

Special Educational Needs and Disabilities Newsletter

St Vincent de Paul School

Welcome to the first of a termly newsletter about Special Educational Needs and Disabilities at St Vincent de Paul School. If there is anything you would like included in future newsletters, please drop me a line at mcurry@stvincent.herts.sch.uk.

DSPL | Delivering Special
Provision Locally
Achieving quality outcomes

DSPL is a Hertfordshire-wide partnership approach where parents, carers, staff in early years settings and schools, further education colleges, local authority officers and representatives from other agencies, work together as part of an Area Group, to ensure that there is a range of provision and support services available in their local community.

St Vincent de Paul is part of DSPL 2. The website is frequently updated with information for parents/carers and professionals and can be found at www.stevenagedspl.org.uk.

Our school website has a page dedicated to SEND:

<https://www.stvincent.herts.sch.uk/os-send.html>

If there is anything you feel would be beneficial to put on it e.g. website links, documents, please let me know.

You will also find on there our SEND policy, information report and guide for parents which are updated each year.

If your child has special educational needs and has a personalised provision plan meeting this term, you will notice that the form has changed .

The SEN Code of Practice guides schools to 'assess—plan—do—review' when thinking about how we support the children with special educational needs and you will see this clearly on the form.

We also use this as evidence if we need to request help from outside agencies such as speech and language therapists, specific learning difficulties specialists etc.

What is Special Educational Needs?

Special Educational Needs in primary schools is covered by the SEND Code of Practice (2014). It defines SEN in the following way:

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her

A child or a young person of compulsory school age has a learning difficulty or disability if he or she:

- *Has a significantly greater difficulty in learning than the majority of other of the same age, or*
- *Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions*

For children aged 2 or more, special educational provision is educational or training provision that is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.

A child under compulsory school age has special educational needs if he or she is likely to fall within the definition above when they reach compulsory school age or would do so if special educational provision was not made for them.



Hertfordshire's SEND Local Offer is your one-stop shop for information, support, services and activities available for children and young people with special educational needs, and their families.

The Local Offer has been created by parents and professionals and can be found at <https://www.hertfordshire.gov.uk/microsites/local-offer/the-hertfordshire-local-offer.aspx>

Hertfordshire Additional Needs Database (H.A.N.D)

HAND is a voluntary database for children and young people aged 0-25 with additional needs or a disability.

With this you get:

- **an electronic membership card**
- **a newsletter each month (a copy is also on the SEND page of our school website)**
- **Concessions at some leisure facilities**

Information about how to apply can be found via the Hertfordshire Local Offer

Contactline

01992 588574 (Wed 2pm—4.30pm)

A 'quick queries service for parents, carers and young people (16-26) in Hertfordshire.

Please call if you would like to speak directly to an Educational Psychologist to discuss a child or young person's development, learning or emotional wellbeing, or to find out more about the service.

The Children and Young People's Speech and Language Therapy Service

The Children and Young People's (CYP) Speech and Language Therapy service offers a child and family-centred approach to support CYP with speech, language, communication needs (SLCN) and those with eating and drinking difficulties in Hertfordshire.

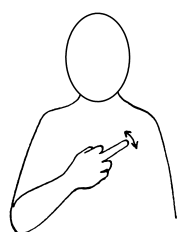
Their website is: www.hct.nhs.uk/our-services/childrens-speech-and-language-therapy/. The timetable for the drop in clinics for children aged 2 years 6 months to Reception age can also be found here.

There is also a telephone number which parents, carers and professionals can call to speak to a therapist about a new referral or child's development. You can leave a message on 01992 823093 and a therapist will contact you.

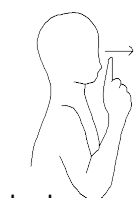
The Communication Trust (www.communicationtrust.org.uk) and Afasic (www.afasic.org.uk) have great websites with lots of information about how to support your child's speech and language development.

Last year we introduced Makaton across the school. We learnt one sign a week and we found all our children really embraced using them.

We'll be introducing them again after half term (posted on the school Twitter account), but in the meantime, here are the words we learnt last year .



