

Self-evaluation against pdnet Standards

Reviewing current provision in meeting the needs of learners with physical disability

School:

Report date: 16/05/22

Completed by: Accessibility Planning May 2022

Review date: 21/10/22

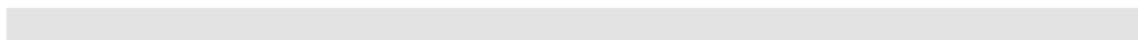
Self-evaluation summary

Not yet developed

Developing

Established

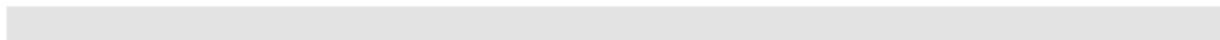
Standard 1: Vision, ambition and expectation



Standard 2: Identifying and assessing need



Standard 3: Meeting diverse need



Standard 4: Enabling individual outcomes



Action plan

	What action needs to be taken?	By who?	By when?	Resource needed	Success criteria
1.1	Key stage 2 needs to have work completed to make it more accessible. School keen to have access to a disabled toilet/car suite on site rather than relying on the one available at the neighbouring Children's centre.	'Property' in liaison with STLS, SLT & Senco.	01/09/22	Physical building works.	Our current pupil with cerebral palsy (and any future children with physical disabilities will have access to an adapted EYFS, key stage 1 & 2 classroom.
1.5	To develop an Accessibility plan which includes funding to ensure all facilities are accessible and meet DLA compliance.	SLT & senco with support from STLS.	01/09/22		Funding allows for adaptations to be included in the school's capital funding and maintenance plan.
2.3	To further involve children in evaluating effectiveness of and progress in interventions.	SEN, TAs and class teachers.	01/09/22	Proformas for gathering child voice.	Children know what their targets are within lessons and interventions and how they are doing in relation to these targets.
2.5	To further include arrange of technology software to increase alternative means of recording and assessing progress.		01/09/22	Software such as talk to text, Clicker etc.	

4.2		To increase the range of technology that can be used as an alternative way of recording.	Senco and SLT.	01/09/22	Software such as Clicker; training for voice to text recording on existing Ipads.	Children will have access to a greater range of technology to record their learning.
4.4		Staff training around the legal framework for manual handling.	SENCo to access training via Valance for staff working with any children with PD next year.	01/09/22		Staff working with pupils with PD will have had manual handling training.

Evidence log

Evidence		Uploaded files
1.1	Working with 'Property' to continue to make our site fully accessible. Annual medical training for current needs. Use of outside agencies for advise and support - STLS PD team, physiotherapists, occupational therapists, school nurses.	
1.2	Children are accessing a curriculum that encourages inclusivity for all. Jigsaw is used for PSHCE across the school. No reports of discriminatory behaviour from any children. Any stereotypes are challenged.	
1.4	Pupil Passport include child voice and aspirations for the future. Those with physical disability have progress in line with all other pupils. Use of technology, equipment and adaption to ensure full access to all areas of the curriculum.	
1.5	Early planning ahead for adaption as our current PD child moves through the school i.e. planning for the key stage 2 classroom started in term 4 of year 2 for the child in question. Planning ahead for children with medical needs has a focus on independence and dignity as they get older i.e. a current EFYS child with a stoma bag.	
2.1	Following observations, assessments and interventions, school with assess outside agencies as needed such as occupational therapy, paediatricians, school nursing team, STLS, early help etc. SENCO used LIFT, district conversations, & STLS clinics to seek further advice as needed.	
2.2	SENCO activity builds relationships with parents of SEN or vulnerable parents. Teachers have an open door policy as well as set parent consultations. A member of SLT is available at the gate each morning which allows parents the opportunity to communicate any concerns.	
2.3	Pupil Passports child voice includes 'What helps and supports me' which teachers act upon.	
3.1	Current pupil with cerebral palsy has options to type longer pieces of work. Physio sessions are timetable in with a mix of 1:1 and small group to allow for self-esteem. PE is adapted as required. Homework has not yet needed to be adapted.	
3.2	Children with a PD have the curriculum adapted as required i.e. modifications within PE or use of	

		technology for recorded work.	
3.3		Some physio activities are incorporated into playtimes to involved a group children not just the child with PD. TAs are mindful of children who are risk of being isolated at playtime and adapting play activities to allow them to be included. Risk assessments include use of the adventure play equipment so it can be used by all.	
3.4		Pupil Passports, Personalised Plans, Provision Maps and Class Profiles on TEAMS in class folders but also printed out in class files (Blue Folders) in lockable in room - supply teachers signposted to folder on arrival. Pupil Passports include child and parent voice.	
3.5		'My Concerns' used as safe-guarding platform for all pupils. Individual class risk assessments, PEEPs, intimate care plans etc reviewed annually. Children with PD have individual risk assessments for educational visits and on site activities as required.	
3.6		The reception teacher and SENCO have transition meetings with feeder nurseries about individual pupils. Handover takes place with any open services such as Early Years STLS to the school team or school nurses etc - senco and parents and involved in these meetings. For a child arriving mid-year or into a different year group, transition meetings would take place before the child starts on role.	
4.1		All pupils regardless of need have access to a broad and balanced curriculum. The use of 'Jigsaw' for PSHCE allows a consistent approach across the school and further supports pupils spiritual, moral, social and cultural development by acknowledging and celebrating differences.	
4.2		Our pupil with cerebral palsy has therapeutic goals set by occupational therapy and physiotherapy. These are incorporated into the weekly timetable with a range of 1:1, small group and whole class sessions. Laptops and Ipads are used for alternative recorded whenever needed for children with physical difficulties.	
4.3		Independence is encourage by adult support being subtle whenever possible, i.e. at playtimes, an adult is responsible for the child with Cerebral Palsy, but from a distance unless it is seen she needs help to integrate or have a game adapted. At times, some of the physical activities set by the OT are incorporated into playtimes by encouraging a group of children to try the stretches/movements via games like 'Simon Says.' Pupil Passports include aspirations for the future.	

4.4		School policies, procedures and risk assessments are in place to support pupils with PD. Bullying of any sort is not tolerated and if apparent would be addressed quickly followed up by further work in PSHCE around differences.	
4.5		All classes have access to Laptops, Ipads and interactive Smart boards. The school use 'Now Press Play' as another technological platform allowing children interactive/immersive experiences.	
4.6		'Pupil Passport' allow for individual aspirations for the future. School works closely with secondary schools to support transitions focusing on the individual needs of pupils and the best provision as they move towards adulthood.	