

ROWHILL SCHOOL ADMISSION CRITERIA

Cognition and Learning		<i>Profound needs</i>	<i>Severe needs</i>	<i>Moderate and Complex needs</i>	<i>Higher functioning needs</i>
	Cognitive ability	Working within P1-3 Profound delay – lowest .1 percentile Profiles tend to be consistent	Working within P levels 1-9 Severe delay – in lowest 1st percentile Global delay Profiles can be slightly uneven	Working within upper P levels to lower entry level. Moderate delay of LD in the lowest 3rd percentile Globally working at least 2 years behind age appropriate scores, could include SpLD	Average ability and above an able to access national levels 1 @ 2 qualifications Achieving Entry level qualifications at 19+ transfer Can have SpLD and as such profiles can be extremely uneven.
	Need types	PMLD, ASD	SLD, ASD	MLD, SLCN, ASD, SEMHLD	PD, ASD, SEMH
Social, Emotional and Mental Health	Conduct behaviour	Continually: <ul style="list-style-type: none"> • displays violence and aggression towards peers and adults • destructive and oppositional • unable to take responsibility for behaviours leading to offending and being a danger to self and others. 	Regularly: <ul style="list-style-type: none"> • oppositional and challenges authority, increasingly aggressive towards others • will steal and be destructive and will lie to absolve his/her responsibility 	Occasionally: <ul style="list-style-type: none"> • finds it difficult to work alongside peers without abuse or conflict • cannot settle to task and will interact inappropriately <p>May have a formal diagnosis of a conduct disorder</p>	Specifically: <ul style="list-style-type: none"> • Will find certain situations challenging needing specific interventions <p>May have a formal diagnosis of a conduct disorder</p>
	Learning behaviour	Continually: <ul style="list-style-type: none"> • unable to access learning due to deeply ingrained and damaged self-esteem and confidence which leads to diversion strategies including total disruption, absconding, aggression and violence 	Regularly: <ul style="list-style-type: none"> • needs direct supervision to make choices or to tackle a problem • low self-esteem often leads to non-cooperation, refusal or non-attendance • has significant language delay causing extreme frustration and avoidance tactics 	Occasionally: <ul style="list-style-type: none"> • unable to maintain concentration to set tasks or to organise self unless closely supervised • does not share or engage in a task with others or take turns • language lacks coherence, especially when trying to give an explanation • low self-esteem will lead to opting out. 	Specifically: <ul style="list-style-type: none"> • Will have SpLD that needs specific interventions/ resources to access the curriculum • Low self esteem and self beliefs about the limitations SpLD impacts on their own progress
	Emotional and social behaviour	Continually: <ul style="list-style-type: none"> • not ready for learning, as main needs are not being met. Likely to choose different paths, e.g. drug addiction/ high risk activities, family dysfunctional break down 	Regularly: <ul style="list-style-type: none"> • fails to respond to the distress of others, or finds it enjoyable • has no long lasting peer relationships. • unable to make positive approaches to others or chooses to remain isolated 	Occasionally: <ul style="list-style-type: none"> • withdrawn into self when not immediately engaged by an adult • routine, strong negative response to peer interventions and approaches 	Specifically: <ul style="list-style-type: none"> • high anxiety levels due to external factors impacts on their behaviour which can be withdrawn or challenging • on occasions this behaviour becomes overwhelming and needs careful management

