

Pupil's Name		Suggested Band		#NAME?					
#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
Sensory and or Physical			Communication and Interaction			Social, Emotional and Mental Health			Cognition and Learning
PD, PNI & Independence	Hearing	Vision	Speech and Language (S&L)	Social Communication / Autism Spectrum	Emotional Wellbeing	Social Behaviour	Learning Behaviour and Attitude	Learning Difficulties	
Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching. Score of below 5 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching. Score of below 5 points on the NATSIP* Eligibility Framework for S Scoring levels: vision impairment.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	Development in-line with the typically developing child or young person (CYP). Pupil may need increased differentiation, small group or 1:1 teaching as part of High Quality Teaching.	
Can move and position independently but has stability and/or gross-fine motor coordination difficulties; hand or limb function may be restricted. Some assistance required for access to curriculum or self-help routines. Independent with many areas of self-care. May need support with self-medication in school.	Score of between 10-19 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for a level 1 pupil with vision impairment. Within the range 6/12 - 6/18 SnellenKay (LogMAR 0.3 – 0.48) . The pupil will function at a mid level of vision impairment. There may be difficulty with near or distance field vision but the difficulty will not be significant at this level of support and /or may be correctable with consideration to school and classroom environment. Colour blindness may be present. Pupils may have patching for squints, monocular vision or may have fluctuating vision impairment. Some pupils may have a restricted field of vision or vision impairment in one eye. Strategies, monitoring and advice from a specialist	Score of between 6-14 points on the NATSIP* Eligibility Framework for Scoring Levels; Vision impairment. Typical Profile for a level 1 pupil with vision impairment. Mild-Moderate – 6/15- 6/19 SnellenKay (LogMAR 0.3 – 0.48) . The pupil will function at a mid level of vision impairment. There may be difficulty with near or distance field vision but the difficulty will not be significant at this level of support and /or may be correctable with consideration to school and classroom environment. Colour blindness may be present. Pupils may have patching for squints, monocular vision or may have fluctuating vision impairment. Some pupils may have a restricted field of vision or vision impairment in one eye. Strategies, monitoring and advice from a specialist	Pupil shows some mild delay in one or more area of SL&C development (SALF Level 4) and benefits from additional time and assistance to learn new vocabulary and to process and respond to verbal information. Below expected language levels as assessed by WellComm, ACE or informal assessments. Difficulties with story recall. Elements of being misunderstood and/or often lacks understanding. Pupils in the 'here and now.'	The pupil has difficulty in initiating social interactions. They appear to have a decreased interest in social interactions. When made social approaches are often unsuccessful and unreciprocated. They are interested in children and young people of their age and want to have friends but need help with this. Pupils show an inflexibility of behaviour which causes significant interference with functioning in one or more contexts. Pupils sometimes have difficulty switching between activities. They have problems of organisation and planning which hampers independence. With some additional support pupils are able to work on same tasks as others the same age that do not have additional needs. They are able to learn in the whole class group. Pupils need planned strategies to support with transitions and flexibility. They can at times manage their levels of mild anxiety. Pupils present with mild hypo/hyperactivity to sensory input	On the whole the pupil is able to maintain stable healthy emotional states but may struggle to manage and accept change in systems and routines. Pupil may not be able to see the changes that they can make with support in order to make progress. Pupil may find it hard to express themselves emotionally and let others know how they are feeling. Difficulties with managing emotions might manifest through the pupil's potential for disruptive behaviours but this can largely be managed in the classroom environment with appropriate support and interventions	Pupil may have difficulty in forming positive relationships with adults and/or CYP of the same age. Pupil may sometimes struggle to make and keep friends and will need support. Pupil may struggle to cooperate with other CYP of the same age or adults. Pupil may express themselves through emotional/behavioural responses if emotional literacy skills are poor. Delayed development of social and/or emotional skills and understanding.	Pupil may find it hard to develop the age appropriate behaviour for learning skills needed to attend, to start and to complete tasks. Progress of pupil is being inhibited, this may be in certain areas only and sporadic. Their actions may also be hindering the learning of others. Pupil may find some subjects difficult (e.g. literacy) in that they are not motivated by the content. Pupil may show some observable and known occasions in which they are more successful. Carefully planning needed to support pupil's learning. Pupil can be motivated by extrinsic rewards.	Pupil is attaining at a level considerably below age-related expectations in one or more areas despite access to appropriate learning opportunities and support. Pupil's scores on a standardised assessment might be in the range 3rd -15th centile. Pupils may be working at national attainment KPIs that are up to 3-4 years below their chronological age. The school are making interventions that are 'additional to' or 'different from' the provision available to meet the majority of pupil's needs. Provision required to meet the pupil's needs can reasonably be provided from within the resources normally available to mainstream early years' providers, schools and post-16 institutions.	
