

Education and inclusion 0-25 SEND Service Specialist Inclusion Support Service (SISS) Annual Report for the academic year 2024 - 2025

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77% (56/73parent/carers) who responded to the SISS survey this year rated the support from SISS teams at the highest level of 5 'very good'

70% of the 208 responses from schools rated the quality of support from SISS teams at the highest level of 5 'very good'.

Dage number

1. Evaluation of Service Delivery and impact - based on SISS Survey results summer term 2024 Number and type of survey responses:

Parent responses: 73 SENCo/ teacher responses: 56 Head Teacher responses: 3

Feedback from ... school respondents: Grading: 5 (very good) - 1 (very poor) with 3 being satisfactory.

Scores are rounded and so may not add up to 100%.

	Qu	Quality of service received				Supported inclusion			Improved outcomes							
	1	2	3	4	5		1	2	3	4	5	1	2	3	4	5
Traded Services	Traded Services															
SEMH Team 47 responses			4% (2)	19%	77%			2% (1)	4%	26%	68%		2%	6%	30%	60%
CLD Team 31 responses				16%	84%					26%	74%				32%	68%
Non-traded services																
SPI Team 27 responses			4% (1)	41%	56%				7%	37%	59%				41%	59%
SLC High Needs outreach/ ARCS 29 responses			3% (1)	41%	55%				7% (2)	38%	55%			10%	35%	55%
Autism Team 51 responses			2% (1)	16%	82%					24%	77%			4% (2)	24%	73%

High Needs	40/					00/				40/			
Pathway 23 responses	4% (1)	17%	30%	48%		8% (2)	13%	35%	44%	4% (1)	26%	30%	39%
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Non-traded services:

- The Autism Team work in all schools in Solihull and received feedback from 66% of schools, 9 more schools than in the previous year. The % of schools rating the service received from the team at the highest level has increased by 20% to 82%, with 98% of school respondents rating the service received as good/very good. In terms of impact on improved outcomes for pupils, 25% more respondents rated this at the highest level of very good compared with the previous year, and for impact on inclusion an increase of 15% rating this as very good. The team's model was tweaked again this year, results indicate that the impact of the changes in the last couple of years have had positive outcomes for children and young people from the schools' viewpoints, in addition to the quality of service provided.
- The SPI Team are caseload based and work to national criteria in relation to the statutory support they offer to children from birth. They received a similar percentage of respondents as in previous years. This year there was an increase by 8% of schools grading the support at the highest level of very good, with 97% rating the quality of support as good/very good; an increase of 17%, with a reduction in schools rating the service received as satisfactory. The number of replies rating impact on inclusion and outcomes as very good also increased by 15% and 23% respectively, with 100% of respondents stating that the impact of support received on outcomes for pupils has been good or very good.
- The SLCD Outreach Team and ARCs continue to experience a knock-on effect from gaps in Speech and Language Therapy (SaLT), due to this the pathway to SLCD support has been changed. Feedback has significantly improved following it being stagnant for a couple of years. We hypothesise that this is as a result of these changes (several comments), the new manager's promotion of the work and referral pathways; in addition to the impact of the LA wide SLCN training. 29 schools responded, 12 more than last year (the team is caseload based so are not in all schools). 96% graded the quality of service as good/very good a 20% increase on previous years and a 26% increase in schools rating the service received at the highest level of 5. The impact on inclusion and outcomes has also increased by 20% and 26% respectively.

High Needs Pathway feedback in the annual survey is similar to last year, with 10 more responses. The team does not work with every school, and some schools have several cases (1-5 cases). 48% of the 23 respondents (who have used the pathway and could be at start/ midway through the intervention) rated the quality of support as very good. 79% reported that the impact on inclusion of this group of children at risk of exclusion was good/ very good. In terms of impact on outcomes 69% rated this as good/very good. A more detailed report of referrals/ impact and recommendations for changes to the pathway for secondary schools was produced this year, in addition to the annual evaluation report. Data indicates that for those pupils on the SEMH HN Pathway there is a reduced risk of permanent exclusion and suspensions during and after the support starts, and over time most pupils are likely to remain and finish their education in a mainstream setting. There has been a reduction this year in pupils attending specialist provision from the SEMH HN pathway- from 20% to 2.6 %. Theres has been a reduction from 12 % to 7.7% in permanent exclusions, reflecting that whilst the numbers on the pathway have increased, the numbers of permanent exclusions for those on the pathway have not.

Feedback from surveys given at the end of the HN Pathway intervention when cases close is even higher. In 2024/25 100% of 13 schools and 8 parent carers rated the quality of support received from the High Needs Team as very good- the highest level 5 with even higher ratings for impact on outcomes. The High Needs Planning meeting being considered as useful and effective by 100% of respondents.

Traded services:

- ❖ The SEMH team are purchased by 88% of mainstream primary schools and 80% of secondary with 6 specialist settings; this year 47 schools replied to the survey, an increase of 11 from last year. The rating of the quality of service received is similar to the last few years, with a high proportion of respondents rating the service received at the highest level of very good (77%) an 8% increase. Ratings for supporting inclusion of some of the most vulnerable learners as being at the highest level of very good, remain high (68%), and impact on pupil outcomes is also high (60%).
- The CLD Team work in 42 school across the LA (80% secondary, 49% primary, 63% specialist) with 74% replying to the survey, an increase of 9 schools this year. Ratings for the quality of support remain high again with 100% of schools rating the quality of support as good or very good, with an increase of 20%, to 84%, rating the quality of service received at the highest level. Impact on inclusion and outcomes have increased by 19% and 22% respectively, reflecting the stability of management and staffing within the team this year and the implementation of some changes to pathways.

Sample quotes from school staff about what they have valued most from the SISS teams in 2024-25

Autism Team	Sensory and Physical Impairment (SPI) Team VI (Vision Impaired) HI (hearing Impaired) MSI (multi-sensory impairment) and PD (Physical Disability)
'Quick response to queries. Good no. of hours for CYP on caseload, involvement in TACs, one off observations for CYP without a diagnosis.' 'Getting the right support quickly for children who are struggling, I love how responsive A is to the needs of our school' 'Will do anything that's requested – TEAMS planning meetings; observations; reviews; reports; training' 'A has been and always is an invaluable support to me, the children and to parents. Flexible in her approach and very practical in her advice and strategiesshe has never let us down!' 'A and B are incredible. So supportive, so much advice and we would be lost without them.'	'Ongoing monitoring support for children - advice and strategies. This is invaluable as it is an area that we are not specialists in at all, and we rely heavily on SISS support' 'We have regular support from A from HI, we also had support from B from VI for most of the year Both work wonderfully with our students and communicate fantastically with us.' 'The support from A for our pupils with VI has been fantastic' 'Support Plans and updates. Immersing self in classroom support and being part of the team. Swift ISP support as required. Always listening.' 'Communication is good. Information shared is clear and able to share reports with staff, their knowledge'
SLCD outreach and ARCs	High Needs Pathway
'Forward thinking around transition and the support that students receive. Then the follow up to ensure that students continue to make progress when SLC High Needs support comes to an end' 'It is essential, particularly given the lack of NHS SALT support.' 'Great advice and practical strategies after the block of support' 'Very well written child specific reports with lots of detail and ideas. Time to get to know the situation and staff. Good liaison with parents too.' 'Training was inspiring and supported whole school staff.' 'ISP support for a child with SLC in the absence of SALT has been amazing!'	'With pupil A- the support from the high needs team involved weekly sessions with a practitioner and regular TAC meetings. This has made a massive difference to this pupil, and she is now fully included in day-to-day school life. Her behaviour is manageable, and the school has clear strategies to manage her.' 'Excellent support for one of our learners who has struggled to access the setting, training for staff on demand avoidant language' 'They have been available as and when needed and that has been instrumental in the support of a pupil who was at risk of permanent exclusion but is now doing really well.'

'The innovation, e.g. Providing specific training, circle of adults 'A and B have really gone above and beyond to support one of our students at risk of PX. They got things up and running so quickly and have been thorough in their planning and have put a high level of support in place- dream team!' **Communication and Learning Difficulties (CLD) Traded Team** Social Emotional and Mental Health (SEMH) Traded Team 'Having the same, very experienced SEMH lead teacher for the last 'Advice and strategies have been very valuable – suggestions are practical to implement and not too costly. Training on AI has been invaluable. A has several years has been excellent, she feels like one of our team.' been amazing!' 'A has an excellent understanding of our school context as well as the children they support. They work very closely with out SENCo and are 'Their expertise and guidance have had a significant impact on our school's ability to create a more inclusive learning environment. The team's tailored often early into school to facilitate catchups prior to working with training sessions and practical strategies have empowered our staff to children.' better meet the needs of all learning, especially those with SEND...we've 'Circle of friends sessions from A have been incredible, my favourite seen improved engagement, progress and confidence amongst our children CPD sessions that I always look forward to' with additional needs.'

'The training on interactive and assistive technology and how to use these things to give our send learners better outcomes.'

'Relationship. The teacher knows our school, knows the SENCO, knows her stuff and knows about Early years and child development. Staff find her approachable and realistic parents find her approachable and supportive.'

'A is incredibly flexible and helpful. She works with us brilliantly and is fantastic with our students. Her reports are produced quickly and are always full of great recommendations.'

'We absolutely love working with A. We have also had support from B, C.D throughout this year. An absolutely unreal team who have supported us greatly. We are so appreciative.'

'Staff training Direct work- including Drawing and Talking Support, meeting with parents, Assessments to signpost future referrals, Support for Nurture UK, Support for Sensory Assessments.'

