



ROWHILL SCHOOL

Admissions Policy

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Responsibilities

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Key school staff member & role	Geoff Bartrum - Headteacher
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1. Mission Statement

That all students should aspire to be:

- successful learners
- confident individuals
- responsible citizens
- and effective contributors

2. Vision Statement

As a specialist school that supports pupils with a range of complex special educational needs (SEN), we endeavour to employ a highly-skilled, flexible workforce who will provide support which intends to meet the aspirations of our mission statement, working closely with a range of stakeholders and partners to enhance student outcomes.

3. Ethos and Values

The school aims to be positive, innovative and demanding with high expectations while balanced with high levels of support for each pupil's well-being. The values we believe are needed to attain this ethos include:

- teamwork, partnership and support to ensure the best possible learning environment is created
- personal responsibility and leadership to ensure everyone understands their roles within the school and feels a sense of belonging and achievement
- innovation, creativity and change to ensure that the school remains at the cutting edge of teaching and learning and behavioural development
- resilient, optimistic and positive to ensure all pupils learn to cope with success and failure, to develop self-esteem
- challenge, opportunity and recognition to ensure all possible avenues for development are investigated and achievement rewarded
- honesty, trust and compassion to ensure we become an emotionally intelligent community capable of understanding the feelings of others



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4. Description of the school

Rowhill School is a co-educational school for primary and secondary pupils with significant Social, Emotional and/or Mental Health (SEMH) needs.

Approximately two thirds of pupils are of secondary school age; All pupils have an Education, Health and Care Plan (EHCP) that is primarily for their SEMH needs. However, a significant number of pupils also have additional needs associated with, for instance, autism or speech and language needs.

The school allows for up to 150 student placements, within a range of class-based settings, that all have their own specific cohorts/needs, identified outcomes and provision.

Many pupils receive support from other agencies, such as social services, the youth offending service, and child and adolescent mental health services. More than a tenth of pupils are children who are looked after by the local authority.

Key Stages 3 and 4 pupils receive part of their education in other settings, such as Hadlow College, Challenger Troop and the Archway Project.

5. School admission arrangements

The admission of children with Education, Health and Care Plans to schools is a matter for the Local Authority, who has statutory responsibility for arranging their provision. There are admissions criteria for each Special School, and these are applied in order to determine if a particular special school would be a suitable placement.

The SEN Assessment and Placement Service fulfils Kent County Council's (the Local Authority's) statutory duties in relation to special educational needs and disabilities (SEND), particularly in relation to SEN assessments

The service:

- Monitors the Child and Young Persons progress via annual review within Specialist placements
- Is responsible for issuing and updating EHC Plans
- Where an EHC Plan is issued it will monitor the progress of the child or young person via annual review



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- Where a statutory assessment is conducted it will decide as to whether an EHC Plan is issued
- Makes decisions about whether to conduct a statutory assessment, ensures annual reviews take place

Since September 2014, the service has been responsible for fulfilling duties arising from the Children and Families Act 2014 and the revised SEND Code of Practice.

The SEN Assessment and Placement Service can be contacted via the SEN Enquiries Hub via an online form. [Contact the SEND Enquiries Hub - Kent County Council](#). Alternatively, a phone number is also available, Monday to Friday 9.00 am to 5.00 pm - 03000 419994.

6. Admissions to Rowhill School

Admissions to Rowhill are the responsibility of the Local Authority through consultation with the Headteacher. The Local Authority refers students whose EHCP identifies needs that meet Rowhill's Admission Criteria, which is outlined in Section 4 and is set out on the SEND [Matrix](#). Please also see Appendix A which includes the Matrix, which also outlines the range of needs Rowhill caters for.

The 2015 SEND Code of Practice defines Social, Emotional and Mental Health as:

6.32 Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.” (Department for Education & Department for Health, (2015)

All admissions to Rowhill comply with the legal requirements as outlined in the Equality Act 2010. As such, Rowhill does not discriminate against a student or prospective student by treating them less favourably because of their sex, race, disability, religion or belief, sexual orientation or gender reassignment.



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7. What kinds of special educational need does Rowhill provide for?

Most of the students attending Rowhill have medical diagnoses that may include Attention Deficit Hyperactivity Disorder. In addition, many students have other types of need, including, but not limited to, autism, speech and language needs, attachment difficulties and anxiety.

Students will join Rowhill either in the Primary phase of the school or at the beginning of Year 7. However, students may join at other times in the school year, as long as their year group is not full and their needs would not stop the effective education of the other students in their year group.