May have persistent minor health problems requiring increased monitoring. Mobility may be affected, particularly over medium distances. Independently uses safety features e.g. handrails. Achieves most self-care activities independently at an age appropriate level.	Score of between 20-39 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for Level 2 1 hearing impaired pupil. Mid-Moderate sensor-neural (with/without conductive overlay) hearing loss. Will use hearing aids and may make use of a soundfield system or radio aid. The diagnosis may be a late diagnosis. Key family or staff members will require training in managing equipment and ensuring inclusion. The pupil may require support to become an independent user of their equipment and to understand their hearing and listening needs	Score of between 14-24 points on the NATSIP* eligibility framework for vision impairment. Typical profile for a level 2 pupil with vision impairment. Mild-Moderate – 6/15- 6/19 SnellenKay (LogMAR 0.4- 0.5) . The pupil has impaired function in the educational setting and this is generally accepted to be the key criterion. There may be a restricted field of vision ; fluctuating visual impairment; deteriorating conditions; cerebral visual impairment; retinal atrophy; Retinal dystrophy. Recently acquired permanent VI or late diagnosis. Pupils will have a bilateral impairment	Pupil has a moderate delay in either receptive or expressive language development, or presents with a speech sound disorder which affects intelligibility and literacy development (SALF Level 3). On standardised assessments, pupil achieves scores below 16th percentile for either receptive or expressive language	Pupil shows a deficit in verbal and non-verbal social communication skills. They have inflexibility of behaviour causing very significant interference with functioning in one or more contexts. They often have difficulty switching between activities. Pupil has significant problems with organisation and planning which hampers independence. With frequent support the pupil is able to work on the same tasks as others the same age that do not have additional needs. Pupil shows a limited interest in interactions with CYP of their own age. They need smaller groups / less stimulating environments at times. Pupil presents with significant hypo/hyperactivity to sensory input and significantly unusual interests in sensory aspects of the environment.	Pupil has significant and persistent SEMH needs which cause substantial barriers to learning in one or more of the following areas: <ul style="list-style-type: none"><li>• Self-perceptions</li><li>• Mood (e.g. difficulties in managing mood, or persistently low mood)</li><li>• Relationships (e.g. social skills, trust and/or dependence, bullying)</li><li>• Understanding or regulating emotions (e.g. anxiety, anger)</li><li>• Behavioural self-regulation (e.g. impulsivity, hyperactivity, concentration)</li><li>• Experience of stress or trauma</li><li>• Substance dependence/misuse</li><li>• Delayed development of social and/or emotional skills and understanding</li></ul>	Pupil may find it hard to develop the age appropriate behaviour for learning. In particular, skills needed to attend, to start and to complete tasks. Pupil may have particular difficulty in keeping their attention on one thing requiring repeated adult redirection to task. Progress of pupil is being inhibited and their actions may also be hindering the learning of others. Pupil may find some subjects difficult (e.g. literacy) in that they are not motivated by the content. Pupil may show some observable and known occasions in which they are more successful. Pupil organisational skills are not as developed as others their age and create a barrier to learning. Pupil can be motivated by extrinsic rewards.	Pupil is attaining at a level significantly below age-related expectations in one or more areas despite access to appropriate learning opportunities and support. Pupil's scores on a standardised assessment might be at the 2nd or 1st percentile. Pupil may be working at national attainment KPIs that are 4-5 years below their chronological age. The school are making interventions that are 'additional to' or 'different from' the provision available to meet the majority of pupil's needs. Provision required to meet the pupil's needs cannot reasonably be provided from within the resources normally available to mainstream early years' providers, schools and post-16 institutions.		