'The circle of adults sessions have been fantastic - a non-judgemental opportunity to come together as a staff and discuss a pupil in a structured way has been so valuable and useful.'

For Individual Team reports please look on the Local Offer link and on the individual SISS Team pages:

Specialist Inclusion Support Service (SISS) (solihull.gov.uk)

Feedback for High Needs Pathway from 13 school respondents and 8 parental responses to exit surveys:

Feedback included here is taken from the exit surveys at the end of an intervention and not from the annual SISS survey.

Question		Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
The High Needs Planning meeting was useful and effective.	Schools Response				8% (1)	92%
	Parent Carers Response				25%	75%
The support you received from the HN team improved outcomes for the	Schools Response			8%	8%	85%
child.	Parent/carer Response					100%
The SEMH High Needs Pathway has supported school staff through	Schools Response				8%	92%
providing information, sharing strategies and/or making the problems seem more bearable.	Parent/carer Response				13%	88%
Communication from the SEMH High	Schools Response					100%
Needs team has been effective and accessible.	Parent/carer Response			13%	13%	75%

6 respondents accessed support from the Community educational Psychology Service

Question		very poor	poor	satisfactory	good	very good
If yes, how would you rate the quality of the support from the Educational Psychologist?	Schools Response (3)					100%
	Parent/carer				33%	67%
Educational Psychologists	Response (3)					

9 respondents accessed support from the High Needs Play Therapist

Question		Very poor	Poor	Satisfactory	Good	Very good
How would you rate the quality of	Schools					80%
the support from the Play Therapist	Response					
	(5)					
	Parent/carer				33%	67%
	Response					
	(4)					

Overall, how highly would you rate the quality of the support that you have received from the SEMH High Needs team?

Question		Very poor	Poor	Satisfactory	Good	Very good
Overall, how highly would you rate the quality of the support that you have received from the SEMH High Needs team?	Response					100%
	Parent/carer Response (8)					100%

REFRESH Survey Feedback

REFRESH school survey responses from schools following intervention placement	
How easy was it to access and communicate with the Refresh team during the placement?	100% very easy
I felt supported by the Refresh team during the pupil's placement.	100% strongly agree
Weekly visits to see the pupil at Refresh were helpful in maintaining relationships with the pupil and the Refresh team.	100% strongly agree
How useful did you find the initial Team Around the Child (TAC) meeting and subsequent review meetings?	33.3% useful 66.7% very useful
The work of the Refresh team during the placement improved outcomes for the pupil.	100% agreed

'The Refresh team have supported all the pupils well both in school and during the time in the provision. They have been always on hand when needing any additional support.'

'G has made good progress in her SEMH targets which has shown in school.'

Pupil feedback

'Going back to school with support really helped me' (several pupils)

'Making new friends'

Feedback from schools about how support from SISS teams could be improved

Most of the feedback from the 50 schools' respondents was very positive with most of the requests made for change being largely for more staff and more hours or for traded services to be made free of charge.

Team	What could be improved	No of	%	Actions/ comments
		replies	replies	
Autism Team 51 responses	 Nothing - 'Team have great links with school' 'staff to be here every day!' 'No improvement needed' 'I would not change - has been all I could ask for.' 'Need more hours for the number at pre-diagnosis that are struggling in school.' ' 'If the team had more capacity. To enhance the already excellent support from the Autism Team, reducing individual caseloads would allow team members to dedicate more focused time to each school' 'The allocated hours can be restrictive, particularly when several children receive an autism diagnosis/accepted to SAS midway through the school year.' 'Maintaining support even when numbers of ASD children drop.' Perhaps more provision for early intervention before students are high need and already having significant behaviour or attendance concerns.' More ISP support available to schools - more staff needed. More support for those ASD children who are struggling and have more complex needs. 	25 3 12 1 TOTAL	49%	Additional hours were the most common feedback, other than schools being happy with the support provided. This will be fed into the review of the SISS service specification. Currently there are 4.9fte advisory teachers and 5fte ISPs to cover all schools and early years children and pupils with a diagnosis of ASD and other elements of our service specification e.g. AET training; gaps in high needs support pre any diagnosis for neurodiverse pupils has been consistent feedback from schools and parents.
	Some sort of course for the children to have delivered to them (by school staff) when they are first diagnosed, based on the children developing an understanding of their condition which is written by the Autism team, so we know we are saying the right things.	<u>16</u> 1	<u>31%</u> 2%	As part of the Autism in Schools work a resource has been developed- please speak to your Named Teacher about accessing it.

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	■ I feel that the ASD team should have more voice within the LA. In the past, our ARC was full because of the key role played by the SISS ASD team. This seems to have been lost and as a result we have spaces in a provision that should be full.	1	2%	Please feed into the SISS review any thoughts on how this could work with the current EHCP Team legal processes.
	 All SISS provision could be more effective if we could come up with a way of getting more engagement from parents. 	1	2%	We would concur with this and are very happy to work with schools and PCV on ideas to improve parent carer engagement.
	No direct work can be done with pupils and so we are limited to observation reports. Sometimes we are also	1	2%	For direct work a school would make a High Needs referral- it is then possible to access direct pupil support.
	 unable to fill in forms they need for the reports I feel at our AP it would be ideal having one person rather than a mix due to differing advice. 	1	2%	We do try to minimise staff involved with a provision but would advise speaking to staff in the team if it's felt that different advice is given.
	 Quicker turnaround on receiving reports 	1	2%	Please speak to teacher concerned, then if it doesn't meet the SISS report timescales speak to the Team Manager Emma Cox.
	 A greater idea on which pupils have a diagnosis. Pupil interventions. More strategic planning. Perhaps a joined-up approach on Transition from year 6 	1	2% 2%	We hold reports from SAS on Solihull diagnosed pupils and these can be gained from the named teacher. Schools provide SISS with information on non-Solihull or privately diagnosed pupils. Hours
	− 7Flexibility of times. Named teacher's' diary is	_	_,,	can be used as schools choose, so please do dedicate more to strategic planning.
	exceptionally full, and it is hard for her to arrange other times to come in school.	1	2%	We know that this can be difficult with staff being fully allocated, they will try to provide flexibility but there are limits to this. Any issues please speak to the teacher and then the manager to see if issues can be resolved.
	■ Nothing 'it couldn't'	18	67%	
SPI Team	unsure	1	4%	The team work to NATSIP criteria and allocate support based
27	■ More of it	1	4%	on level of need and staffing. Staff absence can impact on
responses	Consistent involvement for PD children	1	4%	support, but we cover as far as possible. PD team has been
	 More understanding of school and parent/carer interaction 	1	4%	impacted this year, but staffing is now back to normal.
	 Clearer how much support pupils are having and quicker responses when children are referred 	1	4%	The Team manager will discuss with the team about ensuring schools know how much support they will receive each term

	 It seems to be organised differently from other SISS services - some of the team liaise directly with teachers so I'm not always included in communications/aware of visitors coming in. CPD on how to deliver interventions Wider school training offer - class teams are trained but a wider school offer of training would be great. Online training resources for staff to access 	1 1 1	4% 4% 4% 4%	 and that the SENCo is kept informed as well as class teachers. Where there are any issues please do discuss with the member of staff and then the Team Manager if it persists. CPD points will be taken on board and reviewed for 25-26 and specific feedback can form part of the SISS review.
SLCD Team 29 responses	 Nothing Improvements I would have suggested are being made. Communication Lead in schools and being able to refer into service from schools. Unsure Clearer referral pathway. (Clearer pathways to referral which has been achieved this year.) The referrals process seems very confusing. Who to email what form to use when they're on case load and if they're new. Lots of different contacts to talk with and never quite sure who/how/when to approach the team More hours of support - but I know their team is tiny! More school-based provision More direct work with children To work more with children who have severe language needs and are struggling to make progress. Greater clarification on when SLCD support could be accessed at Secondary. Maybe come in and show this in practice. 'A lot of organising for meetings, liaising with parents, class teachers etc. Challenge to implement all of the suggestions when school has such limited resources. The child doesn't always have a TA that works with them. 'The advice is very specific and requires significant amounts of time and 1:1 support. It may be 	14 1 2 2 1 2	48% 3% 6% 6%	 It is good to know that the changes we have made are the ones wanted. The SLCN Pathway changed this year and this was shared with schools in the summer term. This is due to the NHS SaLT offer changing since COVID and the closure of Valley ARC. Please contact Ruth Beeston if it remains unclear. It is now on the Local Offer with the other High Needs referral processes for autism/SEMH. Following the closure of valley ARC the outreach team has expanded- the offer was to be reviewed inn 2024-25 but was delayed due to directorate changes, this will now form part of the SISS review. Ruth Beeston will pick this up at the secondary SENCo network meeting in June. in the meantime, please contact her about someone coming into school. The offer has been reviewed, and these points have been taken on board. Initially the plans were intended as long term, however it is important recommendations are deliverable in the current context- any other specific feedback please speak to Ruth Beeston.

