

Resource Allocation Criteria

Social, Emotional and Mental Health

NB: March 2019 – still waiting approval re: Ladder of Intervention so this may be subject to further amendments

The children and young people (C&YP) to whom this guidance relates will present with a range of features of social, emotional mental health difficulties which impact on their learning and social inclusion. Individual C&YP may display a range of these features which will vary in severity and intensity and which may change over time. It is not expected that any C&YP will match all the descriptors listed below. The descriptors may be used to support the identification and assessment of the needs of an individual C&YP:

Social

- C/YP may be socially vulnerable, withdrawn or isolated within their peer group
- C/YP may have immature social skills, or lack the optimum level of social and emotional skills needed to cope in a whole school environment without adult support for a proportion of the school day
- C/YP may follow some but not all school rules/routines in the school environment
- C/YP may have difficulties in social interactions/relationships with both adults and peers
- C/YP may have difficulties with social interaction, social communication and social understanding which regularly impact on classroom performance
- C/YP may struggle to maintain positive relationships with peers and adults
- · C/YP may be slow to develop age appropriate self-care skills due to levels of maturity or degree of learning difficulties
- C/YP may refuse to engage, be abusive towards staff and peers, may present as disengaged and may wilfully disruptive
- C/YP may damage property

Emotional

- C/YP may show signs of stress and anxiety and/or difficulties managing their emotions
- C/YP may have difficulty identifying their emotions or triggers and may need support to self-regulate, or may self-regulate in self-harming or anti-social ways
- C/YP may have dysfunctional states of alertness; for example low states such as depression or boredom, or heightened states such as excitement or hyperactivity, and be unable to prevent these from affecting their prosocial ability
- C/YP may exhibit crisis which may be one off, prolonged or regular responses to anxiety, or they may be learned responses to undesired or stressful situations
- · C/YP may be at risk of leaving the school premises or absconding during the school day
- C/YP may show patterns of stress or anxiety related to a specific context or a specific times of the day
- C/YP may have difficulties expressing empathy or be emotionally detached
- C/YP may engage in high risk taking activities both at school and within the community
- C/YP may need to be in control exhibiting bullying behaviours either as victim or perpetrator
- C/YP may be over-friendly or withdrawn with strangers and at risk of exploitation
- · C/YP may be provocative in appearance and behaviour, and there could be evidence of over sexualised language or behaviours

Mental Health

- · C/YP may be unpredictable and may exhibit patterns of behaviour that impact on learning and inclusion
- C/YP may be disruptive or overactive and lack concentration in the classroom setting
- C/YP may be under assessment for mental health difficulties, acute anxiety, or attachment issues
- C/YP could have a tendency to hurt others, self or animals
- C/YP may have issues around identity and belonging
- C/YP may experience acute anxiety, fear, isolation, bullying, harassment, leading to controlling behaviours
- · C/YP may present with self-harming behaviour
- C/YP may have attempted suicide
- C/YP may engage in persistent substance abuse

Presenting behaviour may also include:

- A preference for own agenda and reluctance to follow instructions
- Presenting with different behaviour with different members of staff
- There may be patterns of regular school absence
- C/YP may be disengaged from learning and significantly under-performing

- C/YP may be verbally and physically aggressive
- C/YP may be subject to neglect, with basic needs unmet or they may be preoccupied with hunger, illness, lack of sleep
- C/YP may be identified as being at risk of Child Sexual Exploitation (CSE)

Quality First Provision

Start with the whole school understanding

Social, emotional and mental health is a spectrum. A whole school holistic ethos and culture where good mental health is valued, prioritised and supported for all adults and children and young people is essential. Schools should prioritise an absolute commitment and drive to develop a physically, socially and emotionally safe and secure environment for all.

A positive school ethos based on a culture of mutual respect, solving conflict restoratively and celebrating progress and development will result in better outcomes for all. This ethos must be based on a sound knowledge and awareness of social, emotional and mental health needs and whole school systems should be in place to support those in need. Clear pathways must be in place so that pupils identified as needing support are assessed to establish their specific social, emotional or mental health need, and then supported with intervention that is evidence informed reviewed and measured. School must then know how to access more targeted and specialist support e.g. Compass Reach or CAMHS where mental health conditions are impacting on the child's ability to function. The leadership team at all levels have a part to play in ensuring a culture and ethos that promotes good social and emotional wellbeing:

- · Students should be consulted and have a voice about the type of support they value
- There should be named champions within school
- Regular whole-school wellbeing initiatives should be in place everyone should be in no doubt that emotional wellbeing and mental health is important to leadership
- There should be integrated planning that facilitates a whole school long term approach ensuring that wellbeing runs as a golden thread through everything the school does, both for staff and pupils
- Professional development ensures staff have the relevant knowledge and understanding to explicitly promote wellbeing and create a positive classroom culture
- Staff understand and can identify signs and triggers of concerns; recognising the need for early intervention; they should know
 how to offer a first response themselves
 There should be a school guide that details where and who to go to for additional support and referrals, both in school and in
- There should be a school guide that details where and who to go to for additional support and referrals, both in school and in the wider community as appropriate. This should cover both staff and pupils
- There is a strong commitment to anti-bullying work
- There is and enhanced responsiveness to additional needs of vulnerable groups, e.g. refugees, forces families, minority ethnic groups and LGBT pupils
- A tangible commitment that emotional wellbeing and mental health is everyone's responsibility and part of their role