		<ul style="list-style-type: none"> absconds and tries to break down any trusted relationships high safeguarding risk. NEETs, homeless 	<ul style="list-style-type: none"> highly sensitive to small changes in routine by showing anger, distress, refusal to co-operate 	<ul style="list-style-type: none"> unable to accept or respond emotionally to praise unable to collaborate in a group learning task <p>May have a diagnosis of an attachment disorder</p>	<p>May have a diagnosis of an attachment disorder</p>
	Mental health	<p>Profound mental health needs such as psychosis, severe depression</p> <p>Highly volatile, mood swings</p> <p>Self-harms persistently</p> <p>Extreme anxiety causes extreme behaviours such as threats to take own life, or total isolated and refusal to engage with any ordinary activities</p>	<p>Complex mental health such as depression, anxiety disorders which require high level specific support.</p> <p>Fears, phobias and significant eating disorders</p> <p>Drug use, alcohol use</p> <p>Flat, emotionally expressionless for majority of the time in educational environment</p>	<p>May have attachment disorders ADHD, co-morbid ASD</p> <p>Highly reactive to critics.</p> <p>Will often be open about their needs</p> <p>Many facets of ASD traits</p> <p>Evidence of significant emotional distress</p> <p>Withdrawn and unable to participate</p>	<p>Feels low self-worth due to understanding that he/she is different.</p> <p>Mental health difficulties relating to inability to accept and manage own ASD diagnosis</p> <p>Very high anxiety resulting in inability to access school</p> <p>Poor sensory integration leads to long-term medical issues</p>
Communication and interaction	Social adaptability	<p>Rigid adherence to own agenda</p> <p>Extremely low tolerance to change can lead to out of control behaviour</p> <p>Easily distracted by various sensory stimulus</p>	<p>Resistant, challenging behaviour at times of transition.</p> <p>Significantly challenging behaviour needs time and space.</p> <p>Can self-injure, e.g. biting hand/arm when anxious about next steps.</p> <p>Often requires physical interventions to maintain safety</p>	<p>Some challenging behaviours when faced with new or different situations contexts.</p> <p>Need for routines and positive rewards</p> <p>Repetitive, obsessive stereotypical behaviors</p> <p>Interested / fixated with sensory stimuli of objects</p>	<p>May exhibit challenging behaviours when faced with new or different situations or contexts.</p> <p>Highly sensitive to small changes in routine by showing anger, distress, refusal to co-operate</p> <p>Extreme sensory sensitivities to noise, touch etc. triggering extreme behavior responses.</p> <p>Strong sense of justice resulting in challenge to/interference in authority decisions.</p>
	Social interaction	<p>Interacts only for needs and desires</p> <p>Disinhibited. Finds group situations difficult to tolerate. Will avoid/leave group or show challenging behaviour (in adult group)</p> <p>Dependent on adults to interpret needs for daily life</p>	<p>Only form relationships with highly familiar people who know the student and his/her needs well</p> <p>Beginning to tolerate a group in structured familiar situations.</p> <p>Poor/ limited awareness of being part of a group.</p> <p>Attempts to communicate but uses limited range of successful</p>	<p>Can use functional interaction strategies but needs adult support</p> <p>Can be isolated from the peers due to not knowing the social rules</p> <p>Lacks empathy and can be frustrated when isolated</p> <p>Poor understanding can lead to anxiety and challenging behaviour</p>	<p>Can be isolated from the peers due to not knowing the social rules</p> <p>May appear highly sophisticated resulting in unrealistic expectations from others</p> <p>Lack of empathy and social integration means total isolation</p>