	 more helpful to have ideas that can be more easily incorporated into provision.' Listen to school- if we refer a child it's because there is a reason to we maybe don't have the evidence but maybe that's another barrier for the child. In the absence of much support from the NHS SaLT team, perhaps a wider offer to children with any sort of speech difficulty? Or training on common difficulties and how to help for class teachers? 	1	3%	 The new pathway specifies the evidence required, which has been revised and links to the Graduated Approach. The resource is small and so to ensure the children with high needs can access the support, evidence is required of the GA. We recognise this gap and are currently looking at staff training in this team, working with SaLT to be able to have an increased specialist offer for children with speech difficulties. A range of Speech and Language training, to develop communication leads in school, has been organised for this year.
SEMH Traded Team 47 responses	 Nothing – comments include 'just keep it the same, it is fantastic!' I could not really fault this team, they go above and beyond when out supporting us in my opinion' Not sure at the moment Be a free service!! Support his year has been excellent and I wouldn't change it Speed of reports When the sessions end and report is submitted, discussing with pastoral or support staff to put in recommendations that are reasonable, meaningful and agreed. Timely emails It would be helpful if the suggested recommendations could be broken down into universal and targeted. 	27 4 1 4 1 1 2	57% 9% 2% 9% 2% 2% 2%	 68% of school responses (47) want the service to remain the same or are unsure how it could be improved. The service specification for SISS is under review and part of this will be looking at what is traded/ free to schools. Reports should be back to schools in draft form within 10 working days, please let a manager know if there are any issues with this, after speaking to the Named teacher. This is part of the team's offer so please do request it in your planning meetings. Please let a manager know if there are any issues with email response times, after speaking to the Named teacher. Feedback to be addressed by assistant Team Manager and traded Lead Professional.
	 Increase in range of more specialist support e.g. around attachment, play therapy, art therapy. 	1	2%	

services are available. Reminders will be a and email response deadlines outlined in	 How can sessions translate into lessons and measurable change more sessions for circle of adults maybe a profile of the student to staff to encourage more positive relationships A bit clearer on how the hours are going to be used in the upcoming term so we know exactly what is happening and when. A planning meeting at the end of the previous term would do this The only barrier for us would be the cost of the provision Support on SEMH interventions Similar to CLD Team - expertise shared between team members to deliver training in schools. We have undertaken parent sessions that have been very useful. List of what is available. Using SEMH hours for this and sharing with other schools if groups small Support from SEMH teach with development of IEP Offer small group interventions and upskilling training of staff. I find that our SISS SEMH link often needs reminding of the needed paperwork. 	1 1 1 1 1 1 1 1 1 1 1	2% 2% 2% 2% 2% 2% 2% 2% 2%	 Currently these are not part of the traded service offer- this cane considered as part of the SISS service specification review. Please discuss how to transfer skills into lessons with the named teacher. Circle of adults can be delivered as per schools' wishes – please discuss in planning meetings. Staff can work with schools to produce a student profile-please discuss with your named teacher. Planning meetings can be as frequent as a school requires, please suggest this to your named teacher. The agreement should also be shared with you so please request this if you are not receiving this. Traded service is non-profit making and prices similar to other LAs/ providers; the specification for what is traded/ free will be part of the SISS review. Support with interventions is a core part of SEMH work-please speak to your named teacher about this. All staff can deliver all SEMH pieces of training to schools. the menu of training is within the SLA document, and it is reviewed annually depending on what schools require. Shared training across schools is something we offer; we will look at facilitating this more easily as part of the SISS review. Support with IEPs/ small groups/ training is a core part of SEMH work- please speak to your named teacher about this. Please let a manager know if there are any issues with this, after speaking to the Named teacher. The ATM will ensure all staff are asked to use the SLA document and menu in planning meetings so all SENCos know what services are available. Reminders will be given about report and email response deadlines outlined in the SLA.
 CLD traded team - 31 Nothing - 'Great support' 'keep up great work' More school-based provision 21 68% 68% of school responses (31) want the ser same. 3% 	traded			68% of school responses (31) want the service to remain the same.

 Clearer pathways to referrals Expensive to buy in time – understand factor in accessing support More sessions! Smoother communication Support with filling out referral forms, Written feedback to share with staff a undertaken Offer of CLD members delivering train linked to their experience and expertisidentified schools. Schools being awa service has to offer linked to this and the for schools to join together to share cosmall. 	ing in all schools see- not just their re what the che opportunity	3% 3% 3% 3% 3% 3% 3%	 Need to clarify what is meant by school-based provision to be able to address this. Any pupil can be referred to CLD traded other than for diagnostic assessments. SPLD and SLCN pathways have been revised for Sept 26. Please speak to the named teacher if communication could be smoother, if there is no change please speak to the Team Managers. The named teacher can support with completing forms, although often the school holds the required information. All work should be followed up by written feedback, please do discuss this with the named teacher/ manager if this is missing. Currently this happens where training is commissioned e.g. the recent SLCN training. It is possible for schools to group together where groups are small for training- we could look at this and mechanisms to facilitate schools sharing training as part of the SISS review.
High Needs Pathway 23 responses Pathway Path	that provides too to identify lier than the exclusion should ort.' - not having to lie families, we rant AP.' 'We ethwayand ort could be given lanel not the HNP	26% 4% 13%	With the closure of REFRESH the intention was to expand the High needs, Team. The Team has now an additional 3 ISPS and vacancies for additional staffing (due to REFRESH staff leaving) which will be looked at as part of the SISS review. Expanding the team means criteria could be reconsidered. The referral process is currently through the Single Panel. All decisions are taken by a Panel which includes EPAS, schools and the educational psychology service to ensure parity of decisions.

■ Faster response and further help	1	4%	This could be linked to the Panel process, schools are contacted
 Applications have been declined even with all relevant 			following the decision within 2 days and a start date agreed.
paperwork completed	1	4%	Please do discuss with the SEMH ATM or Head of SISS.
'It's fantastic to have a service that comes in as			
regularly as the high needs pathway does however this			
can be inconsistent as they are pulled to cover other	1	4%	This happened due to staffing issues within REFRESH. With the
places etc. which causes a lot of upset for our children			closure of REFRESH this shouldn't happen in the future.
who need consistency and reliable adults the most. The			
handover between high needs pathway and school at			
the end of the session could be improved as often a			Where a child comes back dysregulated it would be important to
child comes back dysregulated from the session and			look at this transition with the HN team and relevant school staff-
school are unsure what has been done/covered in the			please do arise this with the team/ manager when it arises.
sessions to know how best to support the child.'			
 An assigned person to a school. 	1	4%	
7 th assigned person to a seriour.	-	170	
Consider an increase of ISP support earlier on e.g. 3 - 5			With HN being needs led and a small team, it would be pupil
times per week for a couple of weeks, which is then	1	4%	allocated rather than a person assigned to a setting so we can
gradually tapered down, may have a faster impact for	_	470	most efficiently and effectively deploy resources.
the child.			most emclently and effectively deploy resources.
 A lot of repetition for the carer during the meeting. 			This can be considered as part of the SISS review.
Most had been part of the submission. When the child	1	4%	Support should continue when the pupil moves school, unless the
moved school I was assured that the support had been	_	470	school declines it. We'll look at the feedback on the person-
agreed and would continue,			centred planning meetings and repletion of information.
 ISP relevance when not aligned with school rules and 	1	4%	centred planning meetings and repletion of information.
routines	1	470	This would need to be discussed with the Specialist teacher/
Toutines			Team manager so any concerns could be addressed, or rationale
			for advice given related to adaptations to school policies for
			SEMH pupils explored further.
			A number of recommendations have been made following the
			review earlier in the year with secondary head teachers and the
			annual report for 24/25. These include a piece of work with
			secondary schools; transition support and work with families.

2. Feedback from families 2024 – 2025:

Grading: 5 (very good) - 1 (very poor) with 3 being satisfactory. Scores are rounded and so may not add up to 100% * some responses from comments link to other services, but for validity of survey data we have still included.

Quality of service received	1	2	3	4	5
			6% (1)	17%	
			6%	18%	
				33%	
				23%	
73 responses					

This year we had fewer responses from parents, a reduction of 52 responses, although similar to previous years. The only team receiving the same quantity of feedback was the SEMH Team. Feedback again this year indicates that parent carers rate the quality of service received from teams at a high level, with 94-100% of responses for each team rating the support as good or very good. Overall, 77% of parents rated the service received from any team at the highest level, very good an increase of 5% from last year. Whilst the autism team had fewer responses there was a 27% increase in the numbers rating the service received as very good. In reading the parent carer comments it is clear parents responded at times about a team different to the one they were being asked about – we will consider how to make this clearer in future surveys.

Sample feedback from parent carers for all SISS teams about what they valued most from the support given						
Autism Team	SPI Team					
 'The support received was amazing, consistent and very helpful' 'Excellent direct work with my son. Guidance and advice meaningful and actually helpful' 'Feeling like we are not alone, feeling supported. Having tac meetings and receiving the autism training has been so helpful.' 'The confidence and changes I have seen from my child from the work A has done with her is absolutely amazing. She now looks forward to her sessions with A. I will always be forever grateful for A for the changes and the confidence she has brought out in my child.' 	 'The support from A has worked wonders with our little girl and her speech.' 'Keeping my child safe through a habitation officer, risk assessments. Updating staff about child's needs also with new advice via tech. Help with transitioning to new a school.' Very friendly, I'm very pleased with how the support is tailored to my child's needs. 					
SLCD outreach and ARCS	SEMH Team traded					
 'Continuously meeting and feedback. Helping out as much as possible. Gave us some advice to help our child needs and always willing to listen.' 'The whole team have worked very closely with my child, the school and myself so that we have a good understanding of their needs.' 	 'Listening and being patient with our child. Giving loads of advice and always making the efforts to help our family as well as school.' 'Being present at tac meetings has been so amazing, we just feel so supported and seen.' 'A has been an incredible support to both my child and me during a very difficult time, when my child was struggling to separate from me to attend school. Her kindness, patience, and genuine care made us both feel truly 					

seen and heard. The strategies and advice she offered were practical, thoughtful, and have made a real difference both at home and in school. A has really helped rebuild my confidence as a parent at a time when I felt exhausted and overwhelmed.'

