Rationale

Crescent English High School provides all students with full access to a broad and balanced curriculum and learning opportunities appropriate to their individual needs. In addition we provide the best possible provision for students of all abilities and value the individuality, talents and gifts of all our students. The school is fully committed to further developing our inclusive philosophy by considering admissions, participation and equity refers to the fact that students who experience SEND have the same right as all other students. This includes the right to be admitted to a preferred school where they are able to engaged and participate in quality learning experiences alongside same aged peers’.

This policy and information is based on the statutory requirements laid out by

- Dubai Inclusive Education Policy Framework
- Implementing an inclusive education – A guide for Schools
- Federal Law 2006
- Dubai Law 2014 (no.2)
- Executive Council Resolution No. (2) of 2017 – Regulating Private Schools in the Emirate of Dubai including Article 4 (14), Article 13 (16), Article 13 (17), Article 13 (19), Article 23 (4)
- A revised categorization framework for students of determination (2019-20)

A culture for inclusion requires a progressive development of attitudes, behaviors, systems and beliefs that enable inclusive education to become a norm which underpins school culture and is reflected in attitudinal, organizational and pedagogical discussion and decisions. Inclusive education is about ensuring access to quality education for all students by effectively meeting their diverse needs in a way that is responsive, accepting, respectful and supportive. This is evident through student engagement and participation in an education programme within a common learning environment with the benefit of targeted support which enables the reduction and removal of barriers that may lead to exclusion.

Vision:

At Crescent English High School we believe passionately in the importance of inclusion and equality for all children and adults especially students who are experiencing SEND. We believe in every classroom all ability students will learn and fully achieve their personal, social, emotional and academic needs in a safe, supportive, engaging and appropriately challenging common learning environment. All our children will receive an equal opportunity and mutual respect to fulfil their potential in all aspects.
**Mission**

- Ensuring students from different backgrounds and with different abilities learn together in an inclusive environment and create a culture of collaboration
- Promoting an environment of safe, supportive, mutually respected, where diversity is accepted, accommodated and success celebrated
- Enabling students to become active, responsible and self-confident to achieve their maximum potential by eradicating all forms of barriers.
- To provide high quality teaching to ensure all students Personal, Social, Emotional, cultural, Physical and academic needs are fully met in a safe and challenging learning environment.

**Objectives**

- To ensure school admission policy is enables to accommodate a diverse population where individual needs are accommodated
- To promote positive perceptions of pupils with additional needs within the school community, so that inclusive provision is positively valued and accessed by staff and parents.
- To ensure students individual need/s are identified and assessed timely and interventions are designed accordingly.
- To enable access to the curriculum through differentiated planning/ accommodation/ modification by subject teachers with the support of IST members and learning support staff as appropriate;
- To continually monitor the progress of all students by reviewing the current practices and adjust further if progression is below expectation.
- To signpost support for students with Gifted and Talented
- To ensure parents are involving every stages of their child’s development and shares their ideas and views for better practice
- To promote mindfulness where social, emotional and physical wellbeing practiced
- To provide high quality, cost-effective, time-efficient and accredited, inclusive education training and development opportunities to all staff

The school provides a high quality, accessible, flexible, inclusive and specialist educational opportunities to meet the needs of all within the school community. To achieve our aims we work closely with our partners to ensure a challenging yet caring, structured approach to the development of the school strategy plans, policies and procedures. We strongly believe every child has a fundamental right to education and has unique characteristics, interests, abilities and learning needs and styles; Our education systems is designed and all programmes implemented to take into account the wide diversity of these characteristics and needs.

**Inclusive Support Team**

In accordance with the KHDA Dubai Inclusive Education Policy Framework, the school has formed an Inclusion Support Team. This comprises the Principal, Head of inclusion, Support Teacher, Specialist teacher, Learning Support Assistant. Our nominated Champion and Governor for Inclusive Education is the Head of Inclusion. The members of IST assigned with specific roles and responsibilities for the effective operations.

We believe in diversity and support students and families to reduce exclusions, improve mental health, attendance and engagement in education and attainment.
**Governing Board**

- Ensure a fully inclusive school environment which is strategically planned and directed in line with school inclusive vision and mission.
- Governing board appointed a Governor for inclusion who can effectively support and challenge the school in terms of its inclusion vision progression.
- Holding the accountability of Inclusion Support Team which reflect the development and implementation of an effective inclusive education improvement plan.
- Ensure financial investments for targeted stages to meet the expected outcome.
- Monitoring the students’ progress and current practices in terms of expected outcome.

**School Principal**

- Promote our school vision of inclusion and commitment for an inclusive learning environment with the entire community.
- All members of school communities are expected to engage and encourage to adopt behaviors which support the school’s inclusive ethos.
- Review and update the current policies and practices and to identify areas need further development.
- Ensure school admission policy, identification, intervention, monitoring and evaluation, and resources are capable to understand and accommodate unique need/s of the students.
- Development and execution of inclusive education improvement plan.
- Ensuring staff CPD on current trends and patterns in inclusive education.
- Confirming staff receive ample support in curriculum, teaching and learning, assessment with the support of IST to ensure inclusive education practices.
- To ensure that the principles of inclusion are integral to all activities and offers students opportunities to engage in at school

