



An Chomhairle Náisiúnta  
um Oideachas Speisialta  
National Council  
for Special Education

# **Toolkit**

## **Deployment of SNA Support**

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## ***Key Principles to Guide the Implementation Process***

1. All students, irrespective of additional care needs, are welcomed and enabled to enrol in their local schools.
2. Schools make the necessary adaptations to include students with additional care needs. School staff can make necessary adaptations to the teaching, learning, social and physical environment.
3. Additional supports are deployed and managed effectively by schools to support those students with additional care needs who most need them.
4. Allocation and deployment of supports is flexible and responsive to students' needs and focused on delivering the right supports to meet additional care needs at the right time.
5. The use of additional care supports is focused on the development of students' independence so they are enabled to live independent lives when they transition from school – in line with their individual abilities.
6. Additional care supports are used to promote better outcomes for students.
7. Parent/Guardian(s) engagement in their child's education is of central importance.
8. Student participation and engagement in learning and other aspects of school life is promoted. Students will be central to the decision-making process about how they are to be supported in school.

Comprehensive Review of the Special Needs Assistant Scheme (2018) NCSE Policy Advice Paper No. 6, 2018 <https://ncse.ie/policy-advice>

## ***Planning***

### ***Planning Template to Guide the Allocation of Additional Care Supports for Students with Special Educational Needs***

<p><b>Step 1:</b></p> <p>Identifying a student's needs</p>	<ul style="list-style-type: none"> <li>• Review existing information on the student's needs, using school-based data and information from former placements/schools, parents and external professionals.</li> <li>• Engage in additional screening and data gathering as required, using informal and formal assessment approaches (e.g. observation, information on social engagement and emotional regulation, and relevant professional reports).</li> <li>• Identify all concerns and/or supports required for the student, which may include academic, social, emotional and/or care needs etc.</li> <li>• Primary Care Needs and/or Secondary care associated tasks (see Examples of Primary Care Needs) must be identified as part of this process before any care need support can be considered.</li> <li>• Actively engage and collaborate with parents/guardians to elicit their views.</li> <li>• Capture the voice of the student at this, and all stages of the process below.</li> </ul>
<p><b>Step 2:</b></p> <p>Setting Goals and Targets</p>	<ul style="list-style-type: none"> <li>• Based on identified needs, the Student Support Plan is commenced/updated. Set clear targets for the student's holistic development at each level of the Continuum of Support. Additional Care Targets are also developed at this stage.</li> <li>• Schools should involve parents/guardians and students in this process, and students</li> </ul>
<p><b>Step 3:</b></p> <p>Planning intervention methods and approaches</p>	<ul style="list-style-type: none"> <li>• Identify the level and type of support required to meet targets for each student on the Continuum of Support. Schools should consider methodologies and pedagogies best suited to promoting meaningful inclusion such as differentiation, heterogeneous grouping, team teaching and small group teaching. They should also be mindful that the approaches and supports that they are using are evidence-informed.</li> </ul>

	<ul style="list-style-type: none"> <li>• When care needs are identified, consider how these can be supported. Consider the broad range of supports that may be available for the student to maximise their ability to participate independently; e.g., peer support, SET support, assistive technology, class teacher intervention, whole-school approaches, and/or SNA support. Consider the following: 1. Which of the student’s care needs can be supported at the Whole-School/ Classroom Support Level? (Support for All). Targets at this level should always be considered regardless of level of care need identified. 2. Has the student any additional care needs that require School Support? (Support for Some) 3. Has the student additional care needs that warrant support at the School Support Plus level? (Support for a Few). Where care needs relate to behaviour is there a support plan that identifies SMART targets with agreed approaches with progress tracked?</li> <li>• If additional care needs are identified, complete the Additional Care Targets section of the Student Support File. This file will also detail the personnel best suited to deliver on the agreed targets.</li> <li>• Care needs that can be addressed at the whole school and/or class level do not require SNA support. SNA support is activated only when a student has additional care needs that cannot otherwise be addressed</li> <li>• Schools should involve parents/guardians and students in this process</li> </ul>
<p><b>Step 4:</b></p> <p>Organising early intervention and prevention programmes</p>	<ul style="list-style-type: none"> <li>• Based on identified needs, choose evidence-informed early intervention/prevention programmes to address concerns.</li> <li>• Identify time needed and staffing commitment required</li> </ul>
<p><b>Step 5:</b></p> <p>Organising and deploying support for intervention</p>	<ul style="list-style-type: none"> <li>• Cross-reference the needs of students across the Continuum and consider common needs that can be met by grouping to ensure effective and efficient use of supports. Agree which staff will cater for these groups/individuals and when and where the support will take place.</li> <li>• Where support is deemed necessary to address any additional care needs, agree who will cater for the student and when/where the intervention/support will take place, under the direction of the teacher.</li> <li>• To ensure adherence to the principles of the revised model and the appropriate and fair deployment of support, schools must consider all</li> </ul>