Regularly uses a mobility aid to move independently. Can independently transfer to and use a wheelchair when needed. Disability can directly limit some aspects of self-care. Neurological factors associated with impairment also impact on independent learning and approach to self-care more frequently. Differentiating curriculum access requires increased personalisation use of assistive technology. Disability limits range of self-care. Neurological factors may have an impact on learning and functioning.	Score of between 40-59 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for Level 3 1 hearing impaired pupil. Moderate, bilateral hearing loss (sensor-neural, conductive or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. They will use hearing aids and likely use a radio aid. Their site of the lesion of their hearing loss will have a direct impact on their language, thinking and literacy development as well as their interaction and social development. Key family or staff members will require training in managing equipment and ensuring inclusion. The pupil will require support to become an independent user of their equipment and to understand their hearing and listening needs. The pupil, family and setting may need support in managing their developing social and emotional needs and their	Score of between 25-39 points on the NATSIP* eligibility framework for Scoring Levels; Vision impairment. Typical profile for a level 3 pupil with vision impairment. Moderate, bilateral hearing loss (sensor-neural, conductive or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. They will use hearing aids and likely use a radio aid. Their site of the lesion of their hearing loss will have a direct impact on their language, thinking and literacy development as well as their interaction and social development. Key family or staff members will require ongoing and intensive training in managing equipment and ensuring inclusion. The pupil will require ongoing support to become an independent user of their equipment and to understand their hearing and listening needs.	Pupil has a moderate delay in both receptive and expressive language development, or presents with receptive or expressive delay alongside a mild speech sound disorder which affects intelligibility and literacy development (SALF Level 2). On standardised assessments, student achieves scores below 5th percentile in at least one areas of language development. Phonological Awareness is limited affecting literacy development. Language is developing typically but is moderately to severely delayed. Non-verbal skills are better than verbal. Some difficulties accessing the curriculum. Social communication impaired. Narrative/oral communication significantly impaired.	Difficulties with social skills are apparent even when support is in place. There are marked difficulties with coping with change. The pupil displays distress and difficulty when changing focus or moving from one activity to another. Restricted/repetitive behaviours appear frequently enough to be obvious to all and interfere with functioning in a variety of contexts. The pupil is unable to interpret social cues. The pupil interprets speech literally and shows rigidity and inflexibility of thought processes. The pupil participates in solitary play which is unusually focussed on a special interest. The pupil presents with moderate hypo/hyperactivity to sensory input and moderately unusual interests in sensory aspects of the environment.	Pupil has significant and persistent SEMH needs which cause substantial barriers to learning in two or more of the following areas: <ul style="list-style-type: none"><li>• Self-perceptions</li><li>• Mood (e.g. difficulties in managing mood, or persistently low mood)</li><li>• Relationships (e.g. social skills, trust and/or dependence, bullying)</li><li>• Understanding or regulating emotions (e.g. anxiety, anger)</li><li>• Behavioural self-regulation (e.g. impulsivity, hyperactivity, concentration)</li><li>• Experience of stress or trauma</li><li>• Substance dependence/misuse</li><li>• Delayed development of social and/or emotional skills and understanding</li></ul>	There are concerns about the pupil who gives up easily compared to other CYP the same age when there is a challenge facing them. Pupil may be anxious about new tasks, situations or change. Pupil can get distracted from tasks and/or distract others, are inattentive to staff, have poor organisation skills, and struggle with group learning work when compared to other CYP the same age. Pupil can be motivated by extrinsic rewards but they may not have an awareness that they need to be involved in making changes.	Pupil is attaining at a level significantly below age-related expectations in one or more areas and there is evidence of an increasing gap between them and CYP of the same age who do not have additional needs despite access to appropriate learning opportunities and support. Pupil's scores on a standardised assessment might be below the 1st centile. Pupil may be working at national attainment KPIs that are 5-6 years below their chronological age. The school are making interventions that are 'additional to' or 'different from' the provision available to meet the majority of pupil's needs. Provision required to meet the pupil's needs cannot reasonably be provided from within the resources normally available to mainstream early years' providers, schools and post-16 institutions.		