**Head of Inclusion/Inclusion Champion**

- Establish an inclusive learning environments that encourage and support the active involvement of every student - physically, academically, socially, emotionally and culturally.
- Promoting inclusive culture by modelling, sharing best practices and collaborating.
- Early identification and provision planning to overcome potential barriers of the students’ learning or their full participation in school life.
- Ensure quality first teaching and provisions for all ability students, including those experiencing Special Educational Needs (SEND) or Disabilities are appropriately supported and challenged with aspirational targets.
- Ensure that flexible curricula pathways respond to the diverse cognitive, cultural and linguistic backgrounds of all students and ensure they are supported by a variety of teaching methods which accommodate a varying range of learning styles.
- Implementing evidence based intervention programmes at learning centers.
- To support teachers to carefully plan lesson activities and tasks by recognizing the learning, unique characteristics, interests, abilities, learning needs and learning styles of individual learners.
- Tracking each student’s academic, social and emotional and psychological progress by progress review and lesson observation and guide the teachers for further improvements.
- Encourage and support parent/family participation in the education process and ensure that they have every opportunity to contribute to student success.
- Monitoring the achievement and well-being of all our students and to ensure that they are participating in all activities.
- Developing and deploying our resources to best reflect the various levels of need experienced by students.
- Provide training for all staff on induction and regular training throughout the school year or when the need arises regarding SEND.
- Arrangements of meetings, report generations and storage.
- Generate age appropriate resources.

**Support Teacher**

- Work in close collaboration with classroom teachers and other educational staff to support the education of students who experience SEND in common learning environments.
- Lesson observation in terms of teaching and learning reflect student need review and further development plans.
- Support teachers will help the classroom teachers in interpreting assessment data and its use for effective differentiation in teaching and learning methods.
- Support teachers assist in planning and developing cost effective teaching learning practices, interventions, and assessments to meet and monitor the individual need/s of the students.
- Support teacher will model and share best practices/strategies which promote effective student engagement and skilful teaching practice.
- ST provide opportunities for the professional development of learning support assistants and give indications on how best to assist individual students.
- ST will perform co-teaching with the classroom teachers which enables effective differentiation.
- Support teacher will monitor and evaluate the teaching and learning practice by lesson observation.
- ST ensures teacher support is well-targeted and that success indicators are evidenced, shared and celebrated.
- Support teacher's 15 per cent of his/her time working on administrative duties, 25 per cent of their time working directly with individual or small groups and 60 per cent of their time engaged in activities that directly assist individual teachers/ other education professionals.

**Specialist Teacher**

- A member of the identification and assessment of the specific needs of individual students.
- A member of the development of specific and personalized individual education plans.
- A member of the development of instructional and educational strategies.
- Assisting teachers for the modification and adaptation of curriculum structures.
- A member of the development of appropriate assessment procedures.
- Modeling appropriate teaching strategies such as co-teaching or team teaching with the classroom teacher.
- Working directly with student(s) to determine individual needs and collect information about the student’s strengths and weaknesses and complete an IEP.
- Providing instruction to student(s) individually or in a small group in the common learning environment.
- Providing instruction to student(s) individually or in a small group outside the common learning environment.
- Maintaining effective communication with parents as well as any service providers working with the family or the child.
- Facilitating the transition of students who experience SEND from segregated in to mainstream settings.
Wellbeing coordinator

- Identifying the students who have Behavioral, social, emotional difficulties.
- Observing and engaging the students who may be at risk, liaising with teachers and IST
- Collaborate with teachers and parents to support students in their Behavioral, social, emotional difficulties.
- Observing the well-being of students within social settings and spending time within classes or in conference working with individual students.
- Implement intervention for well-being and mental health of all members in school community.
- Working alongside staff and students to promote positive relationships for all students throughout the school day; including break and lunchtimes.
- Undertaking individual or group work with students whose behavior gives us cause for concern.
- Maintain and analyze all student data and prepare programs and activities to provide support to all student plans.
- Taking a supporting role in working alongside external family support agencies.
- Provide training to all staff members and parents and update knowledge on all development requirements of students.

Classroom Teachers

- Classroom teachers are responsible for managing and creating an inclusive classroom environment by promoting inclusive values and principles.
- Teachers have a crucial role to play in maintaining positive and supportive relationships with and between students, their learning characteristics, performance level and personalized outcomes.
- Students receive high quality differentiated instruction according to their ability, needs and learning styles within a common learning environment and with appropriate challenge.
- Teachers contribute their views in the process of IEP development and its progress monitoring.
- Teachers will do assessments and monitor the progress consistently and report promptly.
- Teachers collaborate with the support team and create learning environments where curricular modifications, personalization of learning objectives, differentiation, learner centred activities and the use of inclusive techniques and assessments are ensuring learning opportunities to allow all students to access their curricular based learning goals.
- Teachers engage in coaching and co-teaching with support teachers and other professionals in multi-dimensional aspects to accommodate all students especially those with SEND.
- Teachers take the lead role in monitoring the attainment, learning, behavior and well-being of students in their class by coordinating with IST
- Teachers establishing safe learning environments which encourage and support the active involvement of every student in their physical, academicals, social emotional and cultural aspects.