The Ladder of Intervention

The ladder of intervention should ensure that schools intervene at the earliest stage to support children and identify factors causing them distress which are influencing their behaviour. It is designed to ensure those requiring additional support receive it as early as possible and can identify a person within the school who they trust and can rely upon. It also provides a framework for ensuring that when school based strategies and support have been exhausted that schools can easily navigate support from a range of services across the Local authority. The Ladder of intervention will be supplemented by an evidence based practice guidance for SEMH which has been developed in partnership with health and social care professionals locally. The Ladder is divided into a number of steps which should be followed in order to achieve the best outcome for the child or young person.

The principles underpinning the Ladder of Intervention are:

- All children and young people including those who display behaviour that challenges the organisation have the right to be included within their local school and to have their needs met effectively
- A key worker provides opportunities for children and young people to develop a positive and supportive relationship which
 provides opportunity to develop new skills
- Multi-agency, evidence informed approaches for children with escalating needs should be effectively co-ordinated to ensure best outcomes and a reduction in risk of exclusion
- Working together to avoid exclusion provides the greatest opportunity to improve outcomes for children and young people

These principles align to the No Wrong Door methodology adopted by Back on Track and are based in evidence of effectiveness.

	Need	Children will have been identified as presenting with some low level features of social, emotional mental health difficulties.
Band 1	Step 1 or 2 of the Ladder of Intervention	Statutory Guidance School Actions "The head teacher should take account of any contributing factors" "Early intervention to address underlying causes of disruptive behaviour should include an assessment of whether appropriate provision is in place to support any SEN or disability that a pupil may have" • For all pupils at receiving more than one fixed term exclusion or at risk of permanent exclusion undertake screening for underlying special needs (As a minimum this should include a screen of communication ability, and a reading assessment, and additional screens such as Thrive or similar). • Identify a person in school to build a relationship and work with the child. • Discuss with the child to establish their worries/perspective. • Develop of a pastoral support plan in partnership with parents if no SEN is identified. • When SEND is identified, implement a SEN support Assess – Plan – Do – Review Cycle. • Ensure alterations to the curriculum or environment are in place. • Ensure positive feedback and praise is used as a vehicle to improve self-perception. • Regular oversight of the child and progress being made by a member of staff. Statutory guidance School Action "The head teacher should also consider the use of multi-agency assessment for a pupil who demonstrates persistent disruptive behaviour". "Under the Equality Act 2010, schools must not discriminate. For disabled children, this includes a duty to make reasonable adjustments to policy and practice and to undertake anticipatory duties". • Explore environmental factors including undertaking an audit of the impact of the school environment on the pupil and through consultation with parent/carer and pupil • Where unmet needs become evident, but there are no identified SEND needs complete the NYCC pastoral Support process and engage services as appropriate – single agency or through instigating a Team around the Child meeting • Where SEN is identified complete an SEN Support plan • For all pupils who remain at risk, implement a NYCC pastora

	Need	Difficulties identified at Band 1 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and Step 1 & 2 plan and provision being in place for a minimum of two terms.
Band 2	Will be within Step 3 and 4 of the Ladder of Intervention	Step 3 – Intervention and review Targeted and Specialist intervention includes appropriate referral pathways for additional support for educational, social and health needs that are impacting on the child's social, emotional and mental health. Statutory guidance School Action "The head teacher should consider what extra support might be needed to identify and address the needs of pupils in order to reduce their risk of exclusion". Implement in school support Request the involvement of additional services and implement any intervention advised Consider school led alternative provision package. *Note that provision in independent AP cannot be full time unless the provider is a registered school. Consider alternative curriculum pathways. *Note the third element of Progress and attainment 8 now contains 'technical awards' from the DfE approved list as well as GCSEs.

		Need	Difficulties identified at Band 2 continue/worsen and there has been no significant measured change in the target behaviour/social skill despite quality first teaching and Step 3 plan and provision being in place for a minimum of two terms.
B8 3	Band 3	Will be within Step 5 of the Ladder of Intervention	 Step 4 – Alternative provision Statutory guidance School Action "Where a school has concerns it should, in partnership with others (including the Local authority as necessary), consider what additional support or alternative placement may be required". School should consider the use of independent Alternative Provision or commissioning the PRS through the collaborative arrangement to offer appropriate alternative vocational curriculum pathways.*Note that provision in independent AP cannot be full time unless the provider is a registered school Once appropriate alternative provision is sourced and agreed, attend admission meeting at the AP so that the intervention can be planned with roles and responsibilities of all stakeholders confirmed Attend review meetings and work with the providers and local authority officers to ensure successful reintegration into school following intervention

