideration can be given to assessment of capacity and or assessment under the Mental Health Act if required).

The service is not intended to (and should not) provide assessment nor management of:

- Mental Health Care for a service user aged 18 or above (consider Adult Mental Health Services)
- Primary Issues of Parental Mental Illness (consider Adult Mental Health Services)
- Primary Issues of Child Protection, Abuse, Neglect, and ensuring the safety of a child (consider Police or Children's Social Care)
- School related difficulties, with bullying or learning (consider pastoral support or Educational Psychology Service)
- Specialist Services for difficulties with Bereavement, Domestic Violence, Sexual Abuse, Substance Misuse (consider Bereavement, Domestic Violence, Sexual Abuse or Addiction Services)
- Psychological / Talking Therapy for young people aged 16 and over (consider NHS Talking Therapies)

Criteria for an Education, Health Care Needs Assessment (EHCNA) - EHCP

We're guided at all times by the SEND code of practice: 0 to 25 years.

"In considering whether an EHC needs assessment is necessary, the local authority should consider whether there is evidence that despite the early years provider, school or post-16 institution having taken relevant and purposeful action to identify, assess and meet the special educational needs of the child or young person, the child or young person has not made expected progress. To inform their decision the local authority will need to take into account a wide range of evidence, and should pay particular attention to:

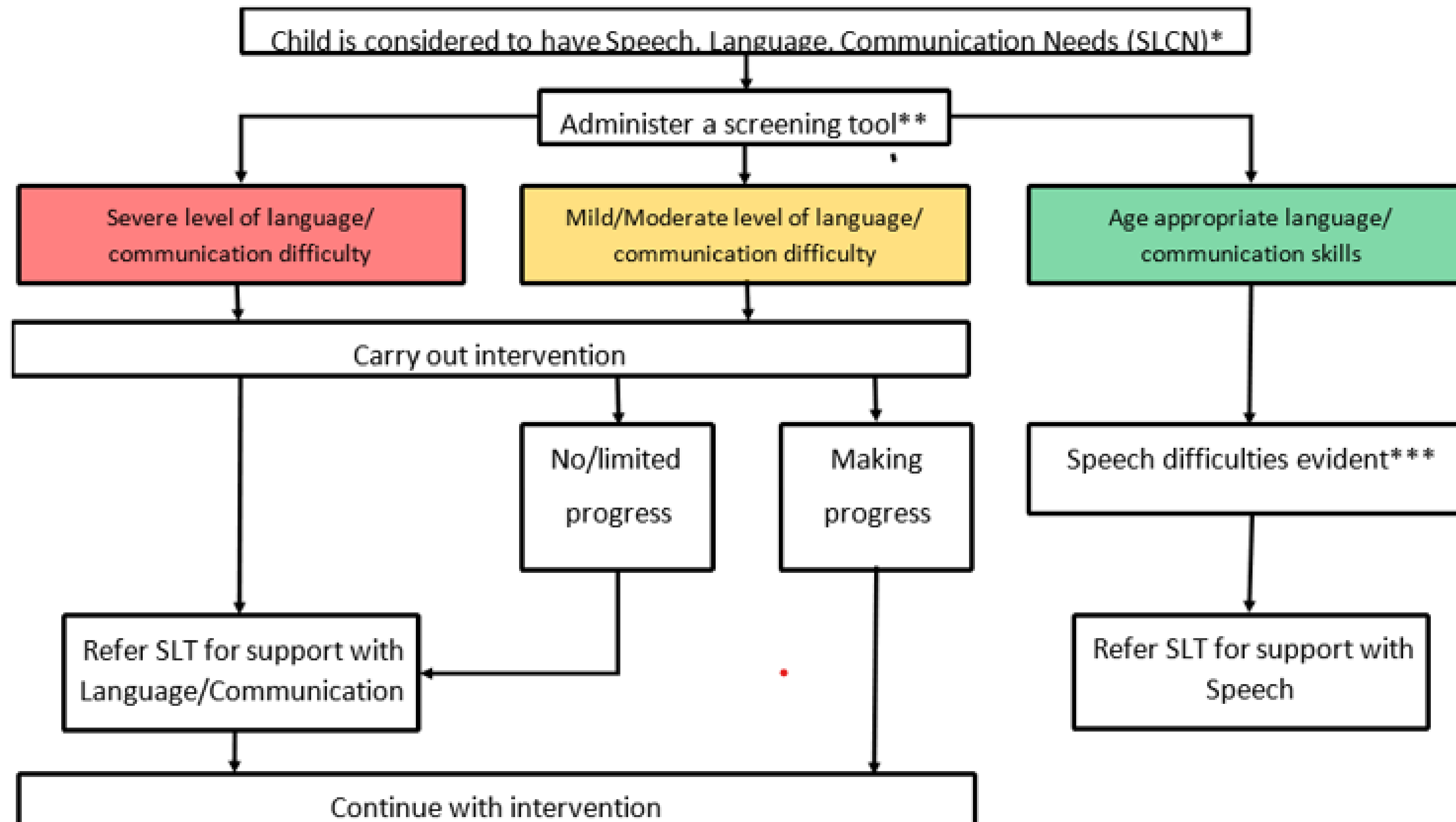
- Evidence of the child or young person's academic attainment (or developmental milestones in younger children) and rate of progress
- Information about the nature, extent and context of the child or young person's SEN
- Evidence of the action already being taken by the early years provider, school or post-16 institution to meet the child or young person's SEN
- Evidence that where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided
- Evidence of the child or young person's physical, emotional and social development and health needs, drawing on relevant evidence from clinicians and other health professionals and what has been done to meet these by other agencies, and
- Where a young person is aged over 18, the local authority must consider whether the young person requires additional time, in comparison to the majority of others of the same age who do not have special educational needs, to complete their education or training. Remaining in formal education or training should help young people to achieve education and training outcomes, building on what they have learned before and preparing them for adult life.

(Special Educational Needs and Disability Code of Practice: 0 to 25 years, DoE & DoH, January 2015)

Speech and Language Referral

Shropshire Community NHS Trust
Children's Speech and Language Therapy

Referral Flowchart for Settings **Appendix B**



*See SLT website https://www.shropscommunityhealth.nhs.uk/chslt-speech-language-communication-needs
**Use screening tool from Talk Boost, WellComm, NELI, Stoke Speaks Out, ASQ-3 etc.
***See SLT website 'What to look for' https://www.shropscommunityhealth.nhs.uk/chslt-speech-sounds
If using NELI (Language Screen), WellComm, Stoke Speaks Out (Early Communication Screen) ASQ-3 and the child scores fall in Amber/Monitor after intervention then refer. If using Early Talkboost and their Amber scores are still within 7-9 (28-36) then refer. If progressed to 10-12 (40-53) then making progress but still monitor. For KS1 please use the updated 2022 tracker as the scores within the bandings have changed https://speechandlanguage.org.uk/training-licensing/programmes-tracker/