High Needs Pathway

- The SEMH High Needs Team have honestly changed mine and my family's life for the better, there is a lot that I value in terms of the support I've received. From understanding my son's personal needs and neurodivergent needs more, to little changes I've made to my parenting thanks to the psychology team and adapting my home life for my son. XX has made so much positive progress thanks to the team especially with xxx expressing his needs and emotions in a safe and healthy way, not just with me but with his teachers and peers. His conduct in and around school is so much better due to his methods of communication changing drastically for the better which has improved our bond and xxx motivation to come into school so much more! I will be forever grateful for not only their support but their honesty and creating a safe space for me to talk about my fears, struggles and inexperience.
- Just a team effort and the outcome is a massive improvement with my child
- I have loved the reviews from the high needs team where we all check in on the progress of my child in school and what has been happening at home. I have loved seeing how effective the support has been from the high needs team
- X enjoyed the meetings and was very engaged. There was mutual agreements and respect from both parties

Parent carer views on areas for development for SISS teams

	•	
SPI Team	 5 responses (28%) felt no areas for development. Several responses related to other teams, and this feedback has been moved where this was clear. 	
18 responses	 It would be good for the SISS team to check with the school a few months down the line to see if the recommended reasonable adjustments are in place as I feel, the school didn't take note of the report or followed through with some of the recommendations. A little extra feedback so when they saw my daughter I had to chase them up to find out what happened with the visit but otherwise happy with everything. It's hard but offering support or meet up around work hours. I can't attend the sessions for the kids because I am at work for example. Maybe teachers who work close to a child have training and clear understanding about their needs, VI trained. (2 parents) 	We will look at this and monitoring visits. It is part of our specification depending on the needs of the child. This has been noted, and the Team manager will remind staff about how parent carers are kept up to date about work done in school. Keeping the team up to date with email contact is important to ensure reports are shared Teams' meetings do enable greater flexibility with this; we will look at this across the teams to identify any issues. This is part of the team's offer to schools; the VI team will look at what else could be done to encourage take up of this training.
Autism Team 17 responses	 Nothing – more of it- 'A is absolutely amazing' – 7 parent carer responses 41% More parent workshop type sessions. This course being offered to all with either a diagnosis or on the waiting lists. More face-to-face parent work/ support in home (4 parents) It may have been nice to have a closure session or letter - something written down that she could refer to in the future. This was difficult because of her attendance and exams though! It would be incredibly helpful if the support could extend to specialist settings, as this would provide greater continuity and consistency for children like my son. As a parent, it has been difficult to gauge how the sessions are going/what is covered in them until the end when you get the report, as my child doesn't mention them too much or share as he isn't good at doing this. It would be good to see some of the documents that he 	 Each year we increase our parent carer offer within the parameters of the staffing we have. Courses are currently available for parents on the SAS waiting list. This is a lovely idea and one we do deliver, but we will look at consistency. Currently support is available to specialist settings, but they do need to buy it in if they don't they have staff who specialise in this field. We do offer transition support currently- but expanding the offer to specialist provisions could be part of the review of our specification. We will look at the possibility of providing this/ feedback earlier.

	 is working on. School should share these, but it takes time, and they might forget (not intentionally!) Any preventative support would be great, rather than waiting until YP no longer attends/struggles to attend school. Any follow up on SISS recommendations made would be appreciated. But I understand that as long as YP's attendance is officially ok, there is no remit for SISS to get involved. It would be great if SISS team actually cared about how YPs are feeling in school, in particular when masking, rather than being focused solely on attendance = inclusionAny kind of measurement of the difference SISS involvement has made would be great. Also, my understanding is that the SISS Autism team 	■ SISS works with the child, family and school, depending on the referral. Please contact Emma Cox to discuss this- we are unclear if this feedback is confusing SISS with the Inclusion service- please let us know so we can address the points raised if it is our service.
	 is NOT working with YP/families, they are working with school/at the request of the school to meet school's needs (i.e. attendance). As such, I don't feel that as a family we are SISS team's client, and I am wondering why this survey is pretending otherwise. More help one to one with child I wish you could have more funding so that the support could reach more people and give schools more hours to help them. Perhaps when they go to a school and do an observation maybe arranging a meeting, even just on teams to discuss their findings with the parent as well as the written assessment 	 The team currently have 5fte ISPs who offer blocks of direct work with children. To achieve greater one to one support it would require changes to our offer which may come out of the review of our service specification. We can understand why this would helpful and will look at how we could do this, it would mean we may need to reduce what we offer elsewhere, but it maybe more effective to meet on TEAMS.
SLCD ARCs and outreach 3 responses	 2 parents felt they wouldn't change the support Having this support much earlier rather than in the summer term would have been beneficial. 	We are hoping that the SLCN training, the development of communication Leads training this year and the new SLC HN Pathway will mean children are referred earlier following a graduate approach to support from the setting.
SEMH Team 22 responses	 Nothing – 'did a brilliant job' 14 parent carer response) Expanding the team to provide support to parents in the home. More people like A in schools for all children who are suffering with social emotional and mental health in schools. Less waiting list and a knowledge of their existence. Our yp had an older brother also with neurodivergence and he was not offered this service when he was at the same school, he did not get this service until he became a refuser and had to move to school. We should be working at prevention and 	 64% felt there were no changes they would suggest Gaps in support for families have been identified; this is offered through our High Needs Pathway but is only offered as part of traded service where schools request it. Currently the team is fully traded so it is a school's decision which external provider they use and when. However, this could be considered during the review of the SISS service specification and what is freely available.

	not crisis management. Children are important and so it is their	
	school experience. (parent carers x2) More check ins with parents / carers if there are any problems / concerns. For parent/s to have a meeting i.e. if needed phone contact without school being present as I felt as a parent, I could not be fully open as I needed to when talking about my child's problems and school not meeting child's needs fully without sounding critical of school nor for school to judge my child.	Although it may be tricky, we would advise in these situations to discuss this with your school to ask if they would enable this. Alternatively, if your school has a Parent carer engagement grou you could talk to them about your concerns and how to approac them.
	 Further sessions for parents would also be welcomed please as the one that was run only really touched the tip of the iceberg. Perhaps a 1:1 session with parents following sessions with the children I was left feeling quite triggered by a comment about how my daughter speaks very highly of her dad. It may have been said in good faith but finding out from parents what is actually happening at home would be useful I feel rather than just speaking to the child in isolation Perhaps a family session would be useful. Appreciate this is somewhat done through the pastoral lead but a chat directly with the SEMH team would be good. The opportunity for a meeting between school, parents and the SEMH team to discuss steps to help in school/at home. Provide parents with outcomes I feel the efforts provided by SEMH team would benefit from the school following up with pupils & putting into practice any coping mechanisms learned. 	Thank you for this feedback. We would agree that it is important to listen to everyone's views to gain a full picture of what is happening and how to support. We do encourage schools to use our time for gaining parent views and next steps, and the majori will plan this into any intervention, we will use your feedback to reinforce this message.
	When you get reports like observations of your child the report says what percentage the child was on task but doesn't give you a base line to what is expected for that age.	■ This is a good point and we will look at this for 2025-26
High Needs Pathway	■ Nothing	All responses stated – no or nothing at all with a positive comment.

3. Key developments, projects supported and achievements for 2024-2025

Work with parents and families

The Autism Team have significantly expanded the training offer to parents this year, introducing a range of flexible and accessible opportunities such as bitesize sessions and informal coffee mornings. These sessions have been tailored to meet specific needs identified by families, with a particular focus on practical areas such as toileting and strategies to support play. Feedback from parents has been overwhelmingly positive, highlighting the value of both the content and the supportive environment in which it is delivered. Building on this success, the team will continue to refine and grow the offer, with plans to develop a dedicated Early Years training package in 2025 to ensure families of younger children receive timely and targeted support.

AET developments

New training materials have been produced by the Autism Education Trust (AET) and introduced across schools in the local authority. These updated modules have been well received by school staff, who have praised their relevance and practical application. The materials focus on important areas such as transition and executive functioning, which align closely with wider work already taking place across Solihull. By embedding these resources within school practice, the team are helping to strengthen consistency of support for autistic pupils, while also enhancing schools' capacity to respond effectively to a range of needs.

Family Hubs

The Little Owl Group is now based at Hatchford Brook family Hub, providing a welcoming space where children with MSI, along with their parents and carers, can come together. The group has fostered a strong sense of community, enabling families to share experiences, support one another, and build meaningful connections. Little Listeners group for HI children under 5 years old runs at Elmwood place, so parents and carers can come together for a sense of identity and belonging with fun learning and equipment support.

Nurturing Schools Programme

The SEMH team has continued to provide ongoing support to schools engaged in the Nurturing Schools Programme, with five schools successfully achieving the award this year. To strengthen collaboration and consistency of practice, a dedicated Nurture Leads Group has been established, offering a platform for sharing expertise, peer support, and joint problem-solving. In addition, the programme has been enhanced through specialist input from Nurture UK, ensuring schools have access to the latest guidance and evidence-based approaches. This combined effort is helping to embed nurturing principles more deeply across settings and sustain long-term impact for pupils.

SEMH High Needs Pathway

This year has seen a notable increase in engagement with secondary headteachers through the SEMH High Needs Pathway. This strengthened partnership is enabling more open dialogue about the challenges schools face in meeting the needs of pupils with significant SEMH difficulties, and it is creating opportunities for earlier and more coordinated intervention.