	<p>their students with care needs collectively when working through this part of the process.</p> <ul style="list-style-type: none"> <li>• Schools should always tailor additional care support to enable students to gradually achieve their targets as independently and as soon as is possible and appropriate.</li> <li>• In considering SNA allocation, be mindful of the requirement that students with the greatest level of need should receive the greatest level of support from SNAs.</li> <li>• The deployment of SNAs should be flexible in line with the changing needs of the student population throughout the year. All deployment should be tracked and recorded.</li> </ul>
<p><b>Step 6:</b> Monitoring, recording and reviewing progress</p>	<ul style="list-style-type: none"> <li>• Establish a tracking and recording system (register of Students Template) to monitor all students receiving support and the nature and focus of the support: at Whole-school/Classroom Support level by all teachers and at the School Support and School Support Plus levels by class/subject teachers and special education teachers</li> <li>• Use the review section of the School Support Plan to monitor and review each student's response to each target and strategy in their Support Plan.</li> <li>• Schools should involve parents/guardians in this process as well as reviewing and recording the voice of the student</li> <li>• For students with SNA support, good practice is for the SNA to contribute to, and to support the student to voice their views on their Additional Care Support Targets. The SNA will also assist the teacher to monitor how the student is responding to the strategies and targets chosen to address their additional care needs. This will include documenting (via observations and schedules) the progress being made in relation to the student's care needs on a day to day basis.</li> <li>• Reviews could potentially lead to the reorganisation of SNA support to reflect a student's response to intervention</li> <li>• The Self-Reflective Prompt Sheet can support schools reviewing the process by which they deploy resources for additional care needs.</li> <li>• Schools need to keep detailed records of how they deploy their SNA resources to address all of their students' additional care needs</li> </ul>

## **Register of Students Template**

### **Students with Special Educational Needs who are in receipt of approaches through the Continuum of Support Framework**

<b>Whole School and Classroom Support for All</b>				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
<b>School Support – Primary Care Needs +/- Secondary Care Associate dTasks</b>				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
<b>School Support Plus – Primary Care Needs +/- Secondary Care Associated Tasks</b>				
Student ID	Class	Description of Care Need	Area of Support	Type of Support

## School Self-Reflective Prompt Sheet

Schools may also wish to use or modify the following prompt sheets to review their additional care needs policies or to evaluate their progress in implementing the School Inclusion Model.

1. How can we **identify** students' additional care needs?
2. How can we **meet** these additional care needs?
3. How can we **monitor and report** on progress?
4. How can we **encourage parent/guardian involvement** in their child's care needs?
5. How can we capture the **voice of the student** when planning for independence?
6. How can we **plan at whole-school level** to ensure effective provision for students with additional care needs?

