

Case studies School			
	Low impact Achondroplasia	Medium impact Spina Bifida/Hydrocephalus	High impact Cerebral palsy-spastic quadriplegia
Child's needs	<p>Adam is aged 5yrs 2months, He has Achondroplasia and whilst the smallest in his class he is not significantly so. He has shortened reach, balance difficulties and experiences intermittent episodes of spinal pain. Adam has a conductive hearing loss.</p> <p>At times Adam can be stubborn and non-compliant preferring to follow his own interests and agenda. He has little awareness of danger.</p> <p>Adam is continent but requires adult assistance to pull his clothes up after toileting and to wipe his bottom. He gets tired easily.</p> <p>Adam has independent mobility and good functional skills. He does get tired and uses a buggy for longer trips, e.g. when the class walk to church for Celebration events and Special assemblies.</p>	<p>Nadeem is in Y8 at a mainstream secondary school. She is a keen student and wants to be a teacher. She has a diagnosis of Spina Bifida and Hydrocephalus which is managed by a shunt in her brain to control spinal cerebral drainage. She has some problems with getting started and organising a task. She is able to make independent transfers and walk short distances using crutches and self-propels a manual wheelchair for longer journeys.</p> <p>Nadeen needs to self-catheterise every 4 hours. She has learnt to do this independently but still requires an adult to prompt the activity.</p> <p>Nadeen is affected by anxiety and depression more than her peers.</p> <p>Nadeen needs to take care of her back and avoid carrying or moving heavy weights such as school bags.</p>	<p>Sam is in Y4 at a mainstream primary school.</p> <p>Sam has a diagnosis of spastic quadriplegic cerebral palsy – he can commando crawl on the floor but needs support for moving between equipment, achieving & maintaining his posture, mobility, fine motor skills & self-care – eating/drinking, dressing & intimate care (he is fully continent) He has age-appropriate receptive language, but is only able to say 1-2 words of 1-3 syllables at a time due to difficulties with his articulation; he also finds speaking very effortful & fatiguing. He is able to swallow & chew safely but is often constipated.</p> <p>Sam uses a powerchair with postural support & a rise & fall function – he is very skilled at manoeuvring it He also uses a standing frame for 30 minutes during the school day. He has a toileting system in the school's hygiene suite which also has a ceiling track hoist. He has a mobile hoist to transfer between the powerchair & standing frame.</p>

<p>The learning context</p>	<p>A large mainstream class primary, with 2 form entry. He is part of a Foundation stage class of 29 with 1 class teacher and 1 full time TA.</p>	<p>A large secondary school built in the 60's with 5 form entry. Whilst an adapted hygiene suite and lift to the upper floors in the main school block are in place some parts of the school are not accessible including maths and MFL classrooms on the third floor. School timetable classes sensitively to ensure maximum access.</p>	<p>A new-build primary school with level access throughout & on the playground. Sam is in one of the larger classrooms so is able to freely move his powerchair between the tables & chairs. His classroom is close to the hygiene suite. His peg is at the end of the row & his drawer is in the top right-hand corner of the unit.</p>
<p>How do these needs impact on access to and participation in activities with peers?</p>	<p>Adam is aware of his diagnosis and is conscious of his size; at times he can be anxious or tearful or over exuberant. He is able to access all learning activities with his peers but has an immature grip and is "heavy-handed". He cannot reach equipment in the middle of a table.</p> <p>Sometimes Adam needs a verbal or visual prompt for good listening or good sitting when sitting on the mat, in Circle Time. His teachers cue listening by saying his name before asking a question. A timer and Now/Next board is used to keep Adam on task.</p> <p>Adam is popular and very sociable but older children and some of his peers in the school tend to "mother" him and have needed some awareness raising.</p>	<p>Nadeem is developing awareness of the impact of her diagnosis and how to manage her needs. Despite a watch she requires a vigilant adult to prompt Intimate Care and to ensure she is able to get started and undertake a learning activity. Once she is started she is able to work independently.</p> <p>With sensitive timetabling she is able to access all learning activities with her peers. Her tutor group is accommodated in a classroom near to the access toilet to minimise travel across the campus. Her peers or a supportive adult support her movement across the site as appropriate. She has her own lift pass and can travel in the lift with a partner of her choice.</p>	<p>Sam is aware of his diagnosis. He is reliant on a high level of adult assistance to access and take part in activities with his peers.</p>