Significant life-long PD, across key areas requiring targeted intervention specialist therapy. Physical skills may fluctuate or deteriorate during a day. Independent wheelchair use possible but requires adult support for transfer and some aided mobility.	Score of between 60-79 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for Level 4 1 hearing impaired pupil. Severe bilateral hearing loss (sensor-neural or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. The pupil will be using hearing aids and/or cochlear implants and a radio aid. Their site of the lesion of their hearing loss will have a direct impact on their language, thinking and literacy development as well as their interaction and social development. They will be known to speech and language therapy (SALT) services. Key family or staff members will require ongoing and intensive training in managing equipment and ensuring inclusion. The pupil will require ongoing support to become an independent user of their equipment and to understand their hearing and listening needs.	Score of between 40-49 points on the NATSIP* eligibility Framework. Typical profile for level 4 pupil with vision impairment. NatSIP Criteria – Moderate to severe vision loss 6/24- 6/36 SnellenKay (LogMAR 0.6-0.78) Pupils will have a bilateral impairment. Pupils will have significantly impaired functional vision in the educational setting affecting the presentation of the curriculum, the school or classroom environment, and the classroom management of the pupils for example positioning in class, use of equipment etc. This may be compounded by other problems such as visual field loss, ocular motor impairment, visual perception difficulties or the presence of degenerative visual conditions. They will require printed materials to be modified to ensure access to learning. They will likely require enlarged materials N18-24 and be unable to access pictures, graphs or diagrams visually without modification.	Pupil has a severe language and/or speech delay/disorder which affects their ability to communicate successfully with all but those most familiar to them, even with contextual support. Pupil uses a mixture of speech and augmented/assistive communication systems to make their needs/choices known. (SALF Level 1) On standardised assessments, pupil achieves scores below 2nd percentile in at least one area.	The pupil is, for parts of the school day, considerably motivated to follow own (possibly sensory) agenda, which for some of the time detracts them from the adult-led agenda. The pupil shows significant difficulties in social motivation, which very often prevent the pupil from engaging with most or all social activities. The pupil shows high levels of anxiety daily to a degree that may have a negative impact on school engagement. The pupil may be pre-verbal or highly unusual interests in sensory aspects of the environment.	There are concerns on a weekly basis on 2 or more of the bullet points in the cell comment. Pupil is unhappy and unsettled. Pupil finds it difficult to manage their emotions compared to CYP their age and lack self-control. Pupil may find it hard to express themselves verbally and instead may communicate their thoughts and feelings through their behaviour. Pupil may sometimes be anxious, distressed or aggressive, or they may withdraw or disengage from the situation be that a social or learning situation. Pupil may view themselves negatively at times and make deprecating comments.	There are concerns on a weekly basis. Pupil gives up easily compared to other CYP the same age when there is a challenge facing them. Pupil may be anxious about new tasks, situations or change. Pupil can get distracted from tasks and/or distract others, are inattentive to staff, have poor organisation skills, and struggles with group learning work when compared to other CYP the same age. Pupil can be motivated by extrinsic rewards but they may not have an awareness that they need to be involved in making changes.	Pupil is attaining at a level significantly below age-related expectations in one or more areas and there is evidence of an increasing gap between them and CYP of the same age who do not have additional needs. Extremely limited progress is made despite appropriate learning interventions and support being implemented. Pupil may not be able to score on standardised tests. Pupil may be working at national attainment KPIs that are 6-7 or more years below their chronological age. The school are making interventions that are 'additional to' or 'different from' the provision available to meet the majority of pupil's needs. Provision required to meet the pupil's needs cannot reasonably be provided from within the resources normally available to mainstream early years' providers, schools and post-16 institutions.		
Adult-assisted or power-assisted wheelchair mobility. Has personalised seating support as no independent seated stability. Transfers require hoist. Assistance for all personal care needs. May be able to communicate verbally but requires high levels of adult support/assistive technology access in all key areas of need. Neurological factors associated with some impairments likely to have a severe impact on learning and functioning. Access arrangements/adaptations to promote or maintain physical skills require frequent liaison between teacher/TAC and OT/physiotherapist. Increased likelihood of	Score of between 80-89 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for Level 5 1 hearing impaired pupil. Profound, bilateral hearing loss (sensor-neural or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. The pupil will be using hearing aids and/or cochlear implants and a radio aid. Their site of the lesion of their hearing loss will have a direct impact on their language, thinking and literacy development as well as their interaction and social development. They will be known to SALT services and be receiving therapy and interventions devised