The prompt sheets below are intended for use by the school to inform deployment of resources for Care Needs. Ideally, the prompt sheets should be completed collaboratively by school staff and the prompts themselves should serve as a stimulus for reflective practice

**How can we identify students' Primary Care Needs?**

**How do we use the Continuum of Support and Support Plan to provide a documented and staged-approach to identifying students' needs?**

- *When do we decide to develop Care Support Targets?*
- *Do we consider individual needs across a broad range, including social, communication, emotional, behavioural?*
- *Do we identify environmental and contextual issues which need modification (visual, hearing, physical, sensory)?*
- *How often are Care Targets developed and reviewed and who should be involved in this process?*

**How do we gather the information we need to inform our decision-making so that we can provide the greatest level of support to those with the greatest needs?**

- *What observational records help us with identifying needs?*
- *What types of assessment help us with screening and identification of needs?*
- *How do we integrate information from students, parents, therapists, external professionals and other education settings to assist with identification of needs?*

**What are our strengths?**

**What are our areas for improvement?**

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

**How can we meet these Primary Care Needs?**

**What steps are teachers taking to exercise their primary responsibility for the care needs of all students in their classes?**

- *What strategies are employed at class level to overcome barriers to participation?*
- *How is learning broken down into logical and manageable steps to ensure appropriate learning challenges for all?*
- *To what extent are activities co-operative, collaborative and hands-on?*
- *Are there any standards or statements of good practice from Looking at Our Schools (2022) which would be useful in providing for better learning experiences and outcomes for our students?*

**How do our management, class/subject teachers, special education teachers and SNA collaborate to meet the needs of students and to ensure their progress?**

- *How do we use intervention programmes in our mainstream classrooms across the school?*
- *How do all staff work together to support students with social, emotional and behavioural needs?*

<b>What are our strengths?</b>	<b>What are our areas for improvement?</b>

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

**How can we monitor and report on progress?**

**Are we using a problem-solving approach to planning and review which results in the devising of clear targets relevant to our students' priority care needs?**

- *How do we set targets and devise plans for our students which identify needs and which can be monitored and recorded?*
- *How do teachers, special education teachers and SNAs collaborate around the development and review of support plans?*
- *How do we monitor the effectiveness of our approaches towards promoting independence and the wellbeing of our students?*
- *To what extent have we explored the possibilities for assistive technology?*

**Who do we consult with and what is involved in monitoring the outcomes/progress?**

- *How do we involve parent/guardian(s) and students in monitoring progress?*
- *How do we communicate the progress our students have made?*

<b>What are our strengths?</b>	<b>What are our areas for improvement?</b>

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

**How can school staff encourage parental/guardian involvement in their child's care needs?**

**How is our school staff encouraging parental involvement in their child's care needs?**

In reflecting on and reviewing a school's existing practice in encouraging parental involvement the following questions could be considered, both in terms of existing and future actions:

- *How is the parent body involved in and informed about the development of special education needs provision and policy?*
- *How parents/guardians are meaningfully involved when SNA supports (for example Targeted School Support/Intensive School Support) are being considered for their child?*
- *How are parents/guardians fully involved in a truly collaborative manner in the drawing up of their child's primary care targets?*
- *How do we capture and value the information and expertise that parents/guardians hold regarding their own child?*
- *Do we involve parents/guardians at each level of the Continuum of Support process?*
- *Is there an agreed mode of communication between home and school? How regular is this communication?*
- *Can we do more to encourage parental/guardian involvement in supporting their child in school?*
- *Do we provide opportunities for parents/guardians to learn more about special education issues through contact with other agencies and services?*
- *How can we support staff members in engaging effectively with parents/guardians?*
- *Are there any standards or statements of good practice from Looking at Our Schools (2022) which would be useful in encouraging parental/guardian involvement in their child's care needs?*

What are our strengths?	What are our areas for improvement?