Learning Support Assistants

- Contribute to the education of students in learning center and classrooms by implementing small-group and individual support as directed by class teachers and inclusion team
- Engage in class-wide monitoring of students learning (e.g., independent or small-group work) identified and planned by teachers and the Inclusion Support Team
- Prepare learning materials for use by student’s under the direction of the teacher or inclusion team
- Collect formative assessment data on student performance and progress, based on systems designed by teachers or Inclusion Support Team
- Assist students who require personal care supports (e.g., eating, using the bathroom, dressing)
- Facilitate peer interactions based on guidance from the teacher and Inclusion Support Team. Invite students to help each other and, as required, also engage in non-instructional tasks (e.g., group supervision such as in the cafeteria, on the playground, bus boarding, field trips) identified by teachers and the Inclusion Support Team
- Apply current best practices and strategies learned through professional development courses, in-service training or workshops

**School Nurses**

The school nurse has a key role in promoting and supporting inclusive practice at the School. The nurse undertakes a variety of tasks which include:
- Keeping health records up to date
- Informing SLT of medical conditions which impact on learning
- Ensuring an effective proper reporting system to the concerned persons, when students are regularly visiting clinic, visiting on a particular period, visiting without valuable reason
- Ensuring the Health and Safety of all students under the care.
- Promoting healthy lifestyles, mental health and well-being of the staff, students and parents.
- Ensuring students are sun safe

**Inclusive education Support System**

**Organizational Chart**

**Inclusive Educational Support System**

- Governing Board
- Principal/IG
- Inclusion Champion/Head of Inclusion
  - Subject Leaders
  - Class teachers
  - Specialists and Support Teachers
  - Learning Support Assistants
- Phase Supervisors
- Administrative Supervisor
- Activity In-charges
- Parents
**Students of determination**

A student of determination is a student with a long-term physical, mental, intellectual or sensory impairment which, in interaction with various barriers, restricts the student’s full and effective participation in education on an equal basis with peers of the same age. Students of determination are identified through one or both of the procedures listed below:

- through the work of a specialist and/or a knowledgeable school team, as displaying almost all of the characteristics of a particular category of impairment, delay or disorder
- formally diagnosed by a qualified and licensed medical professional as having a long term difficulty, impairment or disorder.

Learning opportunities for students of determination will be restricted if they are exposed to attitudinal, social and environmental barriers. Schools have a duty to take action to reduce or remove these barriers to ensure that all students of determination can access education on an equitable basis with their mainstream peers.

**Categories of disability and barriers to learning**

The following framework is based upon the UAE unified categorisation of disability. It provides schools with an important structure to support the identification of students of determination.

The following information expands upon each of the ‘12 categories of disability’ (identified above). It provides specific examples of the different types of difficulties, conditions or disorders associated with each category and identifies some of the barriers to learning that may be experienced by students of determination. It will support the implementation of procedures to assess and identify the needs of students of determination and will promote the development of provision that maximizes opportunities for learning and inclusive practice.
<table>
<thead>
<tr>
<th>KHDA SEND Categories</th>
<th>Cognition and learning</th>
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</thead>
<tbody>
<tr>
<td>1. General barriers to learning (Intellectual disability)</td>
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</table>
| General barriers to learning (Intellectual disability) | • delayed academic, behavioural, social, and emotional development  
• difficulty expressing ideas and feelings  
• limited ability to abstract and generalise knowledge and skills  
• a limited attention-span and poor retention ability  
• slow speech and language development  
• difficulties adapting to change and an underdeveloped sense of spatial awareness  
• low self-esteem and emotional resilience. |
| Moderate intellectual disability | • significantly delayed academic, behavioural, social, and emotional development  
• delayed speech and language  
• low levels of concentration  
• difficulty generalising and transferring knowledge across situations  
• challenges processing input from more than one sensory source at a time. |
| Severe intellectual disability | • extremely delayed academic, behavioural, social, and emotional development  
• lack of independence and reliance on others to satisfy basic needs such as feeding and toileting  
• difficulties in mobility  
• problems with generalising skills (and knowledge/understanding) from one situation to another  
• Significant speech and/or communication difficulties  
• behavioural problems  
• limited communication skills that may present as challenges with speech, body language, facial expression and the ability to interpret and/or produce images and text. |
| 2. Multiple disabilities (Multiple barriers to learning) | |
| Multiple disabilities (Multiple barriers to learning) | • restricted mobility, often requiring the use of a wheelchair  
• limited verbal communication, and may result in the student relying on signs, symbols or gestures to communicate their needs  
• behaviour that is under developed and inconsistent with chronological age  
• impulsive behaviour and high frustration levels  
• difficulty forming interpersonal relationships  
• limited self-care and independent living skills  
• a variety of medical problems; examples may include seizures, sensory loss, hydrocephalus, and scoliosis.  
• significant difficulties with physical coordination and activities that require fine and gross motor skills  
• generalisation of knowledge and skills  
• retaining basic number and literacy skills. |
| 3. Developmental delay (Barriers with typical development) | |
| Developmental delay (Barriers with typical development) | • delays in motor skills; a delay in gross motor skills may affect a child’s ability to crawl, walk, run and move around safely, whereas a delay in fine motor skills may impact upon the child’s ability to use a crayon or paintbrush, manipulate scissors, construct puzzles or fasten buttons  
• delays in speech and language which may impact a child’s ability to understand. It may also restrict children’s abilities to communicate their needs and feelings and limit the development of their negotiation, cooperation and interaction skills  
• delays in cognition may make it difficult for a child to pay attention, even for short periods, create an inability to sit still for any length of time, and be reflected in poor memory, for example when recalling learned facts or multi-step instructions  
• delays in social/emotional development may present as the child being unable to answer questions or have difficulty engaging in short conversational interchanges; they may use language solely to get needs met.  
• difficulties in managing their emotional responses may limit their abilities to regulate their behaviour  
• delays in their ability to fulfil daily living (adaptive functioning) activities which may affect the child’s ability to fulfil personal hygiene needs, clothing routines and feeding. |
### 4. Specific learning disorder (Specific barriers to learning)

#### Dyslexia
- remembering what is seen or heard
- identifying sounds in words and putting things in sequence (e.g. information, letters, stories, numbers, the days of the week, the months of the year)
- reading speed, understanding what is being read
- following directions
- personal organisation
- spelling, copying words and numbers from a book or board
- recalling the names of words or objects.
- specific barriers with reading range from mild to severe.