and delivered by a SALT therapist and a teacher of the deaf. Family and staff will require ongoing and intensive training in managing equipment and ensuring inclusion. The pupil will require ongoing support to become an independent user of their equipment and to understand their hearing and listening needs	Score of between 50-69 points on the NATSIP* eligibility Framework for scoring levels – vision impairment. Typical profile for a level 5 pupil with vision impairment. NatSIP Criteria – Severe and Profound loss –6/37-6/60 and SnellenKay (LogMAR 0.8 – 1.00 and less) management of the pupils for example positioning in class, use of equipment etc. This may be compounded by other problems such as visual field loss, ocular motor impairment, visual perception difficulties or the presence of degenerative visual conditions. The pupils may have little functional sight or be educationally blind and needs will be permanent and lifelong due to the nature of their disability. They are likely to require giant print in the range of N24-N36 and to require all pictures, diagrams and graphs to be adapted. Some may require Braille as a back-up medium, or other tactile format. The pupil family and setting will require support in managing their understanding of a severe vision	Pupil has a severe language and/or speech delay/disorder and is reliant on assistive and augmentative systems to enable them to make their needs and wishes known. Needs are likely to be long term. The difficulties have a significant impact on access to the curriculum. The pupil's language skills are more affected than other areas of attainment. If the pupil has a speech disorder they may be an AAC user. . The pupil may have significant or moderate speech delay and show significant difficulties with social communication and weak auditory skills.	The pupil's interaction is limited to narrow special interests. Their communication is very often to meet their needs. They show high levels of anxiety on a daily basis to a degree that may have a negative impact on school engagement and/or attendance. The pupil has significant difficulties with communication, this may include those who are pre-verbal or show very limited communication skills that require an augmented communication system. The pupil's impaired social development, rigidity of behaviour and thought and communications are enduring, consistently impeding his / her learning and leading to severe difficulties in functioning in the vast majority of contexts within school & home. There is evidence of significant difficulties persisting for the pupil as a result of his / her inflexibility and / or intrusive obsessional thoughts. The pupil presents with very high levels of hypo/hyperactivity to sensory input and very highly unusual interests in sensory aspects of the environment.	There are concerns on a daily basis on 2 or more of the bullet points in the cell comment. Pupil finds it hard to express themselves verbally and instead may communicate their thoughts and feelings through their behaviour. This may realise itself as self-harming behaviour. Pupil shows poor self-control leading to being anxious, distressed or aggressive, or they may withdraw from the situation be that a social or learning situation. Pupil view themselves negatively and make deprecating comments. Pupil shows disrespect for possessions or property when in crisis. For example, not valuing and looking after property. Pupil may hurt staff. Pupil does not learn and socialise well in a group situation. For example, uncooperative or unable to cooperate with CYP of the same age. Pupil has poor interaction with CYP of the same age. Pupil does not show regard to most staff and/or use highly abusive/offensive language which can have sexualised content. Pupil has a strong relationship with at least one member of staff who they will listen to and be soothed by when in crisis.	Pupil is likely to give up easily when there is a challenge facing them. Pupil is likely to be inattentive to staff, show poor organisation skills and struggle with group learning work. Pupil can be motivated by extrinsic rewards. Pupil demonstrates difficulties in being receptive and responsive to authority. For example, accepting instructions and rational explanations for questioned decisions.	Pupil has a severe learning disability which affects every area of their developing and functioning. They will require a high level of support for all aspects of their life. The pupil's academic attainments will be between P4-P8 for the majority of school career. The pupil's scores on a standardised assessment might be in the exceptionally low range.		
Is totally dependent on others to meet all self-care needs including toileting, dressing, and nutrition. Highly structured individual health care plan and specialist support needed to meet health care needs. Conditions very likely to require fast staff response and administration of emergency rescue medication (e.g. epilepsy/anaphylaxis medication). Profound physical disabilities requiring specialist mobility and positioning equipment and hoisting for all activities. High level use of assistive technology for all areas of development. Need for detailed holistic multi-agency planning.	