	School uniform was not available in his size so parents sourced a small school sweatshirt and uniform and replaced buttons on his school uniform with poppers to enable him to change clothing swiftly.	Nadeem has times when she experiences low mood. School has an on-going PSHE scheme that promotes inclusivity & celebrates diversity. There are regular speakers in assembly who provide role-models for those with disabilities. Nadeem is able to see the school counsellor and access in school interventions with her peers.	
How are needs supported?	Staff can address his needs in a mainstream school with advice from his Mum and the professionals in his Team including specialist teacher for PD, physiotherapist and occupational therapist. Requires some 1:1 assistance with personal care, daily small group work to develop fine motor skills and high level of adult supervision in PE activities.	Staff can meet Nadeem's needs in a mainstream school with advice from her parents and, support and training from professionals including specialist teacher, paediatric continence team, physiotherapist, occupational therapist Nadeem is supported at a school support level. She has adult assistance to prompt toileting and fluid intake. Specialist equipment is provided and regularly reviewed. School ensure the access toilet provision has an enhanced level of daily cleaning to minimise risk of infection.	Staff can meet needs in a mainstream school with regular advice, support and training from professionals e.g. specialist teacher, physiotherapist, occupational therapist. Specialist equipment is provided and regularly reviewed and adjusted.
What reasonable adjustments does the setting put in place?	Adam has; <ul style="list-style-type: none"> • a home to school book • an individual risk assessment for specific activities including PE and outdoor play • Individual PEEP written with Mum and school staff who have talked with Adam about what happens in fire practices. 	Nadeem has; <ul style="list-style-type: none"> • Intimate Care Plan • Lockable cupboard to keep her catheters etc in • Pupil Handling Risk Assessment for school site/activities and for occasions when she requires physical assistance e.g. after surgery 	Sam has; <ul style="list-style-type: none"> • Moving & Handling Plan • Intimate Care Plan • Plan for everyone's safe mobility around the school site including a set of 'wheelchair rules' alongside the rules for others, e.g. don't move at speed in the corridors, stay still when lining up, etc