#### Dysgraphia
- written presentation with a mixture of upper/lower case letters, irregular letter sizes and shapes, and unfinished letters
- difficulties with using writing as a communication tool
- reduced quality in the content of their written work due to the high levels of effort needed to complete the writing process
- unusual writing grips, odd wrist, body and paper positions, which may result in discomfort while writing
- repeated mistakes; excessive erasing may be evident as may a misuse of lines and margins.
- poorly organised writing on a page; a student may struggle with organising their ideas, sentence and/or paragraph structure and have limited expression of their ideas
- reluctance to complete writing tasks or a refusal to do so.
- specific barriers with writing ranging from mild to severe.

#### Dyscalculia
- an inability to conceptualise number, number relationships and outcomes of numerical operations (estimating)
- difficulties with computation, direction, mental mathematics, money, reading and writing numbers,
- remembering sequences like, rote counting, rules and formulae
- understanding the concept of time, the ability to apply time management strategies and time management
- weaker ability to comprehend mechanical processes as they often lack ‘big picture’ thinking
- poor sense of direction
- personal organisation.

#### Specific barriers with coordination (Dyspraxia)
- difficulty coordinating their movements, perceptions and thoughts
- difficulty running, jumping, hopping and catching a ball in physical activity
- physically managing themselves in the classroom; the student may bump into and drop things and tend to find drawing and writing difficult
- difficulty maintaining an erect posture, either when sitting or standing
- experiencing high levels of fatigue due to the effort needed for physical control and movement
- difficulties with writing, due to posture and position challenges.
- mild to severe difficulties with physical coordination.