By working closely with school leaders, the pathway is helping to identify pupils at risk of exclusion and put in place tailored support strategies to prevent escalation. This proactive approach is expected to have a direct impact on reducing exclusions in secondary schools, ensuring that pupils are better supported to remain in education and thrive within their school communities.

Projects:

The Autism in Schools Project has continued to grow in momentum this year and is set to run for the next two academic years. The project is focused on developing Autism Champions within schools – staff members who are equipped with specialist knowledge and skills to lead on autism practice in their settings. By building this internal capacity, the project is enabling interventions to be more effectively embedded into everyday school life, ensuring that strategies are not only implemented but also sustained over time.

Early feedback from schools indicates that the Autism Champions model is helping to create a more consistent approach to meeting the needs of autistic pupils, with benefits being seen both in classrooms and at a whole-school strategic level. This work is laying strong foundations for long-term impact, supporting schools to develop inclusive cultures where good practice becomes embedded and sustainable beyond the lifetime of the project.

The PINS Project has continued to make a significant impact this year, with members of all SISS teams collaborating with EPS/MHST/SOLAR/PCV to deliver a comprehensive menu of support designed to promote inclusion and raise awareness of neurodiversity in schools. The offer has included training on a range of key areas such as neurodiversity awareness, ADHD, FASD, girls and autism, Makaton, AI and Assistive Technology, and relational approaches. In addition, schools have benefited from whole-school audits and targeted support in developing policies and embedding inclusive practices. This multifaceted approach is helping schools to strengthen their understanding of diverse needs and translate that knowledge into sustainable, practical strategies.

A central focus of the project is to increase inclusivity and foster a stronger sense of belonging for neurodiverse pupils. By reframing neurodiversity as a strength rather than a deficit, the project is encouraging schools to recognise the value of difference and to adapt environments and teaching approaches in ways that harness the unique potential of every learner. This shift in perspective is not only reducing barriers to participation but also building cultures

The project will continue throughout 2025–26, with the aim of embedding these approaches and capture impact more widely across the schools in cohort 1 and begin work with schools in cohort 2 with new schools joining. In doing so, it is hoped that this will contribute to long-term change, equipping schools to view neurodiversity through a strengths-based lens and ensuring that inclusive practice becomes a core part of everyday school life. Feedback on the impact from schools taking part in cohort 1 has been very positive.

Edge of care and work with the Youth Justice Service (YJS)

where diversity is celebrated and all pupils feel understood, accepted, and supported.

There has been commissioned work this year between SISS and the YJS. This has allowed the CLD team and SEMH team to deliver training to the teams to upskill staff to understand speech, language and communication needs (SLCN) and the impact of these going unrecognized. Early intervention is ley and the staff understanding these needs is imperative to get the right interventions. The CLD team have also completed assessments to help further understand the children and young people. This year has seen commissioned work between SISS and the Youth Offending Team (YJS), creating valuable opportunities for joint working. Through this partnership, the CLD team and SEMH team have delivered targeted training to YJS staff, aimed at upskilling their knowledge and awareness of SLCN. The training highlighted both the prevalence of these needs within Solihull's youth justice population and the significant impact when they go unrecognised. By strengthening staff understanding, the partnership is enabling earlier identification and more effective intervention, which is vital to improving outcomes for young people. Alongside the training, the CLD team have also undertaken individual assessments with children and young people known to the YJS. These assessments have provided deeper insight into specific communication profiles and needs, helping to guide appropriate support and ensure interventions are better matched to each young person. Together, these developments represent a strong step forward in embedding early intervention approaches within youth justice, ensuring that the right support is identified and delivered at the earliest opportunity.

4. Staffing

The Specialist Inclusion Support Service (SISS) is made up of the following teams and Additionally Resource Centres (ARCs):

Sensory and Physical impair	ment Autism Team	Communication and Learning Difficulties Team /	Social Emotional and Mental Health
Team		SLCD ARC and Outreach Teams	Team
Manager:	Manager:	Manager:	Manager:
Lisa Irving	Emma Cox	Ruth Beeston	Jane Shaw
Assistant Team Manage	er: Assistant Team Manager:	Assistant Team Manager	Assistant Team Manager
Julie Pearce (0.8fte)	Wendy Fitzmaurice	Eileen McGrath (CLD Traded)	Stuart Tonks (traded team)
Education Audiologist (0.2	2fte)	SLCD Lead (outreach)	Head of REFRESH:
Veronica Thorvardarso	n	Hilary Peace	Chris Ball

Role	Full-time equivalent	Number of staff	Position/vacancies Sept 2025
Deputy Manager (REFRESH and ARC provision)	1fte	1	-
Team Managers	4fte	4	SEMH Team Manager post removed for 1.9.25 so 3 Team Managers in 2025-26
Assistant Team Managers / Educational Audiologist	4fte	5	No change. Two Lead professional SEMH posts created- one traded and one High Needs for Sept 2025
Lead teacher for SLCN outreach and FTC for EDI Lead	0.9fte	2	Both posts to be removed by end 31.12.25.
Head of REFRESH	1fte	1	Post moved to outreach team 31.08.25 and vacant from 1.9.25.
Specialist Teachers	23.7fte	32	Plus vacant during year due to SLCD ARC closure and awaiting review 0.8fte plus 0.9fte in other teams. From 1.9.25- 2.2fte vacant in SEMH team- FTCs to be advertised for Jan 26 due to SISS review. 2ft REFRESH teachers moved to outreach team.
Inclusion Support Practitioners/TA and audiology technician	19.3fte	23	Vacancies SLCD 1fte; autism 0.8fte; SPI 0.2fte. TA post removed for 1.9.26 due to REFRESH closure
HLTA and Play therapist	1.8fte	3	1fte HLTA post and 0.4fte PT post moved to outreach team 0.4 PT post vacant.
Total	55.7fte	71	

5. Caseload Information

Non-Traded Teams	No of children on caseload 2024 – 25) (as of July 25)	Number of high needs requests accepted	Number with EHC	Number at SEN Support	Number of new referrals
Hearing Impairment	273		66	207	62
Visual Impairment	127		34	93	16
Physical Disabilities	150		56	94	19
Multisensory	63		39	24	15
SPI Team TOTAL	613		195	418	112
Autism Team — not all schools have children with diagnosis on Code of Practice so figures do not add up across lines	1859	960(targeted) 214 (High Needs ISP) 64 (AIM)	975	671	220
SLCD Team outreach	432	54	78	247	56
SLCD Valley/Bishop Wilson ARCs	13		7	6	N/A
SEMH High Needs Pathway * difference due to not all pupils on the Code of Practice at SEN support/EHCP and some cases carried over from 23-24	82		19	31	57
SEMH EHCP TEAM work	35		35	0	24
SEMH VIRTUAL SCHOOL	104		17	47	102
TOTAL (incl SPI Team)	3138		1131	1420	571

Traded Teams	No. of children open in year	Number with an EHCP	EHCP under assessment	Number at SEN Support	No SEN or not on COP	Not known	No of new referrals
Communication and Learning Difficulties Team	706	118	25	380	174	8	342
SEMH Team	829	142	33	424	222	6	829

Key points:

- **SPI Team caseload** Hearing Impairment numbers of referrals have elevated from previous years, and with no post 16 support in colleges offered, this has seen an overall increase in caseload this year, as normally it remains steady at around 220 each year. The number of children needing cochlear implants has risen so support remains high for habilitation for this area. The team have also offered some Auditory Verbal Therapy interventions this year due to a member of staff being trained in this to foundation level. Referrals within the other areas of the team have remained stable.
- Caseload for the Autism Team rose by 127 from the previous year, which had seen an increase of 172. 73 additional High Needs interventions were delivered by ISPs with targeted interventions also increasing; however, AIM interventions for pupils struggling to attend school decreased slightly.
- The criteria and referral process for accessing SLCD Team support has been reviewed. A revised pathway has been developed and will be fully implemented from September 2025. Referrals to the SLCD team continue to be affected by delays in access to NHS Speech and Language Therapy assessments. All children on the SLCD caseload who transitioned into Reception, Key Stage 2, or Key Stage 3 were supported during the Autumn term 2024 and again in the summer term 2025. Transition support will continue into Autumn term 2025.
- Valley ARP was decommissioned in July 2025, coinciding with the transition of the current Year 6 cohort to Key Stage 3. Two pupils will transition to mainstream secondary schools with EHCPs in place to support a successful move. One pupil will transition to a Dyslexia ARP, and another to a Moderate Learning Difficulties (MLD) setting. In September 2025, two, Year 6 pupils from Bishop Wilson ARP will transition to mainstream secondary settings, and three new Key Stage 1 pupils will join the provision. The progress and attainment of pupils in the ARC is tracked using a variety of tools, some of which allow very small steps of improvement to be measured. Generally speaking, the children are making commendable gains in all aspects of literacy and language and, in most cases, maths too. The ARC End of Term reports detail progress and

- attainment very clearly. All ARP teachers hold a caseload within the SLCD Outreach Team, contributing to wider system support by sharing examples of best practice across Solihull.
- **For the SEMH team** there has been a 3.5% increase in the number of pupils referred this academic year compared to the previous academic year. Of the 829 children on the SEMH team's caseload, 222 (26.78%) were not on the code of practice. This continues to imply that these children had not received a graduated approach to identify and implement provision for their additional needs prior to being referred to the SISS SEMH Team. Referral across age groups remains constant, with higher referral rates between year 3 year 6.

The ethnicity of pupils on the SEMH team's caseloads largely reflects the wider Solihull school population. However, there appears to be an over representation in pupils with a Mixed White and Black Caribbean and White- White British ethnicity which is a continuing trend from the previous year. Conversely there is an under-representation of pupils with Asian ethnicity.