Toilet



look



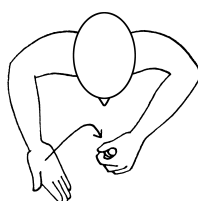
thank you



Please



listen



More



sorry

More information can be found at www.makaton.org.

On Twitter, 'Makaton with Lucy' has a daily video which your child may enjoy

School Nursing Service

The School Nursing Service works together with children and young people their parents/carers and school staff, to provide a comprehensive efficient and accessible service which:

- Helps children keep healthy during their school days and for the rest of their lives
- Prevents ill health in children and the local community
- Supports children with medical needs and those needing medication
- Ensures that educational potential is not hampered by unmet health needs
- Monitors and supports families in relation to

Hertfordshire Safeguarding Policies

They have a useful website for children and parents: <https://www.healthforkids.co.uk>



Dyslexia: Information for Parents and Schools (from the Hertfordshire Educational Psychology Service)

Persistent difficulties with literacy (reading and spelling) are perhaps the most well known and most prevalent of all educational difficulties. There is absolutely no doubt that some children have difficulties learning to read and spell for reasons other than poor teaching or due to profound/severe learning difficulties. However, despite a huge body of research into dyslexia no one has been able to produce a universally accepted definition that is precise and based on scientific findings.

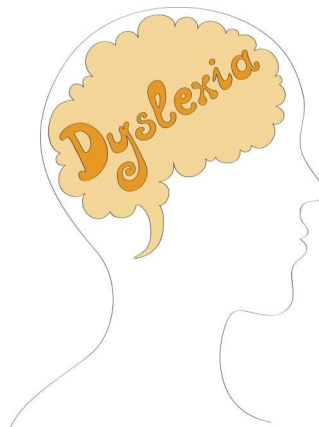
In Hertfordshire it has been agreed to define dyslexia based on three widely recognised definitions; namely, the Rose Report (2009), the British Psychological Society (2002) and the current British Dyslexia Association definitions.

Dyslexia is a term used to describe difficulties with developing and acquiring accurate and fluent word reading and/or spelling, which is severe and persistent in nature despite appropriate learning opportunities and evidenced-based intervention. Dyslexia is underpinned by difficulties in some or all of the following:

- Phonological awareness: the ability to perceive and manipulate sounds in words
- Verbal memory: the ability to store, process and manipulate verbal information
- Verbal processing speed: the ability to retrieve familiar words quickly and accurately
- Visual processing speed: the ability to visually recognise familiar words/symbols/patterns quickly and accurately

Dyslexia should be recognised as a continuum across a range of abilities rather than a discrepancy between intelligence and literacy skills. Co-occurring difficulties may be seen in aspects of language, motor coordination and personal organisation, but these are not by themselves markers of dyslexia. An assessment of dyslexia is a process not an event and should happen over time, taking into account a child/young person's patterns of strength and needs. (Rose report, 2009; British Psychological Society, 2002; British Dyslexia Association)

The term dyslexia is a social construct rather than a medical diagnosis. The term dyslexia is embedded into Western culture and so is likely to continue to be used for social and political reasons. Many people who have been identified as being dyslexic find the 'label' useful and are relieved that their difficulties have been identified and acknowledged. Hence, any challenge to the usefulness of the term dyslexia is often met with strong and emotionally charged resistance.



Recent research has concluded:

- Literacy difficulties arise for many different reasons. Hence, a model that assumes one main cause or a single 'typical dyslexic profile' for children with literacy difficulties is too simplistic.
- Research shows that it is difficult to reliably distinguish dyslexics from other poor readers.
- There is no research evidence to show that children with dyslexia should receive different intervention compared with other children with literacy difficulties. This pertains to decoding skills, ie, sounding out and blending letters to make words, as opposed to comprehending the meaning of those words.

Literacy difficulties arise for many different reasons. A model assuming one main cause for dyslexia is too simplistic. The term does not provide much information about how individual children's literacy needs should be addressed. Much information about dyslexia is discussed as if it were fact, whereas many of the assumptions surrounding the term are not supported by scientific findings. Dyslexia is perhaps best thought of as an umbrella term that indicates that a child has persistent difficulties with literacy, while acknowledging that the exact nature of the difficulties may vary from case to case.