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

**How can school staff capture the student voice in planning for independence?**

**How is our school staff facilitating the voice of the student in capturing Primary Care Needs and planning for independence?**

In reflecting on and reviewing a school’s existing practice in encouraging student voice, the following questions could be considered, both in terms of existing and future actions:

- *How are the students in the school involved in and informed about the development of special education needs provision and policy?*
- *Is our practice informed by the Lundy Model of Participation using the four elements of Space, Voice, Audience, and Influence to give students a meaningful voice in decision-making? <sup>1</sup>*
- *How students are meaningfully involved when SNA supports (for example School Support/ School Support Plus) are being considered for them?*
- *How are students fully involved in a truly collaborative manner in the drawing up of their primary care targets?*
- *How do we capture and value the information and expertise that students hold regarding their own care?*
- *How do we capture the voice of students who are minimally verbal and use an alternative form of communication?*
- *Do we involve students at each level of the Continuum of Support process?*
- *Can we do more to encourage student involvement in school?*
- *Do we provide opportunities for students to learn more about diversity through contact with other relevant staff?*
- *How can we support staff members in engaging effectively with students?*
- *Are there any standards or statements of good practice from Looking at Our Schools (2022) which would be useful in encouraging student involvement in their care needs?*

<b>What are our strengths?</b>	<b>What are our areas for improvement?</b>

<sup>1</sup> Department of Children, Equality, Disability, Integration and Youth. (2021). National Framework for Children and Young People’s Participation in decision-making. Dublin: Government Publications

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

**How can our school plan at whole-school level to ensure effective provision for students with primary care needs?**

**How do we plan at whole-school level to meet the needs of students with additional care needs?**

- *How do we foster an inclusive approach to address the variability of students in our school?*
- *How do we promote students' sense of connection to their school, peers and teachers? Have we reviewed our ongoing professional development needs, with reference to quality teaching and learning in both the mainstream classroom and special settings?*
- *How do we consult with parents/guardians in relation to the care supports and strategies being used in our school?*
- *How do we foster student engagement and participation in the life of the school?*
- *How do we plan for transitions into the school and onto other settings?*
- *How do we plan for transitions within the school (e.g. mainstream and special class)?*
- *Have we established procedures/protocols for liaising with support services?*

<b>What are our strengths?</b>	<b>What are our areas for improvement?</b>

**How can we improve? Agreed Actions:**

- 1.
- 2.
- 3.

In reflecting on and reviewing a school's existing practice in encouraging parental and student involvement the following points could be taken into consideration, both in terms of existing and future actions:

### **Parental/Guardian Involvement**

- How are parent(s)/guardian(s) consulted and informed about the nature of primary care needs provision and policy in school?
- How are parent(s)/guardian(s) consulted when primary care need supports are being proposed for their child?
- Do we involve parent(s)/guardian(s) at each level of the planning process?
- How is regular communication facilitated with parent(s)/guardian(s) who have a child with a primary care need?
- What barriers might prevent parent(s)/guardian(s) from being fully involved in supporting their child in school? For example, cultural, language, adult literacy and mental health. What may be helpful in overcoming these barriers?
- Do we provide opportunities for parent(s)/guardian(s) to learn more about diversity and special education issues through contact with other agencies and services?
- How can we support staff members in engaging effectively with parent(s)/guardian(s)?