• The High Needs SEMH Team had 3 teachers employed within the team for the first time, increasing capacity so 82 cases were worked this year rather than 48 in 23/24, with 57 new cases accepted, compared with 29 in the previous year. It also enabled transition work with pupils who had been on the HN Pathway moving to year 7 so they would have greater chance of success, a request from secondary heads. 30 schools have received support; 10 secondary and 20 primary. Meetings with secondary head teachers this year to discuss the pathway have led to increased referrals.

Data shows that in 24/25, 50 % of pupils who were excluded in Solihull were children with SEND needs with all primary pupils excluded having SEND or an EHCP. This year's data identifies a clear difference between the % of white and black Caribbean, pupils within the Solihull school population on the SEMH HN's pathway. White and black Caribbean pupils make up 21 % of the SEMH HN pathway caseload yet form only 4.66% of the Solihull school population of pupils attending a state funded school. With this exception, the SEMH HN pathway ethnicity figures are comparable with Solihull data. There is a clear need to understand this inequality.

• **REFRESH-** after 3 years the primary SEMH Nurture provision has been decommissioned. Staff remaining with the service have been moved into the SEMH outreach team.

6. Traded services

Number of schools purchasing traded learning and SEMH support in the next academic year 2025 - 2026 through an annual Service Level Agreement.

Team	Primary	Secondary	Independent/OOB	Total schools	Specialist settings/ AP	Total
CLD	29	12	3	44	5	49
SEMH	52	12	3	67	6	73

CLD Team

- For 25/26 the CLD team will be supporting **29 out of 59 primary schools (49%)** and **12 secondary schools out of 15 secondary schools (80%).**The Heights, Grace Academy, Streetsbrook Infant, Berkswell Primary, Yorkswood Primary, and Tudor Grange Academy- South have newly commissioned CLD hours. The Virtual School increased its commissioned time from 210 to 360 hours.
- A new collaboration with the Youth Justice Service has resulted in 126 hours of commissioned assessment time for both 2024–25 and 2025–26.
- Edge of Care (now Families Together) also commissioned 75 targeted hours to support assessments for pupils supported by social care and out of education. Finance is being agreed to continue this in 2025-26.
- Two schools, **Hasluck's Green** and **Merstone**, have opted out of CLD contracts for 2025–26 due to internal MAT capacity and difficulty allocating hours respectively. **15 schools increased** their commissioned hours, whilst 7 reduced them. The net increase across all schools totals **283 hours**
- An additional **63 hours of spot-purchased assessments** were delivered across the year.

SEMH Team

- Buy back from Solihull schools remains largely consistent over the last 5 years. For 25/26 the team will be supporting **52 out of 59 primary schools (88%)** and **12 secondary schools out of 15 (80%).** Gaining; 2 secondary schools but losing 2 schools due to a change in MAT arrangements.
- Currently supporting **84** % **of mainstream schools through traded services**, a number which remains stable. Across Secondary and Primary a net gain of 60 hours has been achieved. (+97 hrs Secondary, 37 hrs Primary) 7 existing primary schools and 4 Secondary increased their buy-back. 14 Primary and 1 Secondary have reduced their buy-back. Solihull Academy purchase 1200+ hrs support for all its' Solihull settings.
- 7 schools opted to buy in additional support through spot purchases totalling 86 additional hours of support requested mid-year. This includes 1 who previously did not subscribe who went on to purchase an SLA in 25/26 and 1 secondary Academy who previously had ceased their SLA.

Other traded work

SPI team have delivered commissioned work to Victoria College this year.

7. Training 2024 – 2025

Centrally based training

Course name	Delivered to:	Total number of participants trained	% graded course overall good or outstanding
ADHD awareness	SENCO network	40	100%
AET – Autism and Anxiety	SENCos / SLT	13	100%
AET – Autism and Inclusion/Exclusions	SENCos / SLT	0 (no uptake)	N/A
AET – Good Autism Practice	Mix of school staff.	29	100%
AET – Leadership - Understanding Good Autism Practice & The AET Frameworks	Various school leaders	16	100%
AET – Making Sense of Autism - Schools	Mix of school staff.	4	100%
AET – Progression Framework	Teachers / TAs / SENCos	29	100%
AET Early Years — Good Autism Practice	Teachers / TAs / nursery staff	0	N/A
AET Early Years Making Sense of Autism	All staff	11	100%
Deaf Awareness Training	SENCos, Teachers	7	100%
Developing the Use of AT/AI to promote independent learning	SENCOs, Teachers, TAs, SLTs, EPS	53	100%
Moving and Handling of People	SENCo, Teachers, TA's	23	Not available
New SENCO training UDL and Inclusive Classrooms	New SENCOs and those new to Solihull	8	100%
SENCO Network training -Primary	Primary SENCOs	61	100%
Solihull National Nurturing Schools project	Schools	109 (57 schools)	100%
Supporting children and young people with SEMH needs	Schools	11	100%

Comments from delegates:

CLD team - UDL and Inclusive Classrooms

'The presentation on neurodiversity seemed highly relevant for our school as we begin the PINS project'

'The technology training was so useful'

New SENCO training

'Meeting other SENCOs was really valuable I feel like we've built a network of understanding.'

Deaf Awareness training

'Demonstrating with real equipment. Providing plenty of visual support helped.'

Supporting children and young people with SEMH needs

'Really useful practical strategies and tips to take back'

'I came away with lots of strategies and resources that I can put into practice in my setting.'

Schools Making Sense of Autism

'The trainer has excellent knowledge, delivered clearly and was engaging'

Understanding Autism and Anxiety in Schools

'Understanding triggers that may increase anxiety and the whole school approaches that will help.'

Traded training (out of school's SLA hours)

Course name	Delivered to:	Total number of participants trained	% graded course overall good or outstanding
Developing Emotional Resilience	Bishop Wilson Primary School	18	100%
Restorative approach	Monkspath Primary School	15	100%
Trauma and Attachment aware	St Peters Secondary	27	100%
	TGA Hockley Heath	15	100%
	Arden	12	100%
ADHD awareness	Meriden CoE	8	100%
	St Peters	120	100%
	TG Hockley Heath	15	100%
Alphabet Arc & Reading Comprehension	Balsall Common Primary teachers	25	100%
Anxiety Workshop	Ulverley primary school	15	100%
Colourful Semantics	Marston Juniors teachers and TAs	15	100%
Declarative Language	Saturn	10	100%
	Mill Lodge teachers and TAs	30	100%

Dyslexia Training	Woodlands teachers	20	100%
EBSNA	St Peters Secondary	12	100%
Emotion coaching	Yew Tree	11	100%
P.A.C.E. /Managing Relationships	Yorkswood	40	100%
	Alderbrook	30	100%
	St Andrews	12	100%
	Knowle	35	100%
	Ulverley	11	100%

Comments from delegates:

CLD training

'Good ideas and practical resources to support reading comprehension sessions'

'Well organised, sequence of presentation'

'Was really helpful to show where to get resources and apply it in my classroom'

SEMH training

Supporting children and young people with SEMH needs

'Really useful practical strategies and tips to take back - thank you!'

'I came away with lots of strategies and resources that I can put into practice in my setting.'

"Loved it! Really informative and practical suggestions. Every teacher in secondary school needs to complete this training."

"Outstanding trainer knowledge, able to link to real case studies"

Commissioned and Bespoke Training

Course name	Delivered to:	Total number of participants	% graded course overall good or
		trained	outstanding
AET Developing Play in the Early Years	Woodlands Infants	17	100%
AET Developing Toileting in Early Years	George Fentham Primary, Early Years staff	5	100%
AET Developing Toileting in the Early Years	Woodlands Infants	20	100%
AET Good Autism Practice	Childrens Services	5	100%
AET Making Sense of Autism	Youth Justice Service	12	100%

AET Progression Framework	Coppice Primary SEN team	4	100%
AET Progression Framework	Merstone Autism Lead	1	100%
AET Progression Framework	Valley School	11	100%
AET Transitions in the Early Years	Woodlands Infants	16	100%
AET Transitions in the Early Years Cranmore Infants, whole school plus childcare HUB		15	100%
Cerebral Palsy	Mill Lodge Primary School	3	Not available
Communication Lead training	SENCOs	8	100%
Deaf Awareness	Various Primary, Secondary schools, including academies and specialist settings	57	Not available
Down Syndrome	Primary School Setting and a parent	31	Not available
Duchenne Muscular Dystrophy	St Anthony's	3	Not available
Hoist training	Various Primary, Secondary schools, including academies	27	Not available
Leukodystrophy	St George and St Teresa Primary school	25	Not available
Makaton	Bishop Wilson and Dicken Heath	31	Not available
Moving and Handling	St Anthony's Primary and Fordbridge Primary Schools	5	Not available
Promoting Pupil Independence by Using Assistive Technology and AI	Coleshill Heath Primary School	65	100%
Understanding and Supporting Neurodiversity in the Youth Justice Service	YJS and Exploitation team	12	100%
Understanding Speech and Language Needs in the Youth Justice Service	YJS and Exploitation team	15	100%
Universal whole SLCN training	20 schools	400+	100%
Visual Awareness	Various Primary and Secondary schools	32	Not available
Wheelchair training	Heart of England Secondary School	12	Not available
	The Heights Specialist School	12	100%
	Monkspath Primary School	35	100%

Comments from delegates:

Leukodystrophy

"Helped to understand the condition and strategies for the classroom"

Deaf awareness

"a very informative session, the facilitator was extremely knowledgeable and passionate in delivery"

Developing Toileting in the Early Years

'Thank you for all the information shared, it was very informative and useful, for example, the one-page plan, and how to assess, plan, do. Lots to think about, for instance motivators and adjustments that could be made in our school to support.'