### Communication and interaction

#### Expressive language disorder
- a reluctance to talk; they may resort to pointing or gesturing to get their message across
- a lack of variation in their verbal intonation or volume
- limited imaginative play and social use of language
- difficulties describing, defining, explaining and in retelling stories/events
- limited vocabulary may result in the students using empty phrases and non-specific words
- related difficulties with writing, spelling, composing sentences/compositions and answering questions
- omission of function words such as ‘the’ and ‘is’, and grammatical markers such as tense endings
- difficulties in formulating full sentences and in the understanding of multiple word meanings
- difficulties establishing and maintaining peer relationships.
| Receptive language disorder (General barriers with language) | problems processing and retaining auditory information and following instructions and directions  
challenges with understanding what is said in group discussions  
difficulty answering open questions  
difficulty filtering out background noise  
limited verbal reasoning and difficulties remembering strings of words  
difficulty taking turns in conversation as a result of limited comprehension  
poor understanding, poor use of tone, facial gesture and body language, and/or poor eye contact  
difficulty establishing and maintaining peer relationships |
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<tbody>
<tr>
<td>Global language delay</td>
<td>Students who experience significant barriers with using and understanding verbal language may be diagnosed with a global language delay. These students may experience a combination of barriers to learning as described in the sections above (expressive and receptive language disorders).</td>
</tr>
</tbody>
</table>
| Speech fluency disorder (Specific barriers with speech fluency) | increased prolongations of words and speech may start to be especially difficult or strained  
rising pitch or loudness due to vocal tension  
an avoidance of situations that require talking or change a word for fear of stuttering  
problems with the development of peer relationships  
reluctance to contribute actively within the classroom, and to articulate their thoughts, feelings, ideas and concerns |
| Speech sounds disorder | substituting one sound for another, leaving sounds out, adding sounds, or changing sounds  
having difficulty making themselves understood  
additional challenges with reading  
difficulties forming peer relationships and solving social problems. |
| Social communication disorder | substituting one sound for another, leaving sounds out, adding sounds, or changing sounds  
having difficulty making themselves understood  
additional challenges with reading  
difficulties forming peer relationships and solving social problems. |
| Social communication disorder (Barriers with social communication) | difficulty holding conversations and working in collaboration with others  
limited negotiation skills and challenges with solving social problems  
difficulty understanding social cues and reading body language/facial expressions  
difficulty sharing information with others verbally  
difficulty changing speech, and adapting behaviour to suit different social contexts  
limited understanding when meaning is implied but not explicitly stated through using inference and deduction. |
| 6. Autism spectrum disorder (Barriers with social interaction, communication and flexibility) |  |
| Autism spectrum disorder – level 1 (Mild barriers with social interaction, communication and flexibility) | difficulty engaging with and contributing to conversation  
inflexible and rigid thinking and behaviour causing problems with organisation and planning  
difficulties in understanding abstract ideas and concepts  
limited ability to infer meaning from social cues, hints or hidden meaning in texts  
decreased interest in social interactions or activities which may impact on ability to form relationships with peers  
limited ability to identify and solve social problems.  
high levels of anxiety, which can affect behaviour, learning, and emotional wellbeing. |
| Autism spectrum disorder – level 2 (Moderate barriers with social interaction, communication and flexibility) | rarely initiating or responding to social interactions voluntarily  
speaking only in simple sentences and limiting interactions to narrow personal interests  
unusual non-verbal communication  
significant difficulty coping with change  
restricted and/or repetitive behaviours which affect functioning in a variety of contexts |
<table>
<thead>
<tr>
<th>Social, emotional and mental health</th>
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<tbody>
<tr>
<td>• Autism spectrum disorder – level 3</td>
</tr>
<tr>
<td>- very limited range of recognisable speech or a complete absence of speech</td>
</tr>
<tr>
<td>- a dependence upon key visual symbols or sign language gestures to communicate</td>
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<tr>
<td>- limited interactions that are usually only made to get their personal needs met</td>
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<tr>
<td>- very inflexible behaviour and extreme difficulty and distress coping with change</td>
</tr>
<tr>
<td>• Social, emotional and mental health</td>
</tr>
<tr>
<td>- 7. Psycho-emotional disorders (Emotional and psychological barriers)</td>
</tr>
<tr>
<td>• Depression (Significant barriers with feeling positive and motivated)</td>
</tr>
<tr>
<td>- noticeable changes in their involvement and engagement in social activities</td>
</tr>
<tr>
<td>- loss of interest in school</td>
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<tr>
<td>- reduced/poor academic performance</td>
</tr>
<tr>
<td>- frequently feeling sad, tearful or crying</td>
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<tr>
<td>- persistent boredom and/or low energy</td>
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<tr>
<td>- social isolation</td>
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<tr>
<td>- poor communication</td>
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<tr>
<td>- extreme sensitivity to rejection or failure</td>
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<tr>
<td>- increased irritability</td>
</tr>
<tr>
<td>- anger, hostility or self-destructive behaviour.</td>
</tr>
<tr>
<td>- difficulty forming and/or maintaining relationships</td>
</tr>
<tr>
<td>• Bi-polar disorder (Signification and persistent barriers regulating mood)</td>
</tr>
<tr>
<td>- daily and seasonal fluctuations in mood and energy (being more attentive to classwork at certain times and less attentive at others)</td>
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<tr>
<td>- being a perfectionistic and having difficulty in transition times during the school day</td>
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<tr>
<td>- appearing grumpy and very sleepy during the first half of the day due to disaffected sleeping patterns</td>
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<tr>
<td>- having difficulty interacting with peers because of poor social skills (being bossy and misperceiving the behaviours and intentions of others)</td>
</tr>
<tr>
<td>• Oppositional Defiance Disorder (Significant Barriers with being cooperative and staying calm)</td>
</tr>
<tr>
<td>- uncooperative, defiant, and hostile patterns of behaviour, particularly toward authority figures</td>
</tr>
<tr>
<td>- frequent temper tantrums</td>
</tr>
<tr>
<td>- excessive arguing, especially with adults</td>
</tr>
<tr>
<td>- frequent questioning of rules/defiant behaviour</td>
</tr>
<tr>
<td>- blaming others for their mistakes or negative behaviour</td>
</tr>
<tr>
<td>- low levels of self-esteem and emotional resilience</td>
</tr>
<tr>
<td>- difficulty forming and sustaining positive relationships with both peers and adults; this may impact negatively upon their ability to reach their academic potential and puts them at risk of developing additional emotional health difficulties.</td>
</tr>
<tr>
<td>• Obsessive/Compulsive disorder (Barriers with managing thoughts and compulsions)</td>
</tr>
<tr>
<td>- sustaining attention and focus due to intrusive thoughts and difficulties focusing upon the task in hand</td>
</tr>
<tr>
<td>- struggling with the perfectionism of needing to do things the ‘correct’ way</td>
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<tr>
<td>- avoiding situations that they feel are ‘unhygienic’ to avoid ‘contamination’; they may not want to sit on the floor, or pick things up that touched the floor, or get their hands dirty</td>
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<tr>
<td>- unusual tapping and touching patterns which arise due to compulsions to repeatedly and persistently engage in unusual behaviour or in an effort to manage anxieties and cope with obsessive thoughts</td>
</tr>
<tr>
<td>- high levels of fatigue due to the effort of managing thoughts, feelings and anxiety.</td>
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<tr>
<td>• Post-traumatic stress disorder (PTSD) (Barriers dealing with trauma and arousal)</td>
</tr>
<tr>
<td>- repeatedly displaying themes of the trauma in play, writing or drawing</td>
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<tr>
<td>- avoiding situations or things that remind them of the trauma</td>
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<tr>
<td>- decreased interest in activities and difficulties concentrating</td>
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<tr>
<td>- fearfulness, sadness, irritability, anger or aggression</td>
</tr>
<tr>
<td>- ‘shutting down’, with ‘emotional numbing’ or detachment from others</td>
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<tr>
<td>- decline in academic performance and impairments in social</td>
</tr>
<tr>
<td>Functioning</td>
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</tbody>
</table>
| - becoming withdrawn from teachers and friends and/or increased school absences  
| - physical symptoms such as headaches and stomach-aches  
| - being easily startled, for example when hearing sudden, loud noises  
| - being frequently ‘on alert’, hyper-vigilant or ‘wound up’  
| - telling stories of nightmares or vivid memories related to the trauma  
| - difficulty sleeping resulting in irritability at school.  