Score of above 90 points on the NATSIP* Eligibility Framework for Scoring Levels – Hearing Impairment. Typical Profile for Level 6 1 hearing impaired pupil. Profound, bilateral hearing loss (sensor-neural or mixed) or Auditory Neuropathy/Dysynchrony Spectrum Disorder. The pupil will be using hearing aids and/or cochlear implants and a radio aid or be a first language BSL user and use BSL as their only language. They may have a range of difficulties that requires an alternative or augmented (AAC) communication system. Their site of the lesion of their hearing loss will have a direct impact on their language, thinking and literacy development, as well as their interaction and social development. They will require a very high level of differentiation in order to access the curriculum. They will be known to SALT services. Family and staff will require ongoing, intensive training in managing equipment and ensuring inclusion. The pupil is unlikely to become an independent user of their equipment.	Score of above 70 points on the NATSIP* eligibility framework. Typical profile for a level 6 pupil with vision impairment. NatSIP Criteria –Profound loss – Less than 6/60 SnellenKay (LogMAR 1.02) Pupils will have a bilateral impairment. Pupils will have significantly impaired functional vision This is highly likely to be compounded by other problems such as visual field loss, ocular motor impairment, visual perception difficulties or the presence of degenerative visual conditions. The pupil may have little functional sight or be educationally blind and needs will be permanent and lifelong due to the nature of their disability. They may have MDVI (multi disability and visual impairment), deteriorating conditions and cerebral visual impairment. Some of the provision for a complex needs pupil may cross the different categories of need. They will require printed materials to be modified to ensure access to learning. They will require provision of specialist equipment and are likely to be giant print/Braille users or require other tactile teaching methods and explanation to understand all new concepts. They	Pupil has a severe language and speech delay/disorder and is reliant on assistive and augmentative systems to enable them to make their needs and wishes known. The pupil has enduring significant needs. Their language levels are at pre-verbal levels. These difficulties have a significant impact on access to the curriculum. The pupils needs are likely to be part of a complex diagnosis encompassing a significant needs across a range of areas.	The pupil rarely begins social interaction, and when he or she does, makes unusual approaches, to meet needs only, and responds only to very direct approaches. The pupil shows great distress in changing focus or activity. Restricted repetitive behaviours markedly interfere with their functioning in all spheres, affecting daily life. The pupils may have extreme sensory challenges for most of the school day and they may be extremely motivated to follow their own (possibly sensory) agenda, which for the majority of the time overwhelms the adult-led agenda. Extreme difficulties in social motivation, which very often prevent the pupil or young person from engaging with most or all social activities. The pupil shows extremely high levels of anxiety to a degree that has a negative impact upon their wellbeing & ability to engage in all contexts. The pupil presents with extremely high levels of hypo/hyperactivity to sensory input and unusual interests in sensory aspects of the environment.	There are concerns more than once a day on 2 or more of the bullet points in the cell comment. Pupil shows very limited regard for possessions or property when in crisis. For example, damaging or destroying property and/or stealing. Crisis takes time to work through and is distressing to pupil. Inappropriate emotional responses such as self-harming as a method of support. Behaviour may be severely risky and put themselves and others at significant risk. Pupil shows only minimal regard for adults and CYP of the same age. Pupil threatens and/or resorts to physical aggression. Adults feel intimidated by the behaviour of the young person. Pupil has very limited relationships with adults and shows very limited regards or inappropriate social behaviour to certain members of staff. Other pupils are fearful and do not enjoy their company.	Pupil finds it extremely difficult to cope with most learning situations as an individual or as part of a group despite a high ratio of adult support. Any engagement with learning is all on their terms. Extrinsic rewards are not really motivating.	Pupil has a profound learning disability which affects every area of their development and functioning. They will require a high level of support for all aspects of their life. Pupil's academic attainments between P1-P4 for the majority of school career.		

Pupil Name

Enter Pupil's Name

Date of Birth

Age

Completed by

Job Role

Date Completed

Score	PD, PNI & Independence	Hearing	Vision	Speech and Language (S&L)	Social Communication / Autism Spectrum	Emotional Wellbeing	Social Behaviour	Learning Behaviour and Attitude	Learning Difficulties
0	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
1	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
2	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
3	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
4	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
5	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
6	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?
Total	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?	#NAME?

Band Identified by Matrix

#NAME?

Band to be allocated

FALSE

Notes  
Please add any comments describing where appropriate reasons for the allocated band differing from that calculated by the matrix