	<ul style="list-style-type: none"> • Careful seating plan • High/low rise table for some activities. and use at lunch time • Additional pencil pots as he can't reach the pot in the middle of table • Advice for lining up • Top drawer in drawer units for easy access • Additional ring pull on his coat and bag zipper • Coat peg at the end of the line where there is more room • Footboxes to increase access to sand, water, whiteboard and toilet • Pencil grip • Quiet space for short periods of rest • Twizzle ties for plimsolls • Longer handed taps provided in toilet • Staff look carefully at fairy tale and story book content • Use of visuals and now/next board for transitions and to prompt understanding of class rules. • Sits on a low stool rather than the floor for Circle time activities 	<ul style="list-style-type: none"> • Personal Emergency Evacuation Plan • Wrist watch with built in buzzer to prompt catheterisation • Additional lockers around the school site to keep belongings in. • Provision of height adjustable seating with back support for science and practical lessons, e.g science rather than standard stools • Two sets of text books for home and school to minimise loads to be carried around school site • Able to leave lessons early if needed • Adult support needed for personal care • Increased level of communication with parents to ensure good partnership working via Termly meetings • Liaison time allowed for staff to meet with professionals as required • Consideration needs to be given to possible need of adaptations to transport for setting trips and visits • Some 1:1 adult support at specific times and for specific purpose, 	<ul style="list-style-type: none"> • Personal Emergency Evacuation Plan • Extra-curricular & PTA activities policy to ensure all activities are fully accessible to Sam • Sam has a Pupil Handling Risk Assessment for all his physical needs • Setting risk assessments are also in place for risks to others associated with e.g. additional equipment being in the setting • Adult supervision is required at all times • Staff receive Moving and Handling training and advice from qualified trainers • Same needs to be positioned in specialist equipment for Circle time with an adult available to reposition head as required • All resources have to be brought to him and placed on his tray • Unable to access the sink for hand washing so has a bowl of water brought to his tray • Half-termly meetings • Liaison time allowed for staff to meet with professionals as required • Time allocated for staff to plan and implement individual
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	<ul style="list-style-type: none"> • Appropriate table and chair to promote a good sitting position for learning tasks • Allowing extra time to move between activities • May require additional time to complete fine motor activities and mark making • Adam is able to remove e.g. coat and shoes but requires adult assistance to put them on • Increased level of communication with parents to ensure good partnership working through termly Early Support Meetings • Liaison time allowed for staff to meet with professionals as required • Forward planning for educational visits • Peer awareness – identify playground buddies • Time allocated for staff to plan and implement targeted intervention. • Close liaison between home and nursery to maximise transition. • Identified member of staff to act as point of contact. 	<p>e.g. PE or to support learning e.g. prompt getting started</p> <ul style="list-style-type: none"> • Close liaison between home and school. Identified member of staff to act as point of contact • Enhanced in year transition planning • Access to school counsellor • School interventions to promote good SEMH. 	<p>programmes e.g. physiotherapy exercises</p> <ul style="list-style-type: none"> • Suitable, identified areas within the physical environment for personal care, physiotherapy or Occupational therapy • Adaptations to transport for setting trips and visits • Individual 1:1 support for much of the session or day • Extra Arrangements for close liaison between home and nursery, e.g. meet and greet, use of a home-school book, face-to-face updates between parent and class teacher. • Identified member of staff to act as point of contact • Fatigue management plan.
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How do services work together to promote positive outcomes	There are regular meetings for Adam alongside the EHCP Annual Reviews. Multi-disciplinary meetings around his further needs at home.	Joint input into enhanced transition planning. My Plan Reviews are held at least termly as well as other multi-disciplinary meetings. All services contribute to My Plan Paperwork.	Multi-disciplinary meetings have meant that school and home can coordinate an approach to help support Sam. Outcomes are set within the EHCP and short term targets.
How has CYP voice been enabled and acted upon?	For his review meetings Adam's teacher talks to him and helps him fill in a visual summary of how he feels about things he does at school including curriculum subjects. Adam has opportunities throughout the day to tell staff and pupils about his ideas and opinions. This is acted on as appropriate.	Nadeem is a member of the School Council who meet regularly with a member of Senior Management Team. They raise issues about school and discuss possible solutions and feed back to their peers through tutor time. She has identified issues with the slopes in the school playground and raised paving slabs which have been feedback to SLT and addressed. Nadeem takes part in all meetings about her and has enhanced opportunities to share her thoughts and opinions as well as discrete time with the school SENCO to identify any issues.	Sam is involved as much as possible in decisions about his care and how he would like to be supported. He prepares prior to all meetings.
Outcomes	<ul style="list-style-type: none"> Adam is able to take part independently in differentiated curriculum activities alongside his peers Adam looks forward to school Progress commensurate with age expectations 	<ul style="list-style-type: none"> With adult support and individual adaptation to curriculum and/or learning materials, Nadeem is able to fully participate in a differentiated school curriculum with modified equipment/tasks, e.g. PE 	<ul style="list-style-type: none"> With a significant level of adult support and individual adaptation to curriculum and/or learning materials, Sam is able to participate in a differentiated school curriculum
Impact	<ul style="list-style-type: none"> Adam is able to attend his local school setting He is learning with his mainstream peers and can 	<ul style="list-style-type: none"> Nadeem is able to attend her local secondary school with her peers. 	<ul style="list-style-type: none"> Sam is able to attend his local primary school setting He is learning with his peers

	<p>identify with them rather than feeling isolated</p> <ul style="list-style-type: none"> • He is part of a school community and feels valued • Adam is a member of the local community and is learning to cope with unexpected situations when out and about with his family and friends • Parents and siblings are able to meet with other families at school events. 	<ul style="list-style-type: none"> • Increased confidence to try new things and be proactive in life. • Nadeem is a member of the local community • Parents are able to meet with other parents of students at school through events and meetings. 	<ul style="list-style-type: none"> • Home relationships are developing positively as he matures and learns to cope with his frustrations • Members of the local community accept Sam when he is out and about • Parents are able to meet with other families at school events and workshop.
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