8. Attention Deficit and Hyperactivity Disorder (Barriers with attention and self-regulation)  

| ADHD – inattentive type (Barriers with maintaining focus and attention) |  
| - difficulties following routine tasks – has to be constantly reminded about routines because they appear to have forgotten  
| - difficulties with completing tasks even when motivated and engaged  
| - difficulties in paying attention during teacher-talk, resulting in mistakes when completing tasks  
| - difficulty sustaining concentration  
| - actively avoiding tasks which require sustained concentration and thought  
| - difficulties with organising their thoughts and following a sequenced plan for action  
| - a dislike for and actively avoiding tasks which require sustained concentration and thought  
| - difficulty in following instructions and may appear as if they are daydreaming.  

| ADHD – hyperactive type (Barriers with managing hyperactivity and impulsivity) |  
| - frequently fidget and find it difficult to sit still; constantly leaving their seat  
| - difficult to complete quiet tasks (such as reading)  
| - talk at a rapid pace, blurt out comments at inappropriate times or interrupting conversations or speaking out of turn 18  
| - extreme amounts of energy  
| - difficulty waiting for a turn or standing in line  
| - difficulty with self-management and organisation.  

| ADHD - combined type (Barriers with focusing attention and managing hyperactivity) |  
| - Students who experience considerable barriers with attention and managing hyperactivity may be identified with the combined type of ADHD. They will display a combination of behaviours described for both the inattentive, and hyperactive types of ADHD (above).  

9. Sensory impairments (Barriers with using the senses)  

| Visual impairment (Barriers with vision) |  
| - difficulty accessing or reading printed or written words, diagrams or images  
| - poor writing skills  
| - clumsy movement and challenges moving around safely in the classroom and around the school  
| - underdeveloped social skills as a result of not being able to respond to visual cues  
| - disordered motor skill development as a result of limited motivation to move toward that which cannot be seen or inhibition to move for fear of the unknown.  
| - poor hand-eye coordination  
| - under developed conceptual understanding as a result of limited developmental opportunities for exploration with the environment, resources and materials  
| - restricted language development as a result of restricted opportunities for active interaction with others  
| - limited independence in life skills as a result of restricted incidental learning through observation  
| - reduced ability to engage in typically expected activities alongside typically developing peers may also restrict a student’s self-esteem and emotional resilience  
| - under-developed organisational skills  

**Physical, sensory and medical**
| **Hearing impairment (Barriers with hearing)** | • delay in the development of receptive and expressive communication skills (speech and language)  
• learning problems that result in reduced academic achievement  
• limited vocabulary which in turn may affect their reading ability  
• difficulty understanding verbal and written mathematical problems, due to a need attempt to simplify these by converting them into understandable linguistic forms  
• restricted ability to focus partial hearing when exposed to background noise or poor acoustics  
• difficulty hearing their own voices when they speak. They may speak too loudly or not loud enough and may sound like they are mumbling because of poor tone, inflection, or rate of speaking  
• difficulty hearing word endings such as -s or ed, leading to misunderstandings and misuse of verb tense and pluralisation  
• understanding and writing complex sentences resulting in weaker comprehension and production of shorter and simpler sentences  
• difficulties understanding words with multiple meanings. For example, the word 'bank' can mean the edge of a stream or a place where we put money  
• experiencing feelings of isolation. |
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<td><strong>Deaf/blindness is a combination of sight and hearing loss and is sometimes called dual-sensory impairment</strong></td>
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| **Muscular dystrophy (Barriers with muscle size and strength)** | • muscle weakness in the hips, pelvis, and legs may cause the student to have difficulty standing, sitting and walking  
• difficulties moving around safely as a result of an unsteady gait; they may appear clumsy and be prone to falling over  
• difficulty expressing complex feelings related to their condition and may behave in an angry, frustrated, stubborn or withdrawn manner  
• muscle weakness and fatigue can make it difficult for students to keep up with the physical demands of handwriting, completing assignments and organising materials  
• depression and anxiety, as a result of their deteriorating conditions, may become apparent in a few ways: lethargy, withdrawal, irritability, lack of interest and poor academic performance  
• quiet voices due to the weakness of their respiratory and upper airway muscles. |
| **Cerebral Palsy (Barriers with posture, movement and coordination)** | • difficulty standing, sitting and walking due to variations in muscle tone, such as being either too stiff or too floppy  
• communication difficulties as a result of limited coordination of the muscles around the mouth, tongue and those required for breathing  
• motor planning difficulties (organisation and sequencing movement)  
• perceptual and language difficulties; which can impact on literacy, numeracy and other classroom skills and activities  
• difficulties in fine motor and gross motor coordination and communication  
• short attention span and fatigue  
• fatigue as a result of sustained concentration for movement and the sequencing of actions  
• epilepsy - seizures can affect speech, intellectual and physical functioning  
• general barriers with learning (intellectual disability). |
| **Spina Bifida (Barriers with leg movement)** | • motor problems: the ability to move, use tools, read and write  
• difficulty with concentration and as a result may struggle to keep pace in class  
• appearing fidgety and impulsive and struggling to organise themselves  
• difficulty making decisions  
• fluid build up in the brain causing seizures  
• problems with vision  
• general learning difficulties |
12. Chronic or acute medical conditions (medical barriers)

- short attention span
- high levels of fatigue,
- slowness in response,
- reduced motor coordination and control
- slowed speech
- reduced comprehension
- reduced stamina and ability to persevere.