			strategies, uses stereotypical routines, repetitive formats		Uses appropriate social behaviours/responses to mask lack of social understanding.
Social communication	<p>Very limited communication or non-verbal and unable to communicate basic needs</p> <p>No communicative intent</p> <p>Requires language to be simplified to key words only and/or supplemented with visual cues</p> <p>Adult prompts are needed to initiate.</p> <p>May have echoed responses</p> <p>Communication and anxiety relayed through extreme behaviors as attacking others hair pulling, biting, thrashing out</p>	<p>Uses a very limited range of vocalisations and/or words in specific situations to convey basic needs.</p> <p>Misinterprets non-verbal communication e.g. watches adult faces with interest without feeling</p> <p>Sometimes requires an adult to simplify the vocabulary of an instruction or explanation that one would expect the student to understand</p> <p>Understands a limited range of key words/phrases in context</p>	<p>Uses spoken language to communicate a range of intentions e.g. requesting; commenting; greeting.</p> <p>Spoken language remains limited, used in a small number of structured familiar phrases. needs adult prompting to understand non-verbal communication and can often misinterpret</p> <p>May appear to have good language skills but has limited functional skills</p> <p>Speaks using sentences; the content is not always appropriate to the context</p>	<p>Articulate with a wide vocabulary which will not always match understanding</p> <p>Highly skilled and knowledgeable about topics of interest</p> <p>Can take independent decisions but may be unable to fully calculate the associated consequences/risks.</p> <p>Forms relationships with some peers/groups of peers</p> <p>Vulnerable to bullying by others for being 'quirky'/different.</p>	
Social imagination	<p>Ritualistic behaviour</p> <p>When left without adult structure will revert to their idiosyncratic rituals</p> <p>No concept of sharing</p> <p>May occasionally participate in chase games on own terms</p> <p>Spends most of the time stimming</p>	<p>Some play routines, limited repertoire e.g. plays same story/game in same way every time.</p> <p>Only expands range when specifically taught and when left without adult structure may revert to their idiosyncratic play.</p> <p>Resists sharing and turn taking, can tolerate confident adult guidance cues to teach sharing</p> <p>Fixated behaviour in related to a specific stimuli or interest</p>	<p>Can play limited games with a trusted friend but each will stick to their own part.</p> <p>Still needs adults to intervene to ensure games continue or end in arguments</p> <p>Reluctantly play collaboratively to solve problems but prefer to play in parallel</p> <p>Prefers to be alone at social times</p> <p>Fixated behaviour in related to a specific interest</p>	<p>Aware of own sexuality but may have limited understanding of how to express this leading to vulnerability and risk.</p> <p>Entrenched behaviours due to an inability to collaborate understand different perspectives</p> <p>Excellent IT skills may lead to vulnerability with social media skills</p> <p>Uses different media to develop social imagination but in reality it is echoed e.g. talking in American accent/ cartoon-like.</p>	
Speech and Language Impairment (SLI)	<p>Formal diagnosis of a severe specific language impairment or disorder</p>	<p>Formal diagnosis of a severe specific language impairment or disorder</p>	<p>Formal diagnosis of a severe specific language impairment or disorder</p>	<p>Extent of SLI difficulties can be masked by comparatively very good social skills.</p> <p>Poor understanding results in disengagement from the curriculum and a reluctance to persevere.</p>	

Sensory and or physical needs	Care needs	Requires a range of specialised care support to carry out daily functions including toileting, feeding and mobility.	Requires specific care needs to carry out daily personal needs e.g. feeding, mobility	Requires resources to allow personal independence skills.	A range care needs allied to co-morbidity with other complex needs require a specific sensory environment
	Health needs	Unstable health condition causing an unpredictability in the way the child's needs present Has a degenerative condition Healthcare plans in place	Controlled health condition although changes to the medical regime can have an impact Healthcare plans in place	Well controlled health condition rarely presents a significant barrier Healthcare plans in place	A range of health and medical conditions allied to co-morbidity with other complex needs require a specific sensory environment
	Sensory needs	Profound sensory Impairment, e.g. Non-Verbal, profoundly deaf, blind or MSI and requires extremely specialised support, environment and resources/ communication aids	Severe impairment with speech, hearing or visual. Highly specialised environment and resources and communication aids.	Moderate HI and VI, speech is supported by specific input and technology/ environment	A range of HI and VI allied to co-morbidity with other complex needs require a specific sensory environment
	Physical disability	Profoundly disabled and needs extremely specialised support, environment and resources	Severe disability is supported by high level of support and a highly specific environment/ resources	Disability needs specialist resources and support	A range of PD allied to co-morbidity with other complex needs require a specific sensory environment

Key:

Limited intake

Primary intake only

Core intake