## Student Involvement

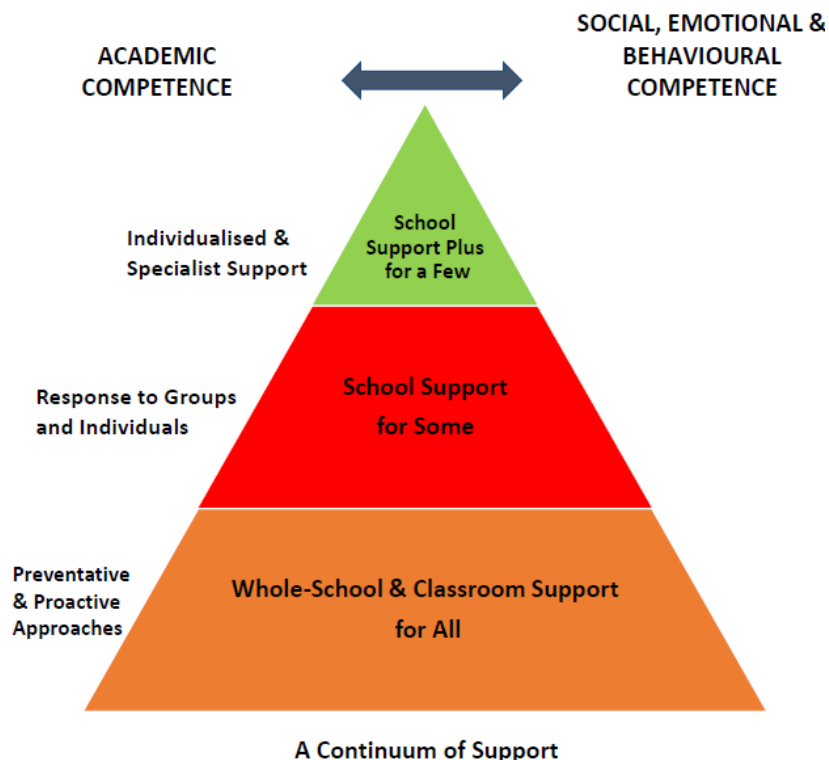
- Does student involvement inform the planning process?
- How do we regularly and appropriately capture and act upon the voice of the student and encourage their involvement in relation to their care supports and strategies employed?
- Do we vary the tool or method to capture student voice depending on their strengths, needs and preferred communication style?
- Do we provide continuous opportunities for the student to tell us if something has changed in relation to their needs?
- Do we consult all students when we are reviewing their supports?



## Student Support File – Incorporating Primary Care Support Targets

Insert school logo here

<b>STUDENT SUPPORT FILE</b>	
<b>Name of Student</b>	
<b>Date of Birth</b>	
<b>School</b>	
<b>Date File Opened</b>	
<b>Date File Closed</b>	



Developing a student support plan is the outcome of a problem-solving process, involving school staff, parent(s)/guardian(s) and the student. We start by identifying concerns, we gather information, we put together a plan and we review it.



## Support Checklist

Name:		Age:	Class:
	General Information	Date Checked	Comments
1.	Parents/Guardians Consulted		
2.	Information from previous setting or preschool gathered		
3.	Hearing		
4.	Vision		
5.	Medical Needs		
6.	Basic Needs Checklist completed		
7.	Assessment of learning– screening tests		
8.	Observation of learner preferences		
9.	Behaviour Observation		
10.	Student Consultation		
11.	Barriers to learning identified		
12.	Learning Environment adapted		
13.	Yard/school environments adapted		
14.	Informal or formal consultation with external professionals		
15.	Consultation with Special Education Teacher and/or other school staff		
15.	Other approaches put in place in school		
Action needed			

## SUPPORT PLAN\*<sup>2</sup>

Classroom Support (Support for ALL)  
School Support (Support for SOME)  
School Support Plus (Support for a FEW)

To be completed by the teacher(s).

For help, see SEN: A Continuum of Support–Guidelines for Teachers: BESD: A Continuum of Support– Guidelines for Teachers pp.71-74; A Continuum of Support for Post Primary Schools, Resource Pack for Teachers, pp.51,53,54,57.

Student's name		Age	
Lead teacher		Class/year	
Start date of plan			
Review date of plan			
Student's strengths and interests			
Priority concerns			
Possible reasons for concerns			
Targets for the student			
Strategies to help the student achieve the targets			
Staff involved and resources needed			
Signature of parent(s)/guardian(s)			
Signature of class/subject teacher			

<sup>2</sup> A consultation with a NEPS psychologist/other professionals may contribute to this plan.

## SUPPORT PLAN CONTINUED: PRIMARY CARE SUPPORT TARGETS (where additional care needs are identified)<sup>3\*</sup>

*To be completed by the teacher(s) in consultation with parents/guardians and staff supporting the additional care needs of the student. The voice of the student should also be captured as part of this process, as appropriate.*

Long-Term Care Goals	
Care Targets(incorporating the voice of the student)	
Strategies to help the student achieve the care targets	
Staff, including support staff, involved:	
Parent/Guardian input	
Frequency of support	
Timeline for achievement of targets:	
Review date	
Signature of parent(s)/guardian(s)	
Signature of teacher	

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<sup>3</sup> \* A consultation with a NEPS psychologist/other professionals may contribute to this plan.