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**Process of referral and support of existing pupils with additional needs**

**Department of Inclusion**

**Process and procedure**

**Identification**
- Admission
- CAT 4/ASSET analysis
- Referrals by teacher/parent/self in the reference form
- Internal progress analysis
- Kg – at risk

**Assessment**
- Observation checklist by teacher, parent and specialist
- Student input form
- Aston Index
- External assessments if required
- CAT4 profiles

**Inclusion Champion will give feedback to phase leaders, class teachers, subject teachers and parents.**

**Student registered SOD register upon parent permission**

**IST together with teacher prepare individual plans other support strategies**

**IC share the plan and targets to all partners.**

**Students' progress reviewed regularly and update with all the partners**

**IST and teachers will monitor the progress of the student.**

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**Identification and assessments**

a) Identification of SEND may have occurred during the student’s enrolment at school. If this is the case parents will provide the relevant documentation in line with school admission policy. The Head of Inclusion will review along with parents and specialists and determine the appropriate provision to ensure inclusion.

b) When a concern is evident a referral will be made to the Head of Inclusion who will then liaise support teachers and collaborate with teacher and parents/external service providers will conduct the SEND assessments and to plan the best support forward together. This involve the development individual education plans, curriculum adaptation and differentiation in lessons. If the standard provisions are not suffice to overcome the concern and a significant and/or persistent difficulty remains apparent, the student will be provided with further modified education plans with or without support by external agencies.
c) CAT 4 result analysis, ASSET analysis, Internal Progress analysis, Self-Nomination, Student attendance mechanism, Early exit and late comers register, regular clinic visitors, Survey result analysis, KG screening checklist are play a vital role in identifying students who experience SEND in all aspects.

**Department of Inclusion**

**SOD Admission Flowchart**

- IC concerned raised through initial assessment or parental concern during admission time
- Meeting arranged between IC/Specialist and parents, further assessments and observations of child completed through school visits
- Relevant information gathered from all possibilities, including external services (if required)
- Professional meeting held to decide how school can meet the needs of students and expectations of parent
- Employment of LSA/ST prior to students start date in school
- Meeting with staff involved to share support strategies and target
- Meeting held with parents where they agree registration in SOD register
- Target reviewed termly with key people involved. Further modifications reflect review analysis.
- Annual review held and planning for next year
- Record keeping—Student profile showcase progress

**Identification**

- CAT 4
- ASSET
- Internal Analysis L/M/S—scoring E
- KG Readiness checklist
- Referrals
- Admission
- Clinic/CPO/exits etc...

- Listing 0-42 SAS score students.
- Listing above 126 SAS score students
- Listing stanine 1, 2, 3 score students.
- Listing stanine 9 score and 99% raw score students
- Listing who score CBSE grade E (Below 33%)
- Listing who score CBSE grade A1 (Above 91%)
- Listing who fall under “at risk”
- By Teacher, Parent, Peer, Self in the prescribed form
- Listing who score low marks in entrance
- Listing students who express inadequate behavior
- Direct identified
- Listing who frequent clinic visitors, class exit, early or late comers, CPO etc.

**Assessment**

- Formal Assessment
  - Aston Index tool
  - External assessment if required
- Informal assessment
  - Observation checklist by—Teacher, Specialist and Parent
  - Student input form by the students.
  - Student observation and grade level assessments
  - Internal mark analysis

Inclusion department carry forward multi-dimensional approach for the assessment. We have observation checklist for teacher, parent, and specialist observation form for assessments. Student input form reflect student’s views and area of need/s. Aston Index is our internal standardized assessment tool.
Parents will submit external specialist assessment reports if required, but this will not restrict the student to receive additional support in our school.

**Supports/intervention**

**Universal**
High quality learning through the provision of high quality UDL differentiated classrooms incorporating teaching based on learning theories

- Formal learning and teaching that is differentiated to need and enables the students to make good or better progress.
- On-going and timely assessments which inform any further provision needed.

**Targeted Support – some students may benefit from:**

- Individual support plans
  - IEP/ILP/CSP/BMP
  - Home management plans
  - Intervention sessions by the specialist
  - In-class support by Learning support Assistant or specialist
- Small-group intervention for students in line with their needs
  - In-class support
- We ensure students are always participating in all our school activities and clubs. Students were challenged and engaged up on their interest. Also this give a platform for the students to share and express their ideas and views which ultimately create confident independent learners.
- Wellness and happiness staff ensure students any physical, social or emotional barriers are accommodating and eradicating
- Student leadership opportunities are ensuring and creating tomorrow’s young leaders with 21st century skill sets.
- All possible CBSE exceptions are avail to our students of determination

The diversity of need experienced by students of determination requires a graduated approach to intervention, for that we group the students in to three cohorts in line with their needs.

**Level 1**: high quality teaching where teachers accommodate individual differences in ability, learning style and behaviour, through effectively differentiated classroom practice.

**Level 2**: personal support and/or curriculum modification to enable a student to engage with, and participate in, appropriately challenging learning experiences and achieve within age-related expectations. Support teachers and or in-school specialists are likely to support this process by observing lessons and making recommendations as well as providing support through professional coaching and monitoring.