	Need	Pupil continues to present with severe and persistent levels of social, emotional, mental health difficulties which are now more complex and long term despite Step 4 plan and provision being in place. This may require statutory assessment to ensure additional financial resource to support continued inclusion in a mainstream environment.
Band 4	Curriculum & Provision in place Will be within Step 6 of the Ladder of Intervention	 Mainstream provision with personalised curriculum where pupils may be disapplied from some aspects of the national curriculum and some lessons being outside mainstream timetabling with increasing access to alternative specialist provisions Inclusion in mainstream class with access to additional adult support to enable the class teacher to make the best provision – this may include targeted individual support, targeted small group support or to release the teacher to provide that support (up to 16 hours) Statutory assessment process (EHCP) is complete and is supported by the annual review process to ensure that assessment continues to be on-going, is multi-agency and involves a range of specialist professionals Is supported by an annual review process to ensure on-going assessment, which is multi-agency and involves parents/carers and a range of specialist professionals, such as CAMHS, EP, YOT, therapeutic provisions Pupil offered individualised support from an adult in the mainstream environment. Opportunities for pupil to engage in specialist provision within the mainstream environment for part of the week Daily access to staff with experience and training in meeting the needs of pupils with SEMH Additional key, trusted adult(s) in place to support throughout the school day, working under the direction of the teacher and supporting the pupil to work on modified behaviour targets and curriculum tasks EHCP may advise access to therapeutic interventions such as counselling, play therapy, art therapy, CBT, emotional regulation work Activities focus on key skills and SEMH outcomes throughout the school day Individual SEMH programme incorporating 1:1 and small group teaching providing targeted intervention carefully employing a range of specialist strategies

Band 5	Need	As Band 4 plus: The C/YP will have a significant need in another area that is not solely attributed to SEMH need, e.g. Sensory, Physical or Medical, Cognition and Learning
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	As Band 4 Plus: Significant adaptations to the curriculum for secondary need, as identified in other Primary Need criteria.
Curriculum & Provision in place	Inclusion in mainstream class with access to additional adult support to enable the class teacher to make the best provision – this may include targeted individual support, targeted small group support or to release the teacher to provide that support (up to 16 hours) and differentiation of the curriculum for both primary and secondary needs.
	Needs can be met within core offer of a special school setting

	Need	Pupil continues to present with severe and persistent levels of social, emotional, mental health difficulties which continue to be complex and long term and which require a higher level of additional financial resource to support continued inclusion in a mainstream environment.
Band 6	Curriculum & Provision in place	As Band 4 Plus:

	Need	 Has SEMH needs that profoundly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available The pervasive nature of the SEMH needs has a detrimental effect on the acquisition, retention and generalisation of skills and therefore has learning needs
Band 7	Curriculum & Provision in place	 Curriculum modifications must be selected to engage C/YP with SEMH needs in relation to curriculum content, peer group Therapeutic approaches will be integral to curriculum delivery and used to support the emotional wellbeing of the C/YP Where needed positive behaviour plans and risk assessments must be completed and shared with family All staff will have specialist and specific training in SEMH needs Inclusion in mainstream setting. However, there will be a need for an enhanced level of individual targeted specialist or individual teaching support and significant differentiation of the curriculum Needs can be met within a special school setting with some adaptation to the core offer

Band 8	Need	Significant and increasing social, emotional, mental health difficulties, requiring funding which is additional to that at Band 7 and which supports either significantly additional and different provision in a mainstream school setting or provision in a specialist setting other than mainstream.
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Curriculum & Provision in place	As Band 7, however, provision is highly likely to be in a specialist setting, but could be in an appropriately resourced mainstream setting if it is parental or YP preference. Pupils require an alternative curriculum which provides: • A detailed and differentiated behaviour management programme in addition to targeted support and reassurance in areas of learning the child finds particularly demanding • Regular opportunities to consolidate learning/ promote confidence in the learning environment • Close adult support around the implementation of structured small group work and/or one-to-one intervention and to support during less structured times • Interventions, such as. counselling, play therapy, art therapy, CBT, emotional regulation work which may be in conjunction with and overseen by Health services • Immediate access to a trained specialist adult able to intervene immediately to support the pupil in
	 Immediate access to a trained specialist adult able to intervene immediately to support the pupil in recognising their emotions and managing their behaviour Significantly additional and different provision in place and close support from highly trained specialist staff.

Band 9	Need	Continuing significant and increasing social, emotional, mental health difficulties, requiring sufficient funding and resource to ensure that appropriate specialist provision outside the mainstream environment is in place. Difficulties may be characterised by some or all of the following: Daily or more frequent occurrence of challenging, aggressive, violent behaviour resulting in disruption to others and prevention of self from learning Self-harming behaviours Persistent substance abuse Inappropriate sexualised behaviours/language Lack in engagement in learning Significant attendance issues
	Curriculum & Provision in place	 Pupil has been assessed as needing enhanced specialist provision. Pupil is on roll at a specialist setting offering a personalised programme of education and therapeutic support A range of other specialist agencies are involved in offering support Despite all non-physical de-escalation techniques being in place, physical intervention is required to support pupil on occasions when absolutely necessary Provision is within a specialist environment with a ratio of one-to-one highly skilled adult support

Band 10	This band will be allocated and moderated on an individual case basis through a Resource Allocation Panel.
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