**SUPPORT PLAN REVIEW RECORD\***

Classroom Support (Support for ALL)  
 School Support (Support for SOME)  
 School Support Plus(Support for a FEW)

*To be completed by the class/subject(s) teachers when reviewing the Student Support Plan, to inform future targets, in collaboration with parents/guardians, the student and staff supporting the additional care needs of the student.*

For help, see SEN:A Continuum of Support–Guidelines for Teachers; BESD: A Continuum of Support– Guidelines for Teachers; A Continuum of Support for Post Primary Schools, Resource pack for Teachers; Student Support Teams in Post Primary Schools.

Student's name	Class/year	
Names of those present at review	Date of Review	
What areas of the plan have been most successful and why?		
Since the start of the plan, has anything changed in relation to the original concerns? If so, what are these changes, and what have we learned from them?		
Have the student's needs changed since the start of the plan, and if so how?		
Recommended future actions—what, how, who, when?		
Any comments from the student?		
Any comments from the parent(s)/guardian(s)?		
Signature of parent(s)/guardian(s)		
Signature of teacher(s)		
<b>Outcome of review</b>		
<input type="checkbox"/>	Revert to previous level of support— Support for All/Support for Some/Support for few	<input type="checkbox"/>
<input type="checkbox"/>	Continue at Current Level of Support	<input type="checkbox"/>
		Progress to next level of support— Support for all/Support for some/Support for a Few
		Request consultation with other professionals

\* A consultation with a NEPS psychologist/other professionals may contribute to this review

## SUPPORT PLAN REVIEW RECORD CONTINUED: FOR ADDITIONAL CARE SUPPORT TARGETS (where identified)\*

*To be completed by the class/subject(s) when reviewing the Student Support Plan, to inform future targets, in collaboration with parents/guardians, the student and staff supporting the additional care needs of the student.*

What care targets have been most successful and why?			
Since the start of the Support Plan, has anything changed in relation to the original concerns? If so, what are these changes, and what have we learned from them?			
Have the student's additional care needs changed since the start of the plan, and if so how?			
Feedback from the student re: his/her progress			
Comments from the parent(s)/guardian(s):			
Recommended future actions—what, how, who, when?			
Signature of parent(s)/guardian(s)			
Signature of teacher(s)			
<b>Outcome of review</b>			
<input type="checkbox"/>	Revert to previous level of support—Support for All/Support for Some/Support for few	<input type="checkbox"/>	Progress to next level of support—Support for all/Support for some/Support for a Few
<input type="checkbox"/>	Continue at Current Level of Support	<input type="checkbox"/>	Request consultation with other professionals

\* A consultation with a NEPS psychologist/other professionals may contribute to this review.

## Examples of Primary Care Needs requiring additional adult support

In line with Department of Education Circular 0030/2014

### A guide to Significant Primary Care Needs

NOTE: The description of any of the primary care needs below must be contextualised. The school must know why and how the SNA support is being used and must be working towards student independence and measuring the effect of the approaches that the SNA is assisting the class teacher with.

<b>Description of Primary Care Need:</b>	<b>A Significant Primary Care Need includes:</b>	<b>A Significant Primary Care Need does not include:</b>
Toileting	<p>Care of students who are incontinent (wearing nappies or other continence wear)</p> <p>Clean Intermittent Catheterisation (CIC) (where the student cannot self-catheterise)</p> <p>Care of in-dwelling catheter or stoma (young children)</p> <p>Changes after toileting “accidents” (young children) in conjunction with toileting programme</p> <p>May include escorting a young or vulnerable student to the toilet, if the toilet is outside the classroom and is inaccessible to the student</p> <p>A student who has primary significant care needs around toileting is a student who cannot toilet independently even with the use of appropriate strategy and re-arrangement of the environment and therefore requires SNA support</p> <p>Preserving the dignity of the student</p>	<p>Prompting a student, who does not have a toileting plan with appropriate strategies and rearrangement of the environment, to use the toilet</p> <p>Reminding a student to wipe themselves or wash/dry their hands</p> <p>Arranging clothing after use of the toilet</p>