Progression Framework

'It was helpful to have an insight into this resource as it is not something we have used before, and to discuss how we could utilise it within our school, to suit the needs of our children.'

'The depth and detail about how to complete the document was very helpful.'

Promoting AI

'I have learnt so much in this session – it will change how I work from now on'

'I wish I had known how to use technology in this way a long time ago – it would have made such a difference to so many!'

Understanding Speech and Language Needs in the Youth Justice Service

'Just wow! Fantastic training – just what our setting needed to hear!'

'I have started to think about what the YP might be communicating in a different way. I did not know that language difficulties cause such a difficulty.'

Training for Parents and support groups

Course name	Delivered to:	Total number of	% graded course overall good or
		participants trained	outstanding
Fire Station	Fire station	Approx. 8	Not available
Little Listeners	Elmwood Place	12	Not available
Little owls	Hatchford Brook	14	Not available
Parent Workshops -	Parents of children with an autism diagnosis in Solihull schools and those on SAS waitlist.	39	100%

Comments from families, support groups and young people:

Fire station trip

"My favourite part of the day was I made a best friend called Child B and my other favourite part was I could soak my fiend." HI child, attending Fire Station trip KS2

"I really loved it today. I really appreciate coming here. Thank you for inviting me. I would love to come here again." HI child, attending Fire Station trip KS2

Parents of children with an autism diagnosis in Solihull schools and those on SAS waitlist

"The training helped me better understand how my autistic child experiences the world. Learning about sensory sensitivities, communication differences, and the importance of routine gave me new tools to support my child with more patience and empathy. I especially appreciated the practical strategies and real-life examples."

"Content was fantastic and meeting other parents face to face helps you realise you're not alone."

"We were given lots of resources that we can take away and use."

Where data is recorded as not available this is due to issues with administration being resolved.

8. Case Studies - further examples are available in individual team reports.

Case Study 1: SISS Autism Team Case Study 2025 - PUPIL X - Secondary

Pupil:	X
Start date of intervention:	06.03.25
End date of intervention:	26.06.25
Reason for request for support:	 X is demonstrating dysregulated behaviour that may appear inappropriate – Making guns and simulating shooting staff and students. (PREVENT referral submitted by school) Feeling overwhelmed in the classroom environment leading to emotional responses and dysregulated behaviours (as above)
Focus for intervention:	Intended outcome of intervention (agreed between school and advisory teacher – Taken from AET Progression Framework)
	 TARGET/S: Support for X to have more understanding of autism and his profile of needs. More knowledge of how his actions may impact those around him, and why this is not appropriate. Work with X to identify sensory needs and replacement behaviours as a form of regulation. Support school to understand adaptations needed to support engagement in school.

Context:

- Observed in primary setting by SISS Autism Team (another advisory teacher) in March 2023 and November 2023.
- A Short Sensory Profile was also written in April 2023 which highlighted specific areas of sensory needs.
- X also had support from the SISS SEMH team.
- X transition to a local secondary school in September 2024. X was discussed at the SISS Autism Team planning meeting
- Observed X 14th February 2025 advice given and suggested a request for support received 25th Feb 2025
- ISP intervention started 6th March 2025

Initial school and family concerns:

- 1 suspension and multiple refocus sessions. Has hurt pupils and made threats. We discussed that X reacts impulsively particularly when angry and often doesn't realise the impact his actions/words have on others. He has a sense of humour that others may find tricky to understand.
- Discussed ADHD and Autism push/pull factors
- Due to his profile of needs, the school day overall will be challenging (focus, attention, sensory needs, communication differences etc)

- Parents discussed not being aware of what X was accessing through technology. Advice sought over email 07-02-2025. Discussed parental control on devices, PREVENT referral etc.
- School had requested an observation completed on 14-02-2025 (advice given)
- Prevent referral made by school.

Pupil Interventions:

- All About Me X required support to stay focused during the session- we chunked the questions and had regular breaks where X could tell me about his interests, trains, planes and cars.
- Pupil voice- Discussion with school staff.
- AET Sensory questionnaire
- Session to support understanding of appropriate/inappropriate actions as may be perceived by others. Look at alternatives to action as a replacement.
- Introduced Lego to our session- X played with the Lego and was able to focus more on our session around triggers and complete the AET sensory questions.
- AET sensory report.
- Session around appropriate responses Pause, think and act (resource given to school)
- Session on right and wrong scenarios, X had good understanding of what was the right and wrong in the scenarios. Went over the social story with him.
- Session around an incident and some restorative practice. Social stories created by JM explained and reviewed with X in sessions.
- Needs Based plan- final work on the 3 areas of difference.
- Final evaluation session with X.

Staff training/ modelling/ support:

- Observation and advice given in class
- Sensory circuit training- for High Needs Manager and Director of Learning Support/Autism Lead. Autism teacher created sensory circuit specifically created for X Resources shared and demonstrated.
- Discussed and explained replacement behaviours in line with what X was displaying in school.
- Social story written regarding replacement behaviours- shared with school staff and given links to specific tools that can be purchased to support this. School staff then met with X to identify what might work for him and they ordered these together.
- TAC meeting pulling together the team around X to discuss dysregulation and next steps in the support package. (Mum, Head Teacher, Autism Lead, Social worker, interpreter, autism team teacher and ISP in attendance)
- Reviewed AET sensory preference report completed by EH in sessions with X.
- Collated information from EH's Executive Function session with X and completed report.
- Completed summary of intervention and Needs Based Plan- advice given regarding next steps

Feedback Comments:

Pupil:

- o I feel a lot calmer and now I have the replacement for the clicking sound and that I can write my blueprints/story in my book when I want. This helps me.
- o I like talking to you every week- it calms me. I would like to be able to talk about things I am worried about to someone and also tell them my great ideas as my brain is brilliant.
- o I would like to be able to go for a walk around the school when I feel like 'X 10 is going to come out'. This calms me.
- o I like listening to music, writing and Lego this calms me.
 - I am going to use my pause, think, act
- o I am going to talk to an adult, though do not know who it will be, if I have worries and struggling with my emotions.
- o I would like an adult to be able to take me out of the classroom when I am struggling and walk me around the school or take me to so my calming things like music. I would like to have more trees around the school also.
- o I feel sad that the sessions are going to stop I like talking to you about my great ideas.
- o I am more aware of what I do not like and to be able to do other things to get the clicking sounds.

ISP feedback/review:

- o X is enjoying school more now he feels calmer and has strategies he can use.
- o He is more aware of his triggers and what strategies he needs to help him self-regulate.
- o He is having less behaviour points and there is more understanding between X and staff.
- o He will need regular support and reminders of his strategies.

School feedback:

"The SISS team have been able to support us with regards to one of our high needs students X.

"X has an ADHD and Autism diagnosis and has been struggling to cope with the environment around school since joining X in September."

'X has struggled both in lessons and socially around school and a referral was made as X was demonstrating many concerning inappropriate behaviours and making inappropriate comments particularly during times of high stress and had also had angry outbursts involving physical altercations with other students. '

'The SISS team have been able to support us with the following interventions':

Observation-Strategies provided to SEND staff. Advice and strategies added to Lode Heath strategies and delivered to staff for use in lessons.

Attendance to TAC meetings- Contributed to the multi-agency approach to support X and his family. Mum has communicated and engaged well with the school and the SISS team has been able to offer Mum advice to support X at home with regards to monitoring his use of the internet and monitoring the content he watches.

Sensory, executive functioning reports- Specialist feedback provided to the SEND team though completion of reports - Information used to update strategies and need based plans and enable school SEND staff to provide training to teaching staff of supporting X in lessons.

One to one work with Emma Hood- One to one support to explore barriers and issues that have arisen in the week. Feedback provided to SEND staff to better support X.

Needs based plan provided which has been passed on to teaching staff.

Sensory Circuits- Sensory circuits developed to provide X with a break throughout the day. X has engaged with this on occasions. The sensory toy of a keyboard 'clicker' has support X in reducing his use of 'imaginary guns when stressed.

Social story- relating to playing with imaginary guns. Social story used by SEND staff through the days and at times when X has demonstrated these behaviours. X's use of such behaviours surround guns has reduced significantly.

Outcomes

Overall, X still struggles across school however the occurrence of concerning and inappropriate behaviours has reduced dramatically since the work with the SISS team. This is demonstrated by his improved behaviour record and X has no incidents of internal exclusion for inappropriate behaviour/comments since Easter. X is able to self- regulate much more and he is recognising when he needs a time out and uses his sensory tools to support him in times of high stress. Staff are able to recognise when X needs a time out and are using strategies provided by the SISS team to try and reduce these occurrences. X's family feel well supported by school and are thankful for the input of the SISS team in that support. Information regarding parent workshops has also been passed on to parents"

Autism Team Members: Jaime Mulrooney and Emma Hood

Date: 02.07.2025

Case Study 2: Vision Impaired Team

Context/Background

Child A was born moderately prematurely at 34 weeks. Child A has a vision diagnosis of hypermetropia (longsightedness) and a squint. Hypertropia means that Child A sees things better when they are further away but struggles to see things close-up. A squint is a condition where the eyes don't look in the same direction at the same time. If left untreated, a squint can lead to a 'lazy eye' (amblyopia), where the brain ignores signals from the misaligned eye, causing vision loss in that eye. Concerns have been raised regarding Child A's peripheral vision. Child A also has a diagnosis of VACTERL Syndrome, a complex condition that affects several parts of his body.