8. The Admissions Process

- The Local Authority Area Special Educational Needs Department will make formal referrals for placement to Rowhill. A named SEN Caseworker will send sets of relevant paperwork (Consultation Documents) to the Head teacher, requesting a response within 15 days of consultation.
- The Headteacher will consider very carefully whether Rowhill is likely to be able to meet the needs of the student, and assess whether there is capacity available to admit within their year group/the school. KCC SEN's department will be notified as soon as possible if it is felt that our setting is incompatible with the needs of the child/young person; in order that appropriate provision can be sought at the earliest opportunity.
- Entry to the school will be dependent on:
 - Student needs match the descriptions in the LA and school criteria
 - Places available within the cohort (age/ need type)
 - Additional information such as parental visit, student observation in current school, additional assessments/ information
 - Up to date paperwork.
 - Needs outlined in the Education Health Care Plan
 - The wishes of the parent/carers
 - The nature of the child's needs and previous educational experiences (if applicable)
 - Pupils whose learning difficulties cannot be met in a mainstream school
 - Recommendations of the referring body



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- Good practice is that observation and/or assessment meetings with pupils will be needed to ensure the placement is correct.
- We will assess pupils who are referred in their existing schools before they are offered a place to ensure that we can meet their needs and that the placement is appropriate.
- If the decision is made that the school can potentially meet individual needs, a senior member of staff from Rowhill may visit the student; alternatively, arrangements will be put in place for parents/carers to visit the school. These meetings will enable the school to fully assess whether Rowhill is an appropriate setting to accommodate the specific needs of each student who is referred. They also give parents and carers the opportunity to look at facilities and what can be offered to their child, and to ascertain whether they also feel that Rowhill is the right environment for their child.
- Senior Leaders and Heads of Centre will make recommendations based on these visits/meetings, and the Headteacher will make the final decision regarding admission.
- The Headteacher will notify KCC's SEN department to confirm offer of placement and advise of start date. Transitional arrangements will be discussed with parents/carers/settings as appropriate on a case-by-case basis.
- We visit pre-school pupils at home so that discussions are held within a familiar and more relaxed environment. Parents are given the opportunity to visit Rowhill before being admitted. Sometimes a short period of induction, including a part time placement, is employed if it will be beneficial to a child's successful transition into school.
- After admission, parents are invited to attend Rowhill to discuss with the class teacher, how their child has settled into school. All pupils admitted to the school will have been authorised by the case worker representing the Local Authority before admission. For further information on admissions you may either contact the school **01474 705377** or the SEN Department on **03000 419994**.



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9. Visits to Rowhill School

Numerous agencies, for example health, social services, adoption and fostering services, may also signpost families to Rowhill School. Other schools and parents may also make informal enquiries to the school and be invited to visit before any formal procedure is followed. These approaches are welcomed by the school as they help other professionals and carers to gain a clearer understanding of the types of difficulties the school caters for.

10. Refusal of admission

The governors reserve the right to refuse admission in the following cases:

- Places are fully subscribed and admitting pupils over this number would be incompatible with the provision of efficient education or the efficient use of resources
- The school would be unable to meet the needs of the pupil
- Admission of a pupil would compromise the Health and Safety of pupils and/or staff within the school, or would seriously compromise or disrupt the education of pupils already within the school

For more information on the SEN admissions process please follow the link below.

<https://www.kent.gov.uk/education-and-children/special-educational-needs>

Advice for parents and guardians on school admission appeals

<https://www.gov.uk/government/publications/admission-appeals-for-school-places/advice-for-parents-and-guardians-on-school-admission-appeals>

APPENDIX A – MATRIX: Rowhill School Admissions Criteria

ROWHILL SCHOOL ADMISSION CRITERIA					
		<i>Profound needs</i>	<i>Severe needs</i>	<i>Moderate and Complex needs</i>	<i>Higher functioning needs</i>
Cognition and Learning	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: • 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: • oppositional and challenges authority, increasingly aggressive towards others • will steal and be destructive and will lie to absolve his/her responsibility	Occasionally: • finds it difficult to work alongside peers without abuse or conflict • cannot settle to task and will interact inappropriately May have a formal diagnosis of a conduct disorder	Specifically: • Will find certain situations challenging needing specific interventions May have a formal diagnosis of a conduct disorder
	Learning behaviour	Continually: • 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: • 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: • 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: • 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: • 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: • 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: • withdrawn into self when not immediately engaged by an adult • routine, strong negative response to peer interventions and approaches	Specifically: • 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 at times of transition.</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

- END OF POLICY -