<b>Description of Primary Care Need:</b>	<b>A Significant Primary Care Need includes:</b>	<b>A Significant Primary Care Need does not include:</b>
Feeding	<p>Feeding a student who cannot physically feed themselves</p> <p>PEG or tube feeding</p> <p>Supervision of a student who has a Feeding Eating Drinking Swallowing (FEDS) care plan owing to a risk of choking/aspiration</p>	<p>Encouraging or reminding a student to eat; assisting them in opening their lunchbox</p> <p>Supervising a student in case they overeat or put too much food into their mouth</p>
Administration of Medicine	<p>Giving medicine to a student who is unable to self-administer medications owing to age or learning or other need, according to the student care plan and school policy</p> <p>Administering emergency medication if required for conditions such as epilepsy or in the cases of sudden collapse, according to the student care plan and school policy</p> <p>Giving assistance with inhalers or nebulizer or other medicinal intervention where the student is unable to do so on account of age, learning or other need</p>	<p>Administration of medication not included in a student care plan or outside of school health policy</p>
Assistance with mobility and orientation	<p>Assisting a student whose mobility is compromised so that they use a wheelchair, walker or other aid</p> <p>Assisting students who are vision impaired to negotiate the school premises</p>	<p>Students who may trip or fall on occasion</p> <p>General management of environmental hazards e.g. moving bags and chairs</p>
Assisting teachers to provide supervision	<p>Yard supervision, in addition to teacher supervision, for students who require support on account of a significant physical disability, medical condition or behaviour of concern</p> <p>Supervision in class and during transitions for students with significant behaviours of concern</p>	<p>Supervising classes</p> <p>Supervising students with additional needs during class periods where there is a reduced curriculum</p> <p>Replacing teacher supervision on yard</p> <p>Replacing environmental adaptations</p>

<b>Description of Primary Care Need:</b>	<b>A Significant Primary Care Need includes:</b>	<b>A Significant Primary Care Need does not include:</b>
Non-nursing care needs	<p>Care of a student during a seizure</p> <p>Assisting with monitoring of medical condition for younger or vulnerable students e.g. diabetes, as part of medical response plan</p> <p>Procedures which may involve withdrawal of the student from class (younger or vulnerable students)</p>	Procedures which would normally be carried out by a medical professional
Care needs involving withdrawal of the student from class	<p>Withdrawal for brief periods to assist with medical procedures, administration of medicine</p> <p>Brief withdrawal for students who become dysregulated due to stress factors. Withdrawal should include a regulating activity as informed by information gathered from parents/guardians, the student and other relevant professionals. This withdrawal should be an exception with regular regulating activities taking place in the classroom to prevent unnecessary withdrawal. Regulation should be understood as necessary for engagement and participation.</p>	<p>Scheduled movement breaks which can be completed independently by the student or are part of an Occupational Therapy programme</p> <p>Withdrawal as a part of reward/sanction for behaviour</p> <p>To give the teacher or class a break</p>
Moving and lifting, operation of hoists and equipment	<p>Use of hoists or other equipment in order to provide toilet, personal or physical care to a student</p> <p>Lifting or otherwise transferring a student in order to provide personal care or a transfer between equipment or between floor and equipment.</p>	In general, one SNA can operate a hoist. The hoist carries the load and replaces the need for a second adult. The dignity of the student must be maintained

<b>Description of Primary Care Need:</b>	<b>A Significant Primary Care Need includes:</b>	<b>A Significant Primary Care Need does not include:</b>
<p>Assistance with severe communication difficulties, <i>arising from physical, visual, hearing, and/or social-emotional difficulties</i></p>	<p>Assisting the class teacher with Braille, Lámh, Sign Language, and augmentative and alternative communication systems</p> <p>Assisting the class teacher to adopt a total communication approach</p> <p>Preparation of class materials-large print</p> <p>Managing and transferring equipment as required</p> <p>Supporting transitions to and from classes and to and from yard time</p>	<p>Students with Developmental Language Delay</p> <p>Students with phonological difficulties</p> <p>Keeping on task</p> <p>Checking batteries for students who can otherwise do this independently</p>
<p>Behaviour Related Care Needs</p>	<p>Assisting with the implementation of the Behaviour Support Plan</p> <p>Providing additional supervision in class, for transitions and on yard, as required</p> <p>Withdrawal from class if necessary (as outlined above)</p>	<p>Using the SNA as a first response to meet behavioural needs</p> <p>Prompting a student to remain on task, follow instructions, engage in expected behaviours.</p> <p>Assisting a student with the completion of academic work missed as a result of behaviour</p> <p>Repeating teacher instructions</p> <p>Keeping on task</p>

## Register of Students Template (PRIMARY)

### *Students with Special Educational Needs who are in receipt of approaches through the Continuum of Support Framework*

Whole School and Classroom Support for All				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
RB	1 <sup>st</sup>	Flight risk	Environmental adaptations: security of yard, classroom.	Safety – environmental. Self-regulation – Class teacher and SET.
DD	SI	Some dysregulation at times	Support for regulation	In-class movement and sensory breaks.
School Support – Greater Additional Care Needs				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
AA	1st	Diabetes management	Supervision for monitoring of blood glucose levels and insulin pump	Scheduled access to SNA at 10.00, 12.00 and 2pm. Unscheduled access if A appears unwell or bloods are awry. Aim to fade away support. Use of App.
RA	SI	Toileting accidents	Scheduled access for toilet programme. Unscheduled access for changes.	Toileting programme to achieve continence. Independence in changing. Preserving dignity.
School Support Plus – Greatest Additional Care Needs				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
JS	4th	Support for mobility – wheelchair user. Toilet – catheterisation. Feeding – quadriplegic.	Full support for all aspects of daily living.	Ensure all personal care needs are met. Assistance with technology. Supervision on yard.

## Register of Students Template (POST PRIMARY)

### *Students with Special Educational Needs who are in receipt of approaches through the Continuum of Support Framework*

Whole School and Classroom Support for All				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
RB	1 <sup>st</sup> Year	Flight risk	Environmental adaptations: security of yard, classroom.	<p>Safety – environmental.</p> <p>Understanding the communicative intent of why R engages in flight and supporting those needs to reduce stress.</p> <p>Self-regulation – Class teacher and SET.</p> <p>Explicit instruction on school boundaries and school rules on leaving school grounds during yard times in SET</p>
DD	2nd Year	Some dysregulation at times	Support for regulation	In-class movement and sensory breaks.
School Support – Greater Additional Care Needs				
Student ID	Class	Description of Care Need	Area of Support	Type of Support
AA	1st Year	Diabetes management	Supervision for monitoring of blood glucose levels and insulin pump	Scheduled access to SNA at 10.00, 12.00 and 2pm. Unscheduled access if A appears unwell or bloods are awry. Aim to fade away support by end of 1st year. Use of App.
RA	1st Year	Toileting arising from medical condition	Scheduled access for toilet programme.	<p>Toileting programme to achieve independent care of stoma.</p> <p>Independence in changing.</p>

			Unscheduled access for assistance with changes due to stoma care.	Preserving dignity.
<b>School Support Plus – Greatest Additional Care Needs</b>				
<b>Student ID</b>	<b>Class</b>	<b>Description of Care Need</b>	<b>Area of Support</b>	<b>Type of Support</b>
JS	4th Year	Support for mobility – wheelchair user. Toilet – catheterisation. Feeding – quadriplegic.	Full support for all aspects of daily living.	Ensure all personal care needs are met. Assistance with technology set up for each class Supervision and assistance in accessing clubs and groups at break times.