Child A had been part of a mainstream educational setting since the Foundation Stage, where he has received support tailored to his learning needs. As he progressed through school, the increasing pace and complexity of the curriculum presented challenges for him. These experiences impacted his behaviour, and at times, he required more individualised support, which led to him spending time learning separately from his peers to provide a reinforced positive experience for him to progress as an individual and support his wellbeing. Recognising his unique strengths and needs, Child A transitioned in January 2025 to a specialist setting designed to provide a continued inclusive environment with a bespoke style of learning that were tailored to Child A's needs. This move has enabled him to access a curriculum and provision better aligned with his complex needs profile, promoting his engagement and wellbeing. This is a case where specialist education placement was the most appropriate.

Support to date has included:

- Regular TAF meetings to support Child A and family.
- Regular Blocks of Intervention working with Child A on a one-to-one basis by specialist staff in field of vision.
- Regular half-termly visits from a Qualified Teacher of the Vision Impaired (QTVI).
- Visits to the family home to support Child A in the immediate run-up to transition from mainstream to specialist setting.
- Although vision is low need compared with Child A's other needs, the compound effect of his complex needs means that Child A will continue to receive regular half termly visits from a QTVI to support him in his new setting.
- Regular contact will be maintained with parents to ensure that any concerns are addressed as a matter of priority.

<u>Challenges overcome</u>

- Child A has successfully transitioned to his new school and is working in a class with 7 or 8 other children. He is working at a similar level and pace to his peers.
- Child A has positive relationships with all the adults working in the classroom.

- Initially transport to school was an issue for Child A, with him refusing to get on the minibus/taxi on a few occasions. However, Child A is now travelling to school without any problems.
- Child A was refusing to get in the bus at home time, resulting in teaching staff having to take Child A home. This has been resolved with parents collecting Child A from school at the earlier time of 2pm. School has recently applied to Transport for Child A to be collected by Transport at 1pm, if he then refuses to get on the bus, this gives mum enough time to travel by public transport to collect Child A by the end of the school day. Once Child A is getting on school transport, the time of pick-up will gradually be moved to a later time, until it is in-line with the regular school pick-up time.
- Child A still has times when he becomes dysregulated, but these are far less frequent than they were when he was in his previous setting. School staff now deal with this within school, rather than contacting parents (to collect him) to resolve the issue. Child A had previously learned that if he became upset and dysregulated, staff would contact parents to collect him from school.

Outcomes achieved

- Child A is attending school every day.
- Child A is no longer working in a revised tailored environment that is highly different from his peers, with an adult in school but is working with his peer group for cognition and social content. The work is pitched at an appropriate level and pace to suit Child A's needs. Child A will work and play alongside his peers and seems to enjoy the classroom atmosphere.
- Child A has a positive relationship with all the adults working in the classroom.
- Child A is visually accessing all his work well, without any issues. The modified resources, including the use of 'Communicate in Print' symbols are well-suited to Child A's needs.

Views of the family

Child A's parents are happy that Child A is now in a specialist setting that is better suited to meet the complexity of all their child's needs. They feel that although it took a long time to get Child A into the right setting, Child A is now much happier. It has also meant that parents, 'now have a life' (dad), now they are not being phoned by school daily to collect Child A because he has become dysregulated.

Name of person completing the pro-forma: Alison Shortt, QTVI, Vision Support Team.

Date completed: June 2025

Case Study 3: SISS SEMH TEAM

SISS SEMH TEAM CASE STUDY

Pupil's name:	Pupil B
Current year group:	6
School/setting:	Primary School
Start date:	20.01.2025

1. Reason for referral

- To improve Pupil B's emotional regulation skills
- To improve Pupil B's confidence and growth mindset
- To support Pupil B with transition to Secondary

2. Intervention plan

SEMH advisory teacher

Direct work:

- Weeks 1-6: Relationship building. Focus on growth mindset and reframing thoughts using positive language.
- Week 7-12: Emotional regulation. Identifying emotions and strategies to regulate. Breathing exercises. Mindfulness
- Week 12-16: Transition support. Managing change, positivity board, social story around JHNCC and prompt cards for transition day and to teach new routines

School support

- Weekly communication with staff to follow up on progress and keep updated about incidents.
- Contribution to PEP meetings to discuss progress and further support. (Stakeholders: virtual school teacher, health and social care, school, birth parents and carers).
- Sharing resources for wider strategies.

3. Outcomes achieved

- Improved self-esteem and recognition of strengths
- Better emotional regulation strategies
- Increased confidence with transition (network of adults in new setting)
- From PEP meetings, a CLD assessment was completed to inform Cognition and Learning support needed as part of transition to secondary. Further identified needs through a multi-team collaborative approach.

Target Measured Evaluation (TMEs)					
Area of Work	Start score	Best hopes	End score	Points progress	
Target 1 To build Pupil B's self-esteem so that she can identify her areas of	5	7	7	2	
strength Target 2					
To develop a range of strategies to regulate Pupil B's emotions	5	7	7	2	
Target 3					
For Pupil B to be aware of her feelings about transition to Secondary and be able to communicate these in an effective and appropriate way with support staff / teachers / family	6	8	8	2	

4. Feedback

Pupil - 'I have found these sessions useful and can use these every day. I don't get as upset or sad anymore over silly things.'

School – 'Pupil B has made good progress, and this is reflected in how happy she is in school. They have been a significant decrease in incidents around friendships'

Home – 'Pupil B can sometimes still be emotional but has stopped some behaviour such as kicking the stair bannisters'

Case Study 4: Communication and Learning Difficulties Team

SISS Speech, Language and Communication High Needs Team: Case Study

Context

Child A is the eldest of two siblings, with a younger sister. She has no reported sight or hearing difficulties. Parents express ongoing concerns about her **progress with speech** and the **frustration** she experiences when she is not understood.

Child A has a history of **speech sound difficulties** and **auditory processing challenges**. SALT have identified ongoing phonological processing delay, with processes such as **cluster reduction** and **deaffrication**, which reduce her intelligibility. Possible **verbal dyspraxia** was first noted in the early years and referenced again in the 2024 SALT report.

Support to date has included:

- 2021 Referred to Early Years team for support with speech and language by nursery.
- 2022 Seen by NHS SALT. Referred on to SISS SLCD High Needs team to support transition into school. Severe speech difficulties noted, with possible verbal dyspraxia.
- Sept 2022 Nursery visit from SLCD happened with transitional support arranged for entry into EYFS.
- Nov-Dec 2022 SLCD ISP Block 1 happened in EYFS to work on targets and model strategies to staff.
- **Dec 2022** Virtual consultation between SLCD team, class teacher, and SENCo at her school happened to discuss ongoing concerns and other support accessible.
- **Sept 2023** ISP Block 2 implemented by SISS SLCD team.
- Nov 2024 SALT review recommended consideration of an EHCP application and referral to the Specialist Assessment Service (SAS) was discussed for potential autism assessment.
- **Dec 2024** SLCD teacher set new targets as part of High Needs Support and ISP Block 3 planned. Discussions about potential suitability for a placement at Bishop Wilson SLCD Additionally Resourced Provision began.
- Jan 2025 CLD Cognition and Learning assessment provided a detailed profile of Child A's strengths and areas of need. Evidence gathered demonstrated a robust Assess, Plan, Do, Review (APDR) cycle and a clear graduated approach over time.
- March 2025 SISS SLCD team and school SENCO, in liaison with parents, requested a placement at Bishop Wilson ARP.
- Summer 2025 Child A was accepted for a place at Bishop Wilson ARP (Additional Resource Provision) and a robust transition process was planned and implemented.
- Sept 2025 Completed a highly successful first two weeks at Bishop Wilson ARP.

Interventions

- Multiple blocks of **SLCD ISP intervention and SLCD teacher review**, focusing on speech sound development, auditory processing, receptive vocabulary, and literacy skills.
- SALT interventions targeting speech sound processes, intelligibility, and auditory processing.
- CLD Cognition and Learning Assessment to gain insight into learning profile.
- Adaptations in class: reduced language load, visual scaffolds, extra processing time, and adult modelling.
- Movement breaks and sensory strategies used to support attention and reduce distractibility.
- Targeted literacy support in reading comprehension, fluency, spelling, and vocabulary.

Current plan:

- Continued placement at Bishop Wilson ARP with access to specialist teaching, SALT, and differentiated curriculum.
- Ongoing monitoring of progress with a view to EHCP application for key stage 3.
- Close liaison between ARP staff, SALT, and parents to ensure smooth long-term support.

Challenges Overcome:

- Transition from nursery to reception successfully managed with tailored support.
- Gradual improvement in classroom participation and engagement.
- Improved ability to access learning with consistent scaffolds and breaks.
- Positive relationships with peers and staff established, helping Lexi-Mae feel more confident in communication despite speech challenges.

Outcomes Achieved

- Reading: Accuracy and rate broadly average, but fluency and comprehension remain areas of challenge.
- Spelling, receptive vocabulary, and auditory memory: Below average, requiring targeted support.
- Mathematics: Calculation skills in the mid-average range, reflecting her reported strength and enjoyment.
- A comprehensive profile of needs is now available through **CLD cognition assessment**, **SLCD, and SALT**, providing a robust evidence base for long-term planning.
- Successful initial transition to specialist provision.

Views of the Family

Parents continue to express concern regarding Child A's progress with speech and the frustration this causes her. They value the long-term involvement of NHS SALT and SISS SLCD team and feel reassured that her move into specialist provision at BW ARP will ensure her needs are met more consistently.