**Level 3**: individualised programmes to accelerate progress or enable students to achieve their potential. This provision is ‘additional to’ or ‘different from’ the provision required to meet the needs of most of students within the school, and is likely to include the use of specialist approaches, intervention or support services.
Monitoring and evaluation

Student progress and monitoring are done in a distributive leadership pattern. Every leaders and teachers take accountability of students’ progress. IST have a structured monitoring and evaluation process. Reporting and communication system also catalyze the progress tracking. Student progress is evident in each student portfolio.
Gifted and Talent students

We ensure that we recognize, support and make appropriate provision for those pupils who have been identified as being gifted or talented according to KHDA guidelines when their current attainment or perceived potential places them significantly ahead of the majority of their peers. Also we identifies that all of our students have gifts and talents and through a broad and balanced curriculum, rich co-curricular programme and philanthropic activities will ensure that these students have every opportunity to excel.

“The term Giftedness refers to ‘a student who is in possession of untrained and spontaneously-expressed exceptional natural ability in one or more domain of human ability.’ These domains will include intellectual, creative, social, physical abilities. In the case of a gifted student, whilst exceptional potential will be present, they may actually under achieve.”

“The term Talented refers to ‘a student who has been able to transform their ‘giftedness’ into exceptional performance’. Talented students will always demonstrate exceptional levels of competence in the specific domains of human ability”

Aims

- To ensure that all pupils, have access to a broad, balanced and relevant curriculum, which meets their individual needs.
- To enable the student’s to develop to their full potential
- To offer students opportunities to generate their own learning
- To challenge and extend the students through the work that we set them
- To encourage students to develop 21st century skillsets.
**Objectives**

- To enable all staff to play a part in identifying able, gifted and talented pupils and to take responsibility for recognizing and addressing their individual needs.
- To encourage, wherever possible, an effective parent partnership in developing and implementing a joint learning approach at home and at school.
- To involve outside agencies to provide the necessary support for students.
- To help children realize his or her full potential and optimize their self-esteem.

**Identification**

- CAT4 - scores greater than 126 SAS
- ASSET- score 99% consider exceptionally able - stanine 9 are consider as abled
- Internal Assessment – Score A1 for English, Science and Mathematics across the year
- Teacher observation checklist
- Student input form
- Parent questionnaire
- External Educational Psychologists report if required
- Exceptional levels of competence in the specific domains of human ability recognition

Children who are identified as being gifted or talented are placed on the Gifted and Talented register

**Provision for Gifted and Talented students**

**Curriculum enrichment** involves departures from traditional use of time and space – fast tracking, vertical grouping, mentoring, enrichment clusters, working offsite, master classes, extension classes etc. Content consists of ideas, concepts, descriptive information, and facts. Content, as well as learning experiences, are modified through acceleration, compacting, variety, reorganization, flexible pacing, and the use of more advanced or complex concepts, abstractions, and materials. Students are challenged by questions that require a higher level of response or by open-ended questions that stimulate inquiry, active exploration, and discovery.

Our gifted students provided with the best receptive, nonjudgmental, student-centered environment that encourages inquiry and independence, includes a wide variety of materials, physical movement, is generally complex, and connects their school experience with the greater world

- Stimulation – activities and experiences which bring the student in touch with different kinds of topics or areas. This could include speakers or visits
- Creative or critical thinking – open-ended activities which allow students to escalate their thinking processes and introduce students to more advanced study
- Investigation and enquiry – following planned programmes of study from external organizations.
- Leadership – opportunities for displaying leadership skills amongst peers and the wider school learning community.
- Innovation - opportunities for entrepreneurship and enterprise to be nurtured and developed beyond the school community.
- Time for independent study
- Participation in competitions and concerts within the UAE
- Presenting work in school exhibitions
- Flip classes run by specific departments
- Participation in school and inter school team events
- School leadership opportunities
- Active participation in school innovative clubs and other activities
Assessment

- Different starting and finishing points for a task
- Extension activities to broaden a pupil’s knowledge and skills
- Encouraging a student to pursue their own lines of research and methods of presentation
- Additional time to work on a specific programme or topic to enrich and promote flexibility in the pupil’s thinking
- Opportunities to share knowledge and interests with the peer group
- Asking the student to set own learning targets
- Involving the student in evaluating own progress

Monitoring and Review

The progress of all our students is monitored carefully by class and subject teachers by formative and summative assessments. The progress of the gifted and talented student is assessed, evaluated and noted at Parent/ Teacher meetings. The Heads of Department, in liaison with the Inclusion Champion. The monitoring includes feedback from staff, parents and pupils, as well as regular classroom observations of teaching and learning.

Accessibility

Our school strongly complies with Dubai Inclusive Educational Framework 2017 and Dubai Universal Accessibility code, not to discriminate against physically challenged pupils and prospective pupils in the provision of education and associated services in schools, and in respect of admissions and exclusions.

In planning support for physically challenged pupil, to plan and draw up accessibility strategies (LSA) and accessibility plans (Infrastructure) to improve access to education and schools over time.

Data Protection

All documents relating to students on the SOD Register are stored in Department of inclusion. All relevant data and assessments reports are available in school portal for all the staff. Staffs are restricted to obtain certain information regarding the students unless adequate permissions from the authorities.

Staff CPD

School provides continuous professional development training to all staff for a fully inclusive education system especially for the students who experience SEND both internally and externally.

Complaints procedure

If a parent has any concerns or complaints regarding the safety or provisions, an appointment can be made by them to speak to the Principal or HOI or they can drop complaints form to the IST members, who will be able to advice on formal procedures for complaint.
This policy will be reviewed annually and particularly at times of significant legislative change or change in service delivery

Signed ________________________ Dr. Saleem Jamludhin  
Director

Date: 29/04/2020

Signed ________________________ Mr. Sharakudeen Thanikatt  
Principal